our vision

- Excellence and innovation in health and medical research
- Better health services
- Healthier Illawarra community
It is my pleasure to present the first Annual Report for the Illawarra Health and Medical Research Institute (IHMRI).

While the Institute has existed in concept and program as an initiative of the Illawarra Health and Medical Research Hub since 2006 and the development of health and medical research in the Illawarra has progressed since that time, the establishment of the separate corporate entity, IHMRI Ltd, in April 2008 provided a formal independent structure. IHMRI Ltd, jointly owned by the University of Wollongong (UOW) and South Eastern Sydney Illawarra Area Health Service (SESIAHS), provides the high-level governance and management of the Institute’s development.

IHMRI’s point of difference as a health and medical research institute is its regional community-centred focus and its commitment to applying research to improve the health status of local residents.

By encouraging close collaboration between academic and clinical research efforts, IHMRI works to achieve results that are directly applicable to clinical practice, health service delivery and public health, leading to improvements in the health of the local community.

Working through its diverse network of health and medical researchers, IHMRI strives to foster collaboration, cooperation, coordination, networking, linking, bridging and partnering, along with better resourcing and support to advance health and medical research in the Illawarra.

A lot has been achieved since IHMRI’s establishment however three key achievements are particularly noteworthy.

The first is the consolidation of the six research themes and the three cross-cutting themes, and the leadership structure to drive those themes.

The second is securing funding from Industry and Investment NSW through the Office for Science and Medical Research which is outlined later in this report.

The third outstanding achievement is IHMRI’s headquarters, jointly funded by the University and the NSW Government. Located on the University of Wollongong campus, this world class facility was completed with relatively minor extensions to the project timeline and within budget, and the smooth relocation of researchers and equipment into the facilities is a testament to the commitment of our team.

George Edgar
Chairman
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executive summary

FROM THE EXECUTIVE DIRECTOR

A partnership between the South Eastern Sydney Illawarra Area Health Service and the University of Wollongong, IHMRI provides a unique opportunity to combine the talents of academic researchers, local clinicians and public health workers to conduct research with real potential to improve the lives of people living in the Illawarra and beyond.

IHMRI’s research program has been carefully designed to be of maximum relevance and benefit to our local community. Organised around six key research themes each relating to common health issues in the region and nationally, the program has the capacity to have a profound impact on how long and how well we live.

The model that IHMRI is building on is one that encourages researchers, clinicians, public health workers and other health professionals from multiple organisations to work together on common projects.

Our model is a promising one that is already reaping positive results. University researchers collaborating with clinicians have this year attracted major grants to deliver evidence based treatment programs in dementia and psychiatry, as well as significant funding from national competitive grant programs and private foundations.

The inclusion of a state-of-the-art clinical trials centre in our new building, where local residents have the opportunity to take part in cutting-edge studies such as trials on hypertension, smoking cessation and the treatment of chronic conditions such as diabetes, is a major focus in the immediate future.

Health and medical research is alive and well in the Illawarra, creating benefits for those who live in the region as well as having national and international impact.

Professor Don Iverson
Executive Director
FROM THE DEPUTY EXECUTIVE DIRECTOR

The Illawarra Health and Medical Research Institute has gone from strength to strength over the past year and it has been exciting to be involved in its establishment and growth.

Particularly pleasing has been the support and involvement of clinical colleagues from the local area health service, and health professionals from private and non-profit services, through our Research Network.

If we are to achieve our mission of a healthier Illawarra community, it is of critical importance that those who deliver health care to patients inform our research.

We talk of the translation of new medical breakthroughs from laboratory ‘benchtop to bedside’, but we must also recognise that just as powerful for improved health treatment is the feedback from our hospitals, surgeries and consulting rooms into medical research.

Before any new, research-based treatment can be integrated into our health service there remains an essential step: clinical research. This is the next exciting phase of research at IHMRI.

The cornerstone of clinical research is clinical trials, such as those carried out to test a new treatment in patients with a particular disease or disorder. The opening of IHMRI’s new Clinical Research and Trials Unit will see clinical research significantly expand in the Illawarra.

Operating from a dedicated, purpose-built facility within the new IHMRI building, it will involve doctors, nurses, scientists and allied health professionals all working together to combine their skills to deliver results in patient care more speedily.

With the foundation now in place for collaboration between the talented academics and clinicians of the Illawarra, the next phase of developing clinical research in the region can begin in earnest.

Professor Wilf Yeo
Deputy Executive Director
board of directors

Chairman

Mr George Edgar, BSc (Tech, Met)
Director IMB Banking & Financial Services
Director Shin Investments Pty Ltd
Former Deputy Chancellor and Council member University of Wollongong

Company Secretary

The Company Secretary for the Illawarra Health and Medical Research Institute Limited during the financial year was:
Ms Sue Baker-Finch
(from 16 November 2009 to 30 June 2010)
Ms Angela Taylor
(from 1 July 2009 to 16 November 2009)

Directors

Professor Gerard Sutton AO, BE MEngSc UNSW, PhD CUA
Vice-Chancellor, University of Wollongong

Mr Terry Clout, BA UOW, Grad Dip Company Directorship AICD, Grad Dip Risk Management RMIA
Chief Executive, South Eastern Sydney Illawarra Area Health Service

Professor Judy Raper, BE Chem (Hons), PhD ChemEng UNSW
Deputy Vice-Chancellor (Research), University of Wollongong

Mr Neville Onley, BBus
Director of Financial Operations, South Eastern Sydney Illawarra Area Health Service

Mr Damien Israel, BBus MAcc CSU, CPA
Deputy Vice-Principal (Finance and IT), University of Wollongong

Ms Elizabeth Koff, BSc, M Public Health, Grad Dip Nutrition & Dietetics
Director of Clinical Operations, South Eastern Sydney Illawarra Area Health Service

Mr George Edgar, BSc (Tech, Met)
Director IMB Banking & Financial Services
Director Shin Investments Pty Ltd
Former Deputy Chancellor and Council member University of Wollongong

Company Secretary

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committees

SCIENTIFIC ADVISORY COMMITTEE

The IHMRI Ltd constitution provides for a Scientific Advisory Committee (referred to formally as the IHMRI International Advisory Committee on Research) to be established by the Board of Directors.

The functions of the Committee are to:
- provide advice to the Executive Director and the Board on high-level research strategy including research directions, funding options and emerging research strengths
- share and disseminate information on new research findings and trends
- consult experts in the field on research trends
- identify and encourage new research areas.

The Scientific Advisory Committee was established on 18 August 2008 at which time Dame Bridget Ogilvie was appointed by the Board to chair the Committee.

Two members from Australia and one from the USA were appointed in November 2009.

CURRENT MEMBERSHIP OF THE SCIENTIFIC ADVISORY COMMITTEE

Chair

Dame Bridget Ogilvie, AC, DBE, ScD, FRS

As committee chair, Dame Bridget Ogilvie brings outstanding international experience and connections to the role. In 2007 she was honoured with the Companion of the Order of Australia for service to science in the field of biomedical research, particularly related to veterinary and medical parasitology, and through support for research funding to improve global health.

Following a degree in agricultural science (BRurSc) from the University of New England in 1960 she gained a PhD (1963) and a ScD (1981) from Cambridge University for research in parasite immunology.

As a staff member of the UK Medical Research Council at the National Institute for Medical Research for 17 years, she researched immune response to parasitic infections.

In 1979, Dame Ogilvie joined the Wellcome Trust and was promoted to Deputy Director (Science) in 1984 and then to Director (Science Programmes) in 1989, with responsibility for the science funding activities of the Trust overall.

In 1991, she was appointed Director (Chief Executive) of the Trust and retired from this position in June 1998.

Between 1985 and 1991, Dame Ogilvie was a Visiting Professor at the Imperial College of Science, Technology and Medicine in London. She is Visiting Professor at University College, London.

Dame Ogilvie has been a trustee of Cancer Research UK, non executive Director of AstraZeneca plc, and Chairman of Medicines for Malaria Venture, Association of Medical Research Charities and the Lister Institute, together with many other non executive interests.

In 1996, she was made a Dame Commander of the Order of the British Empire and in 2003 became a Fellow of the Royal Society.
Dr Ryan took up her post as Chief of CSIRO Mathematical and Information Sciences in 2009, where she leads a group of 150 people in mathematical and statistical research areas as diverse as financial risk, climate change and cell biology. Dr Ryan has clinical trials statistics expertise and her experience includes cancer trials.

Two important advisory groups were established in 2009 to guide the development of IHMRI. They met regularly throughout 2009–10.

**Research Directors Group**

This group comprising the Scientific Director and Medical Director of each of the six IHMRI research themes and three cross-cutting themes meets every six weeks to discuss research directions and research collaborations and activities.

The purpose of the Research Theme Director role is to provide strong research leadership, direction and support to the research theme and its group of participating researchers, and to initiate and facilitate links and collaborations with other research themes and external partners. As a group, the Research Directors guide the research program of the Institute.

**Executive Management Advisory Committee**

The IHMRI Executive Management Advisory Committee, comprising Faculty Deans of Science, Health and Behavioural Science, Engineering, Informatics, and Commerce; the Director of the Centre for Health Service Development; the SESIAHS Research Director; the DVC Research; IHMRI Executive Director; IHMRI Deputy Executive Director; and IHMRI Chief Operating Officer meets monthly to address issues of integration and links with UOW and SESIAHS structures and functions.

Professor Pantelis is Foundation Professor of Neuropsychiatry and Scientific Director at the Melbourne Neuropsychiatry Centre at The University of Melbourne and Melbourne Health. He is also Director of the Adult Mental Health Rehabilitation Unit at Sunshine Hospital. He holds honorary Principal Research Fellow positions at the Howard Florey Institute and the Centre for Neuroscience.

Dr Eckel is Professor of Medicine, Division of Endocrinology, Metabolism and Diabetes, and Cardiology; Professor of Physiology and Biophysics; and Program Director, Adult General Clinical Research Center at the University of Colorado, Denver. He holds the Charles A Boettcher Endowed Chair in Atherosclerosis. He is also the Director of the Lipid Clinic at University Hospital.
The IHMRI Executive Group comprises the Executive Director, Deputy Executive Director and Chief Operating Officer. The executive is responsible for translating the overall direction set by the Board of Directors into the day-to-day strategic management of the Institute and to develop structures, systems and programs to support its growth and development. The executive meet weekly and as required.

**EXECUTIVE DIRECTOR**

**Professor Don Iverson**

Professor Don Iverson is the foundation Executive Director of IHMRI. He is responsible for the overall management of the Institute in line with the direction set by the Board of Directors and leads the Research Directors Group to oversee IHMRI’s strategic research program.

Professor Iverson is Pro-Vice Chancellor (Health) of the University of Wollongong. He has held a number of senior positions in government agencies, non-government health organisations and in business.

In the academic arena, he has held professorial positions at the University of Toledo, the University of Colorado School of Medicine, the University of Denver and the University of Toronto. His research interests are broad and include clinical, patient and delivery issues related to primary care medicine, cancer prevention and control issues, and health-related behaviour change strategies.

Professor Iverson currently serves as a member of the Board of Directors of the National Breast and Ovarian Cancer Centre of Australia. He was a recent past member of the Research Committee of the Cancer Council of NSW, the International Advisory Panel of the Alberta Cancer Prevention Initiative, and the Alberta Cancer Board’s International Advisory Committee on Research.

**DEPUTY EXECUTIVE DIRECTOR**

**Professor Wilf Yeo**

Professor Wilf Yeo is the Deputy Executive Director of IHMRI and Foundation Professor of Medicine and Clinical Pharmacology at the University of Wollongong’s Graduate School of Medicine.

Professor Yeo’s clinical work includes on call duties in medicine at Wollongong Hospital, where he is a member of the Drug Therapeutics Committee, and head of the GSM Professorial Unit.

Professor Yeo came to Australia in 2007. Prior to this he was senior lecturer in medicine and clinical pharmacology and therapeutics at the University of Sheffield and Consultant Physician at Sheffield Teaching Hospitals NHS Foundation Trust.

He has over 20 years experience in conducting clinical trials focusing on cardiovascular therapies and on pharmacokinetic studies of novel drugs. He is a member of the British Hypertension Society, British Pharmacological Society and Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists.

**CHIEF OPERATING OFFICER**

**Ms Sue Baker-Finch**

As Chief Operating Officer of IHMRI, Sue Baker-Finch is responsible for the business management and operations of IHMRI.

Sue has over 15 years experience in executive management roles across all three levels of government and not-for-profit organisations.

Prior to joining IHMRI, Sue was the Chief Operating Officer at Wollongong City Council with responsibility for about three-quarters of Council’s staff and budgets. Previously she was Chief Executive of the ACT Government’s $160 million wagering business and an executive at the Australian Sports Commission and Institute of Sport. Her experience also includes the management of major tourism events including the Australian Masters Games, 2000 Olympics events, and Centenary of Federation celebrations held in Canberra. Sue was the inaugural Chief Executive of the Australian Divisions of General Practice.

Sue’s qualifications include a Bachelor of Science (with honours) from the University of Tasmania and an Executive Masters of Business Administration from the Australian Graduate School of Management. She is a graduate of the Australian Institute of Company Directors.
The Illawarra Health and Medical Research Institute, formally constituted on 24 April 2008 as a company limited by guarantee under the Corporations Act 2001 (Commonwealth), is a collaborative venture of the two members of the company, the University of Wollongong and the South Eastern Sydney Illawarra Area Health Service.

The Institute is one of the cornerstones of the Illawarra Health and Medical Research Hub established under a Memorandum of Understanding by SESIAHS and UOW in 2006. The Centre for Health Service Development is the other cornerstone of the Hub.

IHMRI is an 'umbrella' entity, established to advance the interests of its member bodies, the UOW and SESIAHS. In fostering collaboration between researchers throughout the Illawarra, IHMRI is creating a centre of excellence and innovation that represents the focal point of health and medical research in this region.

The Institute’s goal is to further develop health and medical research undertaken in the Illawarra, with a focus on collaboration across the academic, clinical and community contexts to improve health services and clinical practice across the region.
IHMRI’s research is broad in scope and includes:

- Discovering the mechanisms and pathways underlying clinical conditions, especially those that are common in the Illawarra region
- Improving the range and effectiveness of clinical treatment options, including lifestyle options
- Developing and evaluating population-health based interventions.

VISION

IHMRI’s vision is: ‘Excellence and innovation in health and medical research – Better health services – Healthier Illawarra community’.

It encapsulates the belief that by linking academic and clinical and public health researchers around health and medical issues common in the Illawarra, findings can be rapidly translated into improved clinical practice and health service delivery, leading to health benefits for the local community.

MISSION

IHMRI’s mission is to build a centre of excellence and innovation in health and medical research, targeting health improvements through early intervention and preventative health care.

STRATEGIC GOALS

Six strategic goals or outcomes have been identified to guide IHMRI’s program over the next ten years:

- Excellence and innovation in targeted health and medical research – Linking bright minds around common problems
- Collaborative research capacity building in our region – Bridging academic, clinical and public health research contexts
- Enhanced resourcing for health and medical research – Connecting researchers into quality facilities and services
- Improvements in clinical practice and the health of our community – Translating discovery into better care and health improvements
- An informed and engaged community – Engaging the Institute with the Illawarra community
- Organisational growth and development – Leading from the present to a better and sustainable future.
Building on existing research strengths and interests, IHMRI has established six broad research themes: Metabolic Conditions, Healthy Ageing, Cancer Continuum, Neuroscience and Mental Health, Infectious Diseases, and Primary Care and Rural Health.

Cutting across these themes, the Institute draws on its expertise in Nutrition, Human Genetics and Population Health.

At the same time the Institute aims to build special capacity in targeted areas and technologies including an Illawarra population health laboratory, lipidomics, and drug metabolism.

With appropriate initiatives in population health, IHMRI will shape its research program to address trends in the health status of its community and to monitor the impact of its research and programs in its local population.

Existing research strengths are being supported to help them flourish and develop and other smaller groups are being fostered through the Institute’s programs to pursue niche research areas where there is the opportunity to develop special expertise, capabilities and technologies, not well represented in other regions and institutes.

Each research theme is lead by a Scientific Director and Medical Director. This leadership model aims to link academic and clinical researchers to ensure research findings can be rapidly translated into improved clinical practice and health service delivery.
Research Themes

CANCER CONTINUUM

Leadership

Associate Professor Marie Ranson, Scientific Director, Cancer Continuum

Associate Professor Marie Ranson is an internationally recognised cancer researcher based in the School of Biological Sciences at the University of Wollongong. She leads a research group focusing on tumour invasion and metastasis.

An important application of this basic research is the development of targeted anticancer drugs. Since 2002, Associate Professor Ranson has been directing an integrated cancer research program incorporating biologists, chemists, clinicians and radiologists from a range of organisations in the Illawarra region. The group's work involves preclinical assessment of potential new anticancer targets and therapeutic strategies, including reformulation of existing chemotherapeutic agents such as 5-fluorouracil.

Professor Philip Clingan, Medical Director, Cancer Continuum

Professor Philip Clingan is a cancer specialist and a lead clinician in the SESIAHS Cancer Institute. Professor Clingan has been principal investigator on more than 40 cancer clinical trials. He is a member of the Medical Oncology Group of Australia, the Australian Lung Trials Cancer Group, the Australian Gastrointestinal Trials Group, the Australia and New Zealand Lymphoma Group, the Clinical Oncological Society of Australasia Breast Group, the NSW Clinical Oncology Group and the University of NSW Gynaecological Cancer Group. He is also a member of the Surgical and Medical Oncology Research Unit at St George Hospital in Kogarah, Sydney.

Theme aims

The overarching aims of the Cancer Continuum research theme are to:

- improve our understanding of the biological processes underlying cancer;
- develop improved methods of detection and treatment for cancer, and;
- apply what is known in the areas of cancer screening and cancer prevention.

Theme research also includes studies on behavioural effects and interventions in reducing cancer risk.

Theme activity summary

Two Cancer Continuum theme meetings took place in the reporting period: August (14 attendees) and May (23 attendees). At the latter meeting it was resolved that sub-theme groups would form to develop focused research programs. This theme has the highest number of research network members, with 67 members nominating cancer research as their primary interest.
Professor Mark Wilson, Scientific Director, Healthy Ageing

Professor Mark Wilson is renowned for his work in cell biology and protein chemistry. In particular, his research focuses on investigating mechanisms of quality control of protein shape and function in spaces outside cells in the human body. Professor Wilson was Director of the UOW’s Institute of Biomolecular Science from 2004 to 2006 and Director of the Centre for Medical Bioscience in 2007. He is currently Associate Dean Research (Science). He has authored more than 65 papers in scientific journals and has been an invited speaker at many national and international conferences.

Clinical Professor Jan Potter, Medical Director, Healthy Ageing

Clinical Professor Jan Potter is senior staff specialist at the Acute Geriatric Unit and Stroke Unit of the Wollongong Hospital and the clinical director of the Aged Care, Chronic Care and Community Health stream of the Southern Hospitals Network of the SESIAHS. Evolving from her clinical experiences, Clinical Professor Potter’s research interests centre on understanding and addressing health problems that affect geriatric patients, especially interventions to improve clinical outcomes. She has a strong interest in nutrition in the elderly and has published several research papers on this topic. The impact of influenza on geriatric patients is another research interest, in particular, the link between poor nutritional status and impaired immune responses.

Theme aims

Within the Healthy Ageing theme, clinical and academic researchers from a number of different disciplines are collaborating to discover mechanisms underpinning age-related diseases and conditions, and to improve the treatment and management of these. Areas of particular interest include undernutrition, cognitive performance and mobility and falls protection.

Theme activity summary

Three Healthy Ageing theme meetings took place in the reporting period: November (20 attendees), February (30 attendees) and May (15 attendees). Fifty-three research network members have joined this theme as their primary interest. Clinical Professor Potter and Professor Wilson delivered a University Research Series Public Lecture in May, which detailed clinical and research approaches underway in the Healthy Ageing theme.
**INFECTION DISEASES**

**Leadership**
Professor Mark Walker was Scientific Director, Infectious Diseases until 30 March 2010. The role was vacant as at 30 June 2010.

**Professor Julian Gold, Medical Director, Infectious Diseases**
Professor Julian Gold has 20 years experience in the diagnosis and management of patients with HIV and other sexually transmitted infections. He is a recognised expert in this field in Australia and in the Asia Pacific region. As the Director of the Albion Street Centre in Sydney, Professor Gold regularly advises on the establishment of health services and training of workers involved in HIV/AIDS disease management and prevention. He established the national HIV/AIDS surveillance program in Australia and he has served on all of the National Advisory Committees related to HIV, infection control and healthcare worker safety. Professor Gold has been principal investigator for more than 40 HIV/AIDS therapeutic clinical trials and more than 50 clinical studies.

He has published more than 100 peer reviewed scientific papers and book chapters.

**Theme aims**
Research within the Infectious Diseases theme focuses on the development and testing of new vaccines and drugs for the prevention and treatment of a range of infectious diseases, the development of interventions to reduce the rate of hospital-acquired infections, and the development of interventions to reduce the rate of HIV infection and increase existing treatment effectiveness.

**Theme activity summary**
Thirty-one research network members have joined the Infectious Diseases theme as their primary interest. Professor Julian Gold presented the first IHMRI Seminar on viral links to serious disease, including Multiple Sclerosis, in April to an audience of 100.
research themes

METABOLIC CONDITIONS

Leadership

Professor Xu-Feng Huang, Scientific Director, Metabolic Conditions

Professor Xu-Feng Huang is a professor in the School of Health Sciences and Director of the Centre for Translational Neuroscience at the University of Wollongong. With over 15 years research experience he has several areas of interest, including therapeutic approaches to obesity, the neuropathology of schizophrenia and metabolism in affective disorders. In addition to authoring more than 100 papers in international refereed journals, Professor Huang has over 100 conference presentations, four books and six book chapters to his name. He has supervised 30 postgraduate students.

Professor Robert Moses, Medical Director, Metabolic Conditions

Professor Robert Moses is an international authority on diabetes and its treatment. Since opening an endocrinology practice in Wollongong in 1975, his interest and referral base has developed to focus on diabetes and problems that can arise during pregnancy, particularly gestational diabetes. Since the late 1990s, Professor Moses has been Director of Diabetes Services with SESIAHS. He has conducted close to 90 clinical trials, authored and co-edited books on diabetes and published more than 80 articles in major medical and scientific journals. He is Associate Editor of Diabetes Care and is currently writing guidelines on diabetes and pregnancy for the International Diabetes Federation.

Theme aims

The Metabolic Conditions theme encompasses research on a number of important metabolic disorders including overweight/obesity, diabetes and cardiovascular disease, as well as lifestyle factors closely associated with these. Functional foods, exercise science and biomechanics research are also included in the theme since nutrition, exercise habit, physiology and body characteristics have a significant influence on lifestyle factors related to these metabolic conditions.

Theme activity summary

Two Metabolic Conditions theme meetings took place in the reporting period: August (8 attendees) and February (33 attendees). Twenty seven research network members have joined this theme as their primary interest.
Professor Brin Grenyer is a clinical psychologist based at the School of Psychology, University of Wollongong. He is also a senior clinical researcher and supervisor at Northfields Clinic UOW, which is linked through the Specialist Psychological Service to Wollongong Hospital Outpatient Mental Health. Professor Grenyer’s primary area of expertise is the treatment of chronic and complex psychological problems, particularly depression and associated problems of aggression, personality disorders, and substance abuse. Over the past six years he has led psychotherapy clinics both for depression and borderline personality disorder, with over 500 patients enrolled in treatment and research. Since 1995 he has been awarded 25 grants totalling $4.2 million and has successfully supervised 15 doctorate candidates.

Professor Nagesh Pai is the foundation professor of psychiatry at the University of Wollongong’s Graduate School of Medicine and a clinical academic in adult psychiatry at SESIAHS. Prior to his current appointments, he was the senior staff specialist psychiatrist at Shellharbour Hospital and Lake Illawarra Community Mental Health Service. Before coming to Australia in 2006, Professor Pai was professor and head of the Department of Psychiatry, KS Hegde Medical Academy in Mangalore, India (2001–2005). Here he was instrumental in initiating the Centre for Psychiatric Research, established to help psychiatric doctors become involved in clinical research, and had the opportunity to be principal investigator for more than 30 international, multi-centre clinical research projects. His research interests include psychopharmacology and metabolic syndromes.

Theme aims
The broad aim of this theme is to promote excellence in neuroscience and mental health research to discover causes and develop new, effective treatments.

Theme activity summary
A number of meetings were conducted within the Neuroscience and Mental Health theme and related sub-themes. A theme meeting was held in December with 18 attendees. The theme also hosted a roundtable in March, involving 20 participants from the University and local mental health services. The Executive Panel met four times – in September, November, March and June – over the year. A number of sub-theme groups, established under this theme, have met regularly during the reporting period:

- Ageing and Cognitive Performance (August, March and May)
- Child and Adolescent Mental Health (August, September, October, March and May)
- Neurological Disorders (March and May)
- Serious Mental Health Disorders (July, August, September, October, March and May)

Fifty research network members have joined this theme as their primary interest.
research themes

PRIMARY CARE AND RURAL HEALTH

Leadership

Professor Liz Farmer was Scientific Director, Primary Care and Rural Health until 30 November 2010. The role was vacant as at 30 June 2010.

Dr Andrew Dalley, Medical Director, Primary Care and Rural Health

Dr Andrew Dalley is a vocationally-registered general practitioner. Since 1997 he has been the CEO of the Illawarra Division of General Practice, which was awarded the Prime Minister’s National Award for Community Business Partnerships (small business category) in 2005. As CEO IDGP, he has been successful in gaining Commonwealth funding for a youth health service in Wollongong (Headspace Illawarra) and the GP Superclinic at Shellharbour. These centres share a common theme of integration of service delivery and are part of a national strategy for integrated primary care. He was also chairman of the Illawarra Coordinated Care Trial, a $16 million trial of care coordination in an elderly population, from 1996 to 1999.

Theme aims

A focus of this theme is to develop a regional/rural primary care research network that includes a range of medical, nursing and allied health professionals.

The creation of this network is expected to facilitate research on such topics as:

- the presentation and management of select conditions, especially chronic conditions and mental health problems;
- the efficiency and effectiveness of different models for delivering health services;
- the factors contributing to ‘burnout’ amongst regional/rural health workers and the impact of interventions; and
- the acceptance and effectiveness of continuing education initiatives delivered with differing technologies.

Theme activity summary

The Primary Care and Rural Health theme met once in the reporting period: March (13 attendees). Since that time three target areas have been determined (Integration, Workforce, Access and Equity) and the theme has defined three possible research projects focusing on the first area, Integration, to be developed during 2010. Twenty one research network members have joined this theme as their primary interest.

Award for Community Business Partnerships (small business category) in 2005. As CEO IDGP, he has been successful in gaining Commonwealth funding for a youth health service in Wollongong (Headspace Illawarra) and the GP Superclinic at Shellharbour. These centres share a common theme of integration of service delivery and are part of a national strategy for integrated primary care. He was also chairman of the Illawarra Coordinated Care Trial, a $16 million trial of care coordination in an elderly population, from 1996 to 1999.
research themes

CROSS-CUTTING THEMES
Cross-cutting theme directors attend a number of the theme meetings across the year to identify intersecting research areas and collaborations.

HUMAN GENETICS
Professor Stephen Lillioja, Director, Human Genetics
Professor Stephen Lillioja is a trained physician specialising in endocrinology with a strong background in research and in clinical medicine. He conducts genetics research within IHMRI and lectures in the Faculty of Health and Behavioural Sciences and the Graduate School of Medicine. Professor Lillioja first became interested in the genetic mechanisms underlyng disease during his time at the US National Institutes of Health (NIH). Ongoing research interests include the human genome project, particularly the application of genetic knowledge to solve the epidemic of type 2 diabetes, other diseases with a genetic basis such as cancer and schizophrenia, and healthy nutrition.

NUTRITION
Professor Linda Tapsell, Director, Nutrition
Professor Linda Tapsell is an international authority on nutrition and dietetics. She has directed the University of Wollongong’s diet and nutrition research institute, the Smart Foods Centre, since 1999 and recently completed a full term as director of the National Centre of Excellence in Functional Foods, part of a five-year federally funded national food industry strategy. Over the past 10 years, Professor Tapsell has developed a research program that builds an understanding of how food works in promoting health. She leads research on diet and lifestyle-related diseases such as obesity and type 2 diabetes, as well as healthy ageing and the science of appetite control. She regularly conducts clinical trials incorporating dietary interventions and calorimeter experiments, together with social and health service investigations that explore the translation of theoretical positions into ‘real life’.

POPULATION HEALTH
Professor Tony Worsley, Director, Population Health
Professor Tony Worsley has broad experience in public health nutrition programs and the promotion and maintenance of behaviour change. Professor Worsley’s research interests span behavioural and nutritional epidemiology, food and nutrition policy research and nutrition promotion. Current projects include investigations of baby boomers’ food and health behaviours, the influence of social ideologies and personal values on food consumption and the promotion of fruit and vegetable consumption.

Network members can join cross-cutting themes as their primary area of interest.
The IHMRI Research Network was launched on 9 December 2009. Attendees included the Hon. Paul McLeay (Minister for the Illawarra) and the Hon. David Campbell (Minister for Transport and Roads and Member for Keira) and more than 300 people from the University, SESIAHS, private health service providers, business and community organisations.

The Research Network was established to provide a mechanism for communicating with and linking academic researchers, clinicians, allied health services and community health professionals throughout the region.

It provides a structure to coordinate health and medical research conducted by multiple individuals across multiple organisations, through sharing information, connecting individuals around common research interests and facilitating collaborative projects.

With 432 members at June 30, the IHMRI Research Network has a strong foundation to build from into the future.

Its success will be evaluated on a number of measures including ongoing growth in membership diversity, strong clinical engagement in research planning and projects, and successful new research collaborations.
IHMRI’s Research Network comprises:

**MEMBERS**
Individuals actively involved in, or wishing to become actively involved in, health and medical research, that is, academics, clinicians, allied health professionals, managers in health service organisations, or other professionals interested in linking into research discussion groups and collaborative health and medical research initiatives.

**ASSOCIATES**
Individuals or organisations with an interest in the growth and development of health and medical research in the Illawarra region seeking to be kept informed about research in the region, and wishing to connect with IHMRI and its network.

**COLLABORATORS (NATIONAL OR INTERNATIONAL)**
Individuals who participate with IHMRI health and medical research initiatives, but whose primary research affiliation is with another research, academic or industry organisation.

All Associates, Members and Collaborators receive:
- the IHMRI e-newsletter (quarterly) and other information and updates
- notice of IHMRI networking functions (quarterly)
- invitations to the IHMRI seminar series (quarterly)
- invitations to visiting researcher seminars (occasional).

**MEMBERSHIP STATISTICS**
As at the end of June 2010, the IHMRI Research Network reached an overall membership of 432, including 306 active researcher members and collaborators and 126 associate members.

The pie charts on this page show the breakdown of the 306 active researcher members as at end June 2010 by primary place of employment and by profession.

### IHMRI Research Network Members by Primary Employment Affiliation (June 2010)

- University (55%)
- Research Institute/Organisation (2%)
- Public Health Sector (SESIAHS) (26%)
- Private Health System (8%)
- Industry Organisation (2%)
- Community Organisation (4%)
- Philanthropic Organisation (0%)
- Other (3%)

- University Researchers (41%)
- Allied Health Professionals (13%)
- Institute Researchers (2%)
- Nurses (9%)
- Specialist Clinicians (8%)
- Managers/Administration (7%)
- PhD Students (7%)
- General Practitioners (2%)
- Other Practitioners (2%)
- Other Health Professionals (4%)
- Other (7%)

### Research Network by Membership Category

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<tr>
<td>% of total</td>
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IHMRI GRANTS PROGRAM

UOW has initiated within its budgets a grant program to build health and medical research capability within the six research themes.

Round 1 of proposals for these grants saw 12 applications totalling just over $1.3 million. Six of these projects were supported in part or in full, totalling $427,000 over three years provided from the University’s Health and Medical Research Support Fund.

The IHMRI Grant Program will expand in 2010–11 to promote collaborative research activities and projects among the Research Network membership, with a view to provide ongoing grants for research projects that support and consolidate the Institute’s strategic goals.

Research Network

In collaboration with international and Australian researchers and clinicians, BrachyView is being developed to assist physicians to provide efficient and optimised permanent seed implants.

The multipurpose instrument will achieve this by allowing intra-operative dynamic planning, image guided treatment, post-implant verification and direct rectal dosimetry. Dosimetry is the measurement of the amount of radiation absorbed by the tissue targeted, and surrounding tissue.

"BrachyView represents a major advance in clinical technology that can improve the quality of life of prostate cancer patients and, through reduced post treatment complications, lead to significant health cost savings," Professor Rozenfeld says.

Professor Rozenfeld’s team is working with researchers from the Czech Technical University Prague, Memorial Sloan Kettering Cancer Center New York, the University of Sydney and St George Hospital on the BrachyView research project.

Professor Rozenfeld and his team at the Centre for Radiation Physics are well established in the fields of radiation detection, measurement and targeting, with their work being applied in the clinical setting, and instruments being commercialised for clinical use across the globe.

BrachyView: A multipurpose probe for in-body radiation imaging and dosimetry

UOW researchers and their international collaborators who treat cancer using a multipurpose probe for in-body radiation imaging have received a three-year, $523,500 Development Grant from the National Health and Medical Research Council.

The research project, BrachyView: A multipurpose probe for in-body radiation imaging and dosimetry, aims to optimise the delivery of brachytherapy, a type of radiotherapy for treating cancer that places radioactive sources in or adjacent to target tissues.

There are two main types of brachytherapy: permanent seed implants, where radioactive seeds are left in tissue - commonly used in the treatment of prostate cancer; and temporary seed loadings, where sources are placed in catheters, needles, or other appliances close to the target tissue for a brief period of time, and then removed.

The goal for both types is the same — to conform the radiation dose to the size and shape of the target and limit side effects by significantly reducing damage to healthy tissue and vital organs.

Professor Anatoly Rozenfeld

Director, Centre for Medical Radiation Physics
IHMRI Ltd has entered into a Funding Agreement with Industry and Investment NSW through the Office for Science and Medical Research for the provision of funding for research infrastructure to support health and medical researchers networked with the Institute.

In May 2009 IHMRI was advised that its funding application was successful and that an infrastructure grant of $557,020 exclusive of GST had been awarded for expenditure in the 2009–10 financial year. OSMR subsequently advised that the allocation had been adjusted upwards to $679,931.

The OSMR planned to revise its funding guidelines to support medical research institutes in NSW for a three-year funding round commencing mid 2010. As part of its review, OSMR held a number of meetings of the liaison group for the NSW research hubs to canvass opinion on issues relating to the structure and operation of medical institutes in NSW. The OSMR also consulted directly with individual institutes. The OSMR Acting Director Medical Research Anne O’Neill visited the Illawarra in March 2010 and productive discussions took place concerning the particular contributions that IHMRI, as a regional institute, can make to the overall health and medical research agenda for NSW.

Following the round of individual consultations with institutes, the Minister for Science and Medical Research, the Hon. Jodi McKay advised that MRSP funding will be provided to all eligible institutes for a further 12 months through to end June 2011. As a result, IHMRI has been awarded a further allocation of $679,931 for the 2010–11 year. This funding has been vital in establishing and growing IHMRI’s collaborative research agenda, linking the academic, clinical, health services and community sectors in the region.
ITC Group of Companies and SESIAHS

While the separate corporate entity provides an independent structure jointly owned by the UOW and SESIAHS to provide the high-level governance and management of the Institute’s development, this structure is not sufficiently developed, nor funded at this stage, to meet all the goals of the IHMRI partners.

The IHMRI partners, UOW and SESIAHS, provide vast in-kind support and conduct initiatives within their own systems to further health and medical research.

The University, in particular, is supporting a broad IHMRI ‘program’ within its own budgets and structures to fast track the goals of the Institute and its partners and to this end UOW established a Health and Medical Research Support Fund in 2009.

In June 2009 the ITC Group of Companies donated $6 million to launch the Fund with IHMRI linked programs to be the major beneficiaries. The $6 million represented the Group’s entire dividend for 2008. ITC Group donated a further $4 million to the fund in April 2010.

Likewise, the SESIAHS undertakes initiatives within its own systems to develop research capability within the health service.

A sore throat is a common, mild illness which affects thousands of people every year. Usually, the clever human immune system can rid the body of the bacterium, Group A streptococcus (GAS), which causes the infection within days.

However, a sore throat is the moderate end of the damage this bacterium can cause to human health, with cases of the adverse complications of GAS becoming more common across the world. More worryingly, in developing countries and socioeconomically disadvantaged communities, infection rates are higher and increasing. In Indigenous communities in Australia’s Northern Territory, infection rates are five times higher compared to the rest of the country’s population.

GAS is ranked as one of the top 10 human pathogens. Invasive cases of GAS invade the blood stream and deep tissue, and can lead to flesh eating disease, known as necrotising fasciitis; can infect the blood, causing bacteraemia; or cause toxic shock syndrome. Recurrent infections may lead to kidney disease and rheumatic heart disease, with one of the highest incidence rates in the world among Indigenous Australians.

Looking at ways to reduce the incidence, and better treat the nasty effects of GAS, is a significant research field that begins with a better understanding of how the bacterium takes hold in the human body.

Building this foundation of knowledge is the realm of Dr Martina Sanderson-Smith, who is investigating the “hijacking” of the body’s plasminogen activation system – which regulates blood coagulation, tissue remodelling and cell migration – by GAS in the first few hours of infection.

“A systemic or invasive infection happens so quickly – it can be a matter of hours from the time you first notice symptoms – and by that stage it becomes very difficult to treat with antibiotics. So if we can control or contain the infection at these very early stages then we should have a better chance of treating it,” Sanderson-Smith says.

Broadly, the GAS bacterium cleverly attaches an enzyme of the plasminogen activation system to its surface, and takes it under its control. The bacterium is then able to advance into tissue, or into the usually sterile blood stream.

“The plasminogen activation system has a role in the migration of immune cells to the site of the infection, but we don’t really know how GAS hijacking the system affects the immune response. That’s really what I want to find out,” Sanderson-Smith says.

Results to come out of the early stages of the study show that multiple components of the plasminogen activation system are required for invasive disease, and targeting these host-specific factors may lead to new treatment options for invasive disease.

“So far it looks like we’re on the right track. This angle hasn’t really been looked at in the field before so I’m hoping that it will provide interesting new data.

“I’m not sure we’re ever going to come up with a new treatment for GAS infection – although that would be really nice – but the work that we do here might contribute to better treatment and better disease outcomes for people in the longer term.”
Funds for health and medical research generously provided by private individuals and organisations are a vital source of funding and support for IHMRI’s research.

The following donations and contributions were given to the University of Wollongong for the benefit of research and projects in connection and with the support of the IHMRI.

### Donations to IHMRI in 2009 - 2010

#### Donations to Cancer Research

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<th>Description</th>
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<td>In memorium of Mr Delfin Gomez</td>
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<td>In memorium of Mr Fritz Tysar</td>
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#### Donations to Cancer Research through the Gay C Bates Memorial

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<td>In memorium of Mrs Josephine Breasley</td>
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#### Donations to Cancer Research through the Robert East Memorial Fund

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<tr>
<td>Mrs Judith East</td>
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<td><strong>Total</strong></td>
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#### Donations to Dementia Research

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<td>Mr Richard Miller</td>
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#### Donations to Medical Research

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**Total**: **$152,798.98**
HEALTH AND MEDICAL RESEARCH IN THE ILLAWARRA

A number of key performance indicators have been identified in order to monitor health and medical research undertaken in the Illawarra region. The measures listed below provide the beginning of what will be developed into a comprehensive performance measurement framework.

Quality and quantity of research measures:
- Research income from all sources (quantity)
- Competitive grant performance – NHMRC and other sources (quality)

Competitive grant success includes all funds won under the Illawarra Health and Medical Research Hub, established under a Memorandum of Understanding by UOW and SESIAHS in 2006. IHMRI and the Centre for Health Service Development form the two cornerstones of the Hub.

The data is extracted from UOW grant and finance databases and does not include research income which may have been received directly by SESIAHS or private researchers. Work is underway to develop systems to provide a complete view of all health and medical research undertaken in the Illawarra.

The career of a scientist is rarely linear: this is more than true for Fernandez-Enright who has come full circle on many fronts in her work so far.

From starting her studies as a medical student because she wanted to help people, to setting aside an early research focus in neurosciences and human genetics, the threads of a varied career have begun to converge at IHMRI.

Across the many projects she lends her genetic analysis skills to, it is one that is focused on founding a periphery diagnostic for Alzheimer’s disease that is particularly important to her.

It reinvigorates a part of her research career that began in Singapore four years ago, as well as fulfilling her desire to help people through the development of a reliable diagnostic test, using blood or saliva, for this devastating disease.

Dementia affected around 257,000 Australians in 2010 and up to 70 per cent of these people would suffer from the most common form of dementia: Alzheimer’s disease.

There are many decades of genetic studies and information about Alzheimer’s disease, but the majority of this research has been performed in the brain.

Her project, in collaboration with Professor Brin Grenyer and Clinical Professor Jan Potter, will search for genetic markers for Alzheimer’s by comparing target gene expression levels in patients with the disease, and those without the disease, with the goal of establishing a blood or saliva test which could detect early onset of the disease and potentially early intervention for treatment.

“We’re also hoping to include in this research a study of the progression of the disease, so from people mildly affected, to those at a more serious stage, and compare these to a control to see which genes are changing with the progression of the disease,” she says.

“This will be a key to help us understand the mechanism of the disease, to try and establish a diagnostic and perhaps as well contribute to developing a treatment.”

A small study, with a view to the results leading to further funding, 36 Alzheimer’s patients will be recruited to participate in the project which could be the beginning of important developments in clinical approaches to the disease.

“It will be great if the result of our research leads to a new diagnostic tool or a better therapy – that’s the best reward a medical researcher can hope for.”
The first chart shows a breakdown of all health and medical research income under the Illawarra Health and Medical Research Hub from 2003-2009.

The second chart shows the trend of income won via national competitive grant programs for health and medical research projects within the Hub.

The 2009 figures reflect approximately 19 per cent growth on the 2008 result, and a significant uplift from relatively stable performance over the previous three years.
Antipsychotic drugs have improved the symptoms of schizophrenia for millions of people around the world, yet these drugs also have debilitating side effects.

A major side effect of some newer generation antipsychotic drugs is the impairment of the body’s metabolic system, resulting in patients quickly gaining large amounts of excess body weight.

The ability to continue to effectively treat the symptoms of schizophrenia, but prevent the associated side effects, such as obesity, is the focus of Dr Chao Deng and a team of researchers at IHMRI.

This ‘holy grail’ of pharmacological sciences – developing drugs with no side effects – may rest with a new hot topic in medical research, known as functional selectivity. Deng has found himself absorbed in this “exciting” area for the past two years.

Creating pharmaceutical treatments with significantly reduced, or no side effects, for patients with schizophrenia, relies on removing the ‘cause and effect’ of antipsychotic drugs on certain cellular signalling pathways in the brain.

Broadly, traditional drugs either stimulate or block receptors in the body. This affects the global signalling duties linked to that receptor, which normally produces not only the desired therapeutic effect, but also the undesirable side effects.

Functional selectivity, however, may activate divergent signalling pathways through a single receptor (but not the global effects), potentially providing a route to separate the desired therapeutics from undesired side effects.

Deng and the team at IHMRI have been the first to study the mechanism of an existing antipsychotic drug with some known, but not well understood, functional selective properties in vivo – a major breakthrough.

Although the functionally selective properties of aripiprazole had been reported previously, the only studies of its mechanisms had been in cell cultures, not in the complex in vivo environment of a living system.

Through in vivo studies, Deng will be able to better understand the mechanism of this drug’s functionally selective properties in humans, and hopefully apply the findings to new therapeutics that have limited or no side effects.

He is optimistic about what this achievement will mean for the field of functional selectivity and for schizophrenia patients, in the short and long term.

“At the same time as having a long term goal of developing a new drug without major side effects, in the short term our goal is to reduce the negative side effects of current drugs.

“In parallel with the functional selectivity study, we have another path where we are providing evidence for a treatment approach that combines aripiprazole with other antipsychotics as an effective way of reducing some side effects.

“Improving the treatment outcomes for patients of schizophrenia now, while laying the groundwork for a potential new generation of antipsychotic drugs based on the principle of functional selectivity, is our end goal,” Deng says.
An integrative collaborative model for personality disorders prevention and treatment

**Funding body:** NSW Health  
**Funded amount:** $2,500,000  
**Chief Investigator:** Professor Brin Grenyer, IHMRI  
**Partners:** Associate Professor Beth Kotze, SESIAHS and Dr Adrian Keller, Justice Health - NSW Department of Health

The Illawarra Health and Medical Research Institute has won a $2.5 million, three-year collaborative tender to develop an integrated treatment program for people with personality disorders across health services in NSW.

The project, An integrative collaborative model for personality disorders prevention and treatment, will see the development of innovative treatments for patients with personality disorders based on best research evidence.

Between two and five percent of Australians will suffer from Borderline Personality Disorder at some time in their life. Thousands of people present for treatment of personality disorders across the country every year.

The project will leverage IHMRI’s partnership with the South Eastern Sydney Illawarra Area Health Service by marrying the experience and expertise of clinicians in SESIAHS and Justice Health with the evidence of research from IHMRI. The collaboration with Area Health means that the region’s mental health and drug and alcohol clinicians, and personality disorder patients, will be the first to benefit from the project.

An enduring legacy of the Personality Disorders Project will be a website of resources and training materials for use throughout health services in NSW ensuring ongoing access to guidelines and the latest information.

“Such support is significant because it will allow us to make these new integrative collaborative treatments widely available to a group in the community that have often been overlooked or misunderstood,” Project Leader Professor Brin Grenyer said.

**COMPETITIVE PERFORMANCE**

The establishment of the Illawarra Health and Medical Research Hub has seen the quantity and quality of grant success increase significantly since 2007. Health and medical researchers have won funding for a number of substantial projects from the Australian Research Council and the National Health and Medical Research Council since research activity has been focused by the Hub.

IHMRI operations staff also assist researchers and groups within UOW, SESIAHS and the broader Research Network in preparing grant applications for funding programs outside of the national competitive grant programs of the ARC and NHMRC.

Examples of such grant programs in which IHMRI researchers have been successful during 2009–10 include the Illawarra Retirement Trust grants program and the Federal Department of Health and Ageing grants for palliative care in dementia.

The support from the operations staff to identify and assist applications from such sources will continue to grow and play a valuable role in tapping into a broad range of funding sources.

Two of the notable successes in this area during the 2009–10 financial year are a Commonwealth Department of Health and Ageing funded project REACH Out in Dementia, and a NSW Health funded Personality Disorders Treatment Project.
REACH Out in Dementia

**Funding body**: Commonwealth Department of Health and Ageing  
**Funded amount**: $600,000  
**Chief Investigator**: Clinical Professor Jan Potter  
**Lead Investigator**: Dr Greg Barclay  
**Investigators**: Professor Brin Grenyer, Professor Nagesh Pai, Dr Andrew Dalley, Associate Professor Paul Allin, Dr Vida Bliokas, Dr Lisbeth Lane, Dr Andrew Bezzina

A new collaborative research project involving Area Health Service clinicians, University of Wollongong researchers and aged care facilities has been awarded a grant of almost $600,000 from the Department of Health and Ageing.

The 18-month project is called ‘REACH Out in Dementia – Recognise End of Life And Care Holistically’ and will focus on providing training and resources for staff of residential aged care facilities caring for patients with late stage dementia.

Chief investigator and Clinical Director for the Southern Hospitals’ Network Aged Care, Community Health and Chronic Care stream, Clinical Professor Jan Potter, says there is a severe shortage of geriatricians in the health service and resources are stretched in providing care for the growing number of elderly patients with neurodegenerative conditions.

The REACH project was initiated by palliative care physician Dr Roger Cole, who Clinical Professor Potter said approached her just before retiring to suggest they try to set in place something sustainable that could help address this issue.

“With a decent time frame, substantial amount of money and good geographical coverage, this project offers the opportunity to bring about a really positive and lasting change.”

The project will bring together a range of professionals with expertise in psychology, palliative care and aged care to develop a ‘tool kit’ for residential aged care facility staff, including treatment guidelines as well as examples of different plans of action that may be implemented in response to certain scenarios.

“The outcomes I’d like to see are a set of really useful resources and some models of care, leading to an improved quality of life for patients and their families and a reduced rate of admissions of elderly patients to emergency departments,” Clinical Professor Potter said.
## GRANT ANNOUNCEMENTS DURING REPORTING PERIOD

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<td>Australian Research Council (ARC) Discovery Project</td>
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<td>Electrophysiological investigation of embryonic striatal grafts in Huntington’s Disease</td>
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<td>Monitoring drug-induced changes of neurotransmission in vivo - a microdialysis approach in an animal model of schizophrenia</td>
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<td>A taxonomy of Australian consumers food and health knowledge</td>
<td>Australian Research Council Discovery Projects</td>
<td>F Worsley, H Yeatman, W Wang</td>
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<td>Building better bras for women living with a diagnosis of breast cancer</td>
<td>National Breast Cancer Foundation Research Grant</td>
<td>J Steele, B Munro, S Jones, M Marven</td>
<td>$260,750</td>
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<td>Schizophrenia: prevention and treatment of atypical antipsychotic drug-induced obesity</td>
<td>National Health and Medical Research Council Project Grant</td>
<td>XF Huang, C Deng</td>
<td>$399,250</td>
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<td>Cultural engagement in substance abuse treatment for Indigenous Australians</td>
<td>NSW Health Drug &amp; Alcohol Program</td>
<td>T Crowe</td>
<td>$13,128</td>
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<td>Importance of high vegetable consumption in controlling weight studies</td>
<td>Horticulture Australia Ltd Grant</td>
<td>L Tapsell, P Lyons-Wall, F Worsley, E Warenjo, A Houlihan, S Johnson, M Gidley</td>
<td>$540,459</td>
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<td>The efficacy of emotional appeals in asthma campaigns</td>
<td>Asthma Foundations of Australia Research Grant</td>
<td>S Jones, S Reis, G Stillfried</td>
<td>$44,868</td>
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<td>Promoting healthy lifestyles in IRT self care communities</td>
<td>IRT Research Foundation Grant</td>
<td>S Jones, D Iverson, A Bonney L Phillipson</td>
<td>$38,470</td>
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<tr>
<td>title</td>
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<td>all internal researchers</td>
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<td>Are CB1 antagonists the answer to reducing cognitive deficits in schizophrenia?</td>
<td>National Alliance for Research on Schizophrenia and Depression Young Investigators Grant</td>
<td>E Barkus</td>
<td>$59,968</td>
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<td>The schoolies experience - the role of expectancies, gender roles and social norms of recent school leavers</td>
<td>Alcohol Education &amp; Rehabilitation Foundation Research Grant</td>
<td>S Jones, L Barrie</td>
<td>$19,990</td>
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<td>Do gender differences in cutting technique really exist? Implications for ACL injury prevention</td>
<td>NSW Sporting Injuries Committee Research Grant</td>
<td>B Munro, J Steele</td>
<td>$13,279</td>
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<td>Prevention and early diagnosis of Alzheimer’s disease: New models of detection using gene expression profiling in a case-control elderly population in the Illawarra region</td>
<td>IRT Research Foundation Grant</td>
<td>F Fernandez, B Grenyer, J Potter</td>
<td>$40,000</td>
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<td>Validity of energy expenditure equations in pre-school children: a whole body calorimeter study</td>
<td>Heart Foundation Grant-in-Aid</td>
<td>A Okely, D Cliff, R Jones, S Lilloja, M Batterham, S Brage, J Reilly, U Ekelund</td>
<td>$125,635</td>
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<td>Fat for life: using accelerator mass spectrometry to determine the lifespan of human lens lipids</td>
<td>Australian Institute of Nuclear Science and Engineering Research Award</td>
<td>T Mitchell, Sn Blanksby, R Truscott, V Levchenko</td>
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<td>Mechanisms of Chikungunya virus disease: mouse model, virulent determinants and the development of novel therapeutics</td>
<td>Department of Innovation, Industry, Science and Research Australia-India Strategic Research Fund</td>
<td>P Keller</td>
<td>$90,000</td>
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<td>Advanced Materials for Stents</td>
<td>Australian Research Council Linkage Projects</td>
<td>G Wallace, S Moulton, R Kapsa, J Weber, M Forsyth, L Atanasoska</td>
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<td>Stereoselective synthesis of bioactive alkaloids for structure elucidation and drug discovery</td>
<td>Australian Research Council Discovery Projects</td>
<td>S Pyne</td>
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<td>Role of the host fibrinolytic system in invasive group A streptococcal disease</td>
<td>National Health and Medical Research Council Project Grant</td>
<td>M Sanderson-Smith</td>
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<td>Multimodal Woven BioPolymer Fibre Conduits for Remodelling Damaged Peripheral Nerve</td>
<td>National Health and Medical Research Council Project Grant</td>
<td>R Kapsa, G Wallace, L Kyratzis, M Murphy</td>
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<td>Understanding mechanisms involved in canine autoimmune and inflammatory disorders</td>
<td>American Kennel Club Canine Health Foundation Research Grant</td>
<td>R Sluyter, R Taylor</td>
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<td>Advanced polymer systems for the delivery of anti-epileptic drugs to the CNS</td>
<td>National Health and Medical Research Council Project Grant</td>
<td>G Wallace, S Moulton, R Kapsa, M Cook</td>
<td>$240,460</td>
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<td>Dynamics studies of protein-protein and protein-drug complexes</td>
<td>Australian Nuclear Science and Technology Organisation Access to Major Research Facility Program</td>
<td>M Tehei</td>
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<td>XAS of intracellular arsenic for determining Trisenox metabolites</td>
<td>Australian Synchrotron Research Program ANBF Beamtime</td>
<td>C Dillon</td>
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<td>Can FTIR microspectroscopy be used to distinguish biomolecular difference in cells following treatment with various anti-cancer drugs?</td>
<td>Australian Synchrotron Research Program Travel Grant</td>
<td>C Dillon, E Carter</td>
<td>$995</td>
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<td>XAS characterisation of arsenic complexes in solution</td>
<td>Australian Synchrotron Research Program Travel Grant</td>
<td>C Dillon, K Munro, J Carrall</td>
<td>$475</td>
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<td>DNA replication in pathogenic and model organisms: protein structure determination and ligand binding analyses</td>
<td>Australian Synchrotron Research Program Travel Grant</td>
<td>A Robinson, S Ruiz</td>
<td>$735</td>
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<td>Molecular chaperones as agents of the aging process</td>
<td>IRT Research Foundation Grant</td>
<td>J Yerbury, H Ecroyd</td>
<td>$40,000</td>
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<td>REACH out in Dementia-Recognise End-of-life and Care Holistically</td>
<td>Department of Health and Ageing Local Palliative Care Grants Program</td>
<td>J Potter, G Barclay, B Grenyer, N Pai, A Dalley, P Allin, V Bliokas, L Lane, A Bezzina</td>
<td>$546,116</td>
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<td>Treatment of Personality Disorders Project</td>
<td>NSW Department of Health Tender</td>
<td>B Grenyer, B Kotze, A Keller</td>
<td>$2,500,000</td>
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<td>An Australian Survey of Older Patients’ Attitudes to General Practice Registrars</td>
<td>Coast CityCountry Training Ltd</td>
<td>A Bonney, S Jones, D Iverson</td>
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<td>Real Time Cell Analyser</td>
<td>RIBG Equipment Grant</td>
<td>U Bommer</td>
<td>$70,000</td>
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<tr>
<td>Real Time PCR and Film Developer</td>
<td>RIBG Equipment Grant</td>
<td>E Frank</td>
<td>$78,000</td>
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<td><strong>Total</strong></td>
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<td>$8,348,228</td>
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</table>
The IHMRI website, www.ihmri.uow.edu.au, was published on 1 July 2009. The website is hosted on the University’s server and based on its navigational and design platform.

The chart on page 24 tracks website visitation (total visits, unique visitors and new visitors to the site) each month to the end of June 2010. The figures illustrate steady growth in the usage of the IHMRI website, with a significant lift and subsequent stabilisation in visitation following the launch of the Research Network in December 2009.

The site will be further developed over time as the main point of information and interaction for each of our target markets and will be leveraged for all communication activities, including via the IHMRI Central blog.

This blog, accessed by Research Network members, aims to encourage information sharing and build a virtual IHMRI community among registered network members and collaborators.
IHMRI hosts quarterly networking evenings and a seminar series for the research network to grow engagement in IHMRI and its strategic vision, as well as provide an opportunity for building contacts, collaboration and research opportunities among members.

**Networking Evenings**

The first of the quarterly networking events was held in March with approximately 140 attendees. Professor Wilf Yeo addressed the group on the specially-designed clinical research and trials facilities at the IHMRI headquarters on the University of Wollongong campus and the opportunities for growing clinical research in the region.

The second networking event, featuring Professor Linda Tapsell presenting on topical nutrition issues and current research being undertaken in the region, was held in June and attracted about 100 attendees.

**Seminar Series**

The first quarterly seminar was held in April 2010. Professor Julian Gold presented his research into, and ideas on, a viral basis for Multiple Sclerosis, to an audience of 100 people.
**OTHER SEMINARS**

Other seminar events coordinated and supported by IHMRI during the first half of 2010 included:

- **URC Research Showcase Series 2010 – May 2010**  
  “From Test Tube to Bedside”  
  Professor Mark Wilson and Clinical Professor Jan Potter

- **IHMRI Sponsored Presentation – June 2010**  
  “From pervasive to invasive: Our future with technology?”  
  Dr Mark Gasson – University of Redding, UK

**IHMRI NEWSLETTER**

The first of the quarterly electronic IHMRI newsletters was distributed in mid-March and the second at end June 2010.

**EDITORIAL**

IHMRI negotiated the inclusion of a 600 word opinion piece in the *Illawarra Mercury* on a monthly basis since October 2009. Nine articles were published in the period to 30 June 2010: authors and a summary of the subject is shown in the table opposite.

IHMRI also featured prominently and positively in a number of newspaper articles about its research, grants and strategy over the year.

<table>
<thead>
<tr>
<th>Month</th>
<th>Author</th>
<th>Summary of the Subject</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2009</td>
<td>Professor Don Iverson</td>
<td>“There is world-class health and medical research going on right here in our backyard.”</td>
</tr>
<tr>
<td>December 2009</td>
<td>Sue Baker-Finch</td>
<td>“Medical research in the Illawarra is not only good for our health, it’s also good for our economy.”</td>
</tr>
<tr>
<td>December 2009</td>
<td>Professor Linda Tapsell</td>
<td>“Being proactive about what we eat is far better than waiting until there’s a problem.”</td>
</tr>
<tr>
<td>January 2010</td>
<td>Professor Wilf Yeo</td>
<td>“Clinical research holds the key to medical progress, and is set to expand in the Illawarra.”</td>
</tr>
<tr>
<td>February 2010</td>
<td>Dr Lindsay Oades</td>
<td>“We need to increase wellbeing, not just decrease mental illness.”</td>
</tr>
<tr>
<td>March 2010</td>
<td>Professor Anatoly Rozenfeld</td>
<td>“Thanks to medical research, people with cancer now have more treatment options.”</td>
</tr>
<tr>
<td>April 2010</td>
<td>Clinical Professor Jan Potter</td>
<td>“How to age healthily is something we would all do well to think about.”</td>
</tr>
<tr>
<td>May 2010</td>
<td>Dr Emma Barkus</td>
<td>“Of all mental illnesses, schizophrenia is probably the most misunderstood.”</td>
</tr>
<tr>
<td>June 2010</td>
<td>Justin Yerbury</td>
<td>“Work is in progress to determine the underlying mechanisms that cause MND, knowledge that will help fight the disease.”</td>
</tr>
</tbody>
</table>
STAFFING
During 2009–10 an IHMRI Operations Team was established, led by the Chief Operating Officer, Sue Baker-Finch, to manage and service the Research Network, to support the work of the researchers and research themes and to manage shared facilities in the IHMRI headquarters. At end June 2010, operations staff included four administration and five laboratory and clinical facilities staff.

BUILDING IHMRI HEADQUARTERS
Construction of the new IHMRI health and medical research facilities on the University campus took 17 months to complete, commencing in early 2009 and ending on 31 May 2010. Occupation began on 31 May, with the Operations Team moving into the IHMRI headquarters. The $30 million design and construction of these state-of-the-art medical research facilities on the University campus was funded by the NSW Government and UOW.

The construction and building was completed in line with the planned budget, with only relatively minor extensions to the project timeline.
Equipped for Medical and Clinical Research

Fitout of the building commenced immediately after completion to equip work areas with office and laboratories with IT items, general office equipment, furniture, plants, and laboratory and clinical equipment.

Operations staff engaged in a consultative process with researchers to determine laboratory and clinical items to be purchased, with researchers ranking, in order of priority, items required to undertake their work.

Equipment purchased includes a range of basic infrastructure items such as centrifuges, thermal cyclers and ultra low freezers, as well as capacity building items such as Biological Safety Cabinets, digital imaging equipment and a multi-mode microplate reader.

Various University faculties agreed to relocate a variety of equipment from existing laboratories into the new facility for use by the IHMRI research community.

A staged relocation plan for the laboratory research groups will commence in July 2010. Approximately 120 researchers will occupy the building.

Features and Design

The facilities in the building are state-of-the-art. There are four working levels, plus a covered roof space for the building’s plant and ventilation systems. The ground level has a lecture theatre, general storage areas, a forklift and pallet loading dock, and a specifically designed room to accommodate ultra-low freezers.

The first floor is dedicated to the Clinical Research and Trials Unit and includes nine examination rooms, a phlebotomy clinic and over one hundred square metres of purpose-built exercise space.

The second and third floors are primarily PC2 level laboratories. A number of specialised rooms will be incorporated into the laboratories such as a quarantine premises, a radiation laboratory, constant temperature rooms, cryogenic storage areas, separate primary and established tissue culture areas and a PC3 laboratory.

All three floors have office space to accommodate research academics and their students.

The building is designed to complement the strategic aims of the Institute. For example, all offices have large windows, and walls and doors made of glass to encourage openness, a collaborative atmosphere and creative thought.

Openness and collaboration are also supported by the design of the laboratories; the majority of the laboratory areas are open and are for common use by all research staff to encourage connection, accountability and freedom of movement with sensitive work.
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ACGR</td>
<td>Australian Competitive Grants Register</td>
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<tr>
<td>ARC</td>
<td>Australian Research Council</td>
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<tr>
<td>ANSTO</td>
<td>Australian Nuclear Science and Technology Organisation</td>
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<tr>
<td>CHSD</td>
<td>Centre for Health Service Development</td>
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<tr>
<td>CRTU</td>
<td>Clinical Research and Trials Unit</td>
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<tr>
<td>CSIRO</td>
<td>Commonwealth Scientific and Industrial Research Organisation</td>
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<tr>
<td>DOHA</td>
<td>Department of Health and Ageing</td>
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<td>IHMRI</td>
<td>Illawarra Health and Medical Research Institute</td>
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<tr>
<td>IRT</td>
<td>Illawarra Retirement Trust</td>
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<tr>
<td>MND</td>
<td>Motor Neurone Disease</td>
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<tr>
<td>MRSP</td>
<td>Medical Research Support Program</td>
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<td>NHMRC</td>
<td>National Health and Medical Research Council</td>
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<td>OSMR</td>
<td>Office for Science and Medical Research</td>
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<td>PC2</td>
<td>Physical Containment Level 2</td>
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<tr>
<td>PC3</td>
<td>Physical Containment Level 3</td>
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<td>SESIAHS</td>
<td>South Eastern Sydney Illawarra Area Health Service</td>
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<tr>
<td>UOW</td>
<td>University of Wollongong</td>
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</table>
GENERAL ENQUIRIES
Illawarra Health and Medical Research Institute
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Communications Coordinator
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Vision

‘Excellence and innovation in health and medical research - Better health services - Healthier Illawarra community’.

Mission

IHMRI’s mission is to build a centre of excellence and innovation in health and medical research, targeting health improvements through early intervention and preventative health care.