# UCINECTEINE

# Launching the Family Tree Project

Meet the Cavayes - p14

Medical Leadership Program

Vital to phone app development - p10

# Professor Lawrie Powell AC

Bridging the bedside and the bench - p12



YEARS & MEDICINE

# **CALENDAR OF EVENTS 2016**

#### **1** FEBRUARY

MD Year 1 Welcome Event The UQ Centre, UQ, St Lucia Campus

# 17 FEBRUARY

Prizes and Scholarships Ceremony E.S. Meyers, UQ, Herston Campus

#### TBC MARCH

UQ Training Centre Official Opening QEII Hospital, Brisbane

#### 18 march

UQ Training Centre Official Opening Redland Hospital

#### TBC JULY

Queensland Medical Orchestra Concert Old Museum, Bowen Hills

# 16 & 17 JULY

TSXPO Brisbane

# AUGUST

Open Day **UQ St Lucia** 

# 7-9 AUGUST

UQMS MedRevue Schonell Theatre, St Lucia Campus

# 6 мау

MBBS Class of 1956 60 Year Reunion Brisbane

# 28 мач

MBBS Class of 1996 20 Year Reunion Brisbane

## 27 AUGUST

80 Years of Medicine Gala Dinner Brisbane City Hall, Brisbane City

# 8 & 9 october

Brisbane Open House Weekend UQ Herston Campus

### $3\&9\,$ october

MBBS Class of 1966 50 Year Reunion Brisbane

#### TBC DECEMBER

Qld Medical Orchestra Concert Old Museum, Bowen Hills

#### TBC DECEMBER

Graduation UQ Centre, UQ, St Lucia Campus

CONTACT FOR EVENT ENQUIRIES

Hayley Smith Events Officer, Alumni & Engagement UQ School of Medicine 288 Herston Road, Herston Brisbane 4006 T +61 7 3365 5515 M +61 (0) 408 691 023 E h.smith7@som.uq.edu.au www.medicine.uq.edu.au







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UQ's School of Medicine network has many extraordinary

individuals and we would love to tell your story.

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The University of Queensland, School of Medicine, Marketing & Communications Manager, Herston QLD 4006. T +61 7 3365 5254 or E b.mallon@uq.edu.au

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instagram.com/uqmedicine

Editor Brian Mallon

**Designer** Kathy Mason, *The Piccolo Design Co.* 

#### Advertising

Brian Mallon T +61 7 3365 5254 E b.mallon@uq.edu.au

#### **Contributing Writers**

Georgia Baker, Fiona Cameron, David Colquhoun, Bernadette Condren, Garth Douglas, Diann Eley, Kate Gadenne, Glenda Gobe, Samantha Jackson, Wendy Katterns, Brian Mallon, Elise Moore, Jim Nixon, Liz Payne, Pamela Robson, Hayley Smith, Tammy Smith, Nikola Stepanov, Jackie Wallace, Kay Wolfs, Kerstin Wyssusek

#### Photographers

Kaylene Biggs, Brian Mallon, iStockphotos, Queensland Health

Change of Address T +61 7 3365 5515 E alumnienquiries@som.uq.edu.au

Cover photo Cavaye family

#### We are always looking for interesting stories to feature in the UQ Medicine Magazine.

Published twice a year, winter and summer, this magazine is a key device for communicating with our alumni, staff, students and stakeholders of the UQ School of Medicine. Circulated to about 8700 alumni, 2550 staff (paid and volunteer) and 1800 students, it is the largest publication of its type in Queensland. It is distributed to alumni living in Queensland, and more than 15 countries world-wide.

#### Contact

Brian Mallon T +61 7 3365 5254 E b.mallon@uq.edu.au

# PROFESSOR DARRELL CRAWFORD

**HEAD OF SCHOOL** 

Academic robes rehung in wardrobes, freshly printed degree certificates proudly adorning study walls and the doors of the graduation hall locked for the last time. Anxious recent graduates contemplate the daunting task of moving from student to doctor and I ponder if the School has prepared them well enough for a future in medicine. Colleagues often approach me and suggest the "work readiness" of our graduates could be improved. The introduction of the highly valued critical care rotation, increased use of simulation technology, revision of the therapeutics curriculum, reshaping of the OSCE examination to assess intern preparedness and a plan to work more closely with hospital based intern training programs are examples of our response to this feedback. However the School's role in preparing students for a career in medicine is greater than preparation for internship alone. The soon to be introduced "MD Plus" program will see students offered a variety of extension opportunities designed to enhance their professional and personal development, including their future employability in an increasingly competitive health workplace environment. A revamped medical leadership program, increased international study experiences, programs emphasising the professional responsibilities of medical practice, enhanced global health opportunities, better support for intercalated research degrees and a range of other opportunities will characterise this program. This aligns well with the UQ's commitment to enhancing the student experience - undoubtedly the biggest UQ theme of 2015.

The decisions to withdraw the teaching of Years 1 and 2 from the Ipswich Campus and not to pursue a Phase 1 program at the Sunshine Coast will allow us to fully focus on the St Lucia campus for the students in their early years. The current high demand for clinical placements for students in the latter years of the course in the major teaching hospitals in the Brisbane area has been raised by students and teachers alike as a matter of concern affecting the student experience. It is reassuring to see that this demand will decline from a peak of approximately 370 places for each clinical year in 2014 to a projected requirement of 285 in 2019 as the number of international students declines, the UQ/ Ochsner program in New Orleans matures and the release of 35 Commonwealth Supported Places takes effect.

Improved engagement with our students, teachers and hospital partners is essential to an improved student experience. The reintroduction of the Mayne Professorship of Surgery and the appointment of Professor Mark Smithers to that role, the celebrations associated with the generous gift of antiquarian surgical instruments to the University from the estate of Dr Owen Powell and the moving ceremony celebrating the passing of Professor Phil Walker illustrate the School's recognition of the generous contributions of the surgical community to the teaching of our medical students. This is an issue of some importance to me. In my previous role as a transplant hepatologist I worked very closely with some very eminent surgical colleagues and I have often said that I learnt as much about the science and art of medicine from them as any of my physician mentors. An engaged and supportive medical community at all levels is critical to the ongoing success of medical education at UQ. The school is committed to continue to improve the quality of our interactions with all of its stakeholders building on some of the initiatives that have already been introduced.

Aside from the focus on student experience, 2015 will be remembered as the year in which the plan to undertake a major restructure of the Faculty of Medicine and Biomedical Sciences was approved by the University Senate. Within this plan, the MD will be elevated to a faculty based degree, the medical education program will be led by the Dean of Medicine, the Discipline of



General Practice and the Rural Clinical School will merge with the current school of Public Health, and the Mayne and Diamantina Schools of Medical Sciences will be created and the Ochsner Clinical School will become a faculty level entity. The Mayne School will include the existing clinical schools at the Royal Brisbane and Women's Hospital, UnitingCare Health Hospitals, Prince Charles Hospital, Caboolture Hospital, Redcliffe Hospital, Nambour General Hospital, as well as Lady Cilento Children's Hospital, UQCCR and the Children's Hospital Research Centre. The Diamantina School will include existing clinical schools at the Princess Alexandra Hospital, Mater Hospital, Ipswich Hospital, Greenslopes Private Hospital, QE II Hospital and Redland Hospital, as well as Diamantina Institute and MMRI-UQ. Plans to effect this transition are well underway with a commencement date planned for January, 2017.

Other highlights of 2015 include a record research income of greater than \$30 million for the School of Medicine. This surpasses previous records by almost \$4.0 million and is a 30% increase compared to 2014 income. This really is an extraordinary performance given the difficulties in attracting competitive research funding in the current environment. Those researchers who have contributed to this record deserve great praise.

Three notable retirements were announced at the end of 2015. Professor Mal Parker has given great service to school for many years, Professor Malcolm West has made significant teaching and research contributions in the field of cardiology, and Professor Bill Pinsky in his position as the Head of the Ochsner Clinical School in New Orleans has played an incredible role in this unique trans-Pacific partnership in medical education.

We look forward to 2016 – the 80th anniversary of medical teaching at UQ. Celebrations to mark this milestone are being planned. Aside from the anniversary and the transition to a new faculty structure, we will maintain our focus on enhancing the student experience, and ensure that we properly educate students in those fields of medicine likely to be the future of health care namely chronic diseases, personalised genomics and the rational use of evidenced based diagnostic and therapeutic interventions.

Finally, I want to draw the Queensland Medical Orchestra to your attention. This remarkable group of medical students and doctors of all ages come together under the leadership of Dr Ryan Williams to entertain their supporters in a glorious afternoon of music. These are truly some of the best concerts one could wish to attend. The tickets are inexpensive, musicians are all volunteers and funds are donated to charity. When I attend these events, or indeed some of the class reunions, I am reminded that our time at medical school offers more than a degree. Fellowship, a deep commitment to the welfare of the betterment of others are the qualities of the players in the orchestra and are the very qualities we seek to instil in our graduates.

In closing, I want to thank all of our staff, alumni and voluntary teachers. We could not be medical school in top 50 in the world without your great work. We look forward to the academic year of 2016.

Best wishes,

alles





# FIVE LESSONS FROM YEAR ONE OF THE MD PROGRAM

#### By Dr Tammy Smith

In the years to come, 2015 will be remembered as the start of the MD program at UQ. I recently asked UQMS Year 1 Academic Representative Michael Daley for his impressions of this inaugural year. He replied, "From day one, the MD program has been a fast-paced inundation of information packed with new experiences and people – many of whom we have seen more than our families! It has been challenging and at times frustrating but overall rewarding."

I'm sure many of us, both staff and students, can relate to these comments. As we embark on our second year, I thought I would share some of the lessons I learned.

- I work with an incredible group of people. To be fair, this one I already knew. In particular, I would like to acknowledge the hard work of my fellow Clinical Lead Educator (CLE) team and the Biomedical Task Force (BTF). The Clinical Science courses would not have happened without them. I would also like to thank the many guest lecturers who gave up their valuable time to share their wisdom and experiences with the students. The clinical symposia in particular were very popular and well attended.
- 2. To paraphrase Robert Burns; the best laid plans of mice and men DO often go awry. Very early on we realised that a significant proportion of the cohort did not have the anticipated level of biomedical science background around which the Clinical Science courses were developed. The CLEs and the BTF leapt into action, and it is a testimony to the adaptability of these teams that this reworking of the curriculum happened as quickly as it did (and continued to happen throughout the year).
- You can never please everyone, and nothing will exhaust you faster than trying to. Sometimes in the face of negative

feedback, it is easy to forget that the majority of students are happy; or at least appreciative of the efforts being made on their behalf.

- 4. Students learn in different ways. Some love live lectures. Others don't. This is not a reflection on the lecturer; simply the way that today's students learn. As much as we might like to say "back in my day..." we now live in a world where the ways in which we access information and entertainment are changing almost daily.
- 5. We have some extraordinary students. That all our students are intelligent goes without saying. This year I have spoken with students who have struggled with all kinds of adversity, and their resilience and determination to succeed is inspirational. We have published researchers, world class athletes, new parents, and students working hard to adapt to a new course delivery platform (yes, I'm looking at you, Blackboard) in a new university in a new country with a very different climate (if you see a student wearing a T-shirt in winter to 8am lectures at the Ipswich campus, chances are they are Canadian...). The students who hold positions in UQMS deserve special mention; the link they provide between the student body and staff is invaluable.

Which brings me back to the beginning. Michael Daley ended his comments by saying, "I'm sure the majority of us look forward to our future years in medicine, where we will see our new knowledge applied in clinical settings." I hope that in the years ahead, we can look back at 2015 as a year in which much was learned by ALL involved in this new MD program.

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#### ABOUT DR TAMMY SMITH

After being awarded a PhD from the former School of Microbiology, Tammy moved into medical education and went on to complete a Grad Cert Ed in Medicine and Health Sciences. Tammy was involved in the planning of the graduate entry program which began in 1997 and was a PBL tutor in that course for over 15 years. She now works as a lecturer, course coordinator, and Clinical Lead Educator for the School of Medicine.



# NEWS

# **Clinical School Teaching Awards**



L-R: Dr Tara Khoo and Professor John Pearn

#### The Award for Excellence in Clinical Teaching

Dr Tara Khoo from the Greenslopes Clinical School received The Award for Excellence in Clinical Teaching. She was presented the John Pearn Medallion at a farewell event for our graduating cohort.

"Dr Khoo is the kind of doctor that is thoroughness, discipline and kindness embodied. She is the kind of teacher you remember long after the term. She has the empathetic approach you aspire to one day have, and the humanity that reminds you that medicine can and should be a powerful tool to use for good," medical student.

Greenslopes Clinical School:

**Ipswich Clinical School:** 

Northside Clinical School:

**PA-Southside Clinical School:** 

Royal Brisbane Clinical School:

Sunshine Coast Clinical School:

Ochsner Clinical School:

**Rural Clinical School:** 

Mater Clinical School:

#### ABOUT DR TARANEH (TARA) KHOO

Dr Tara Khoo obtained her BSc in Psychology before completing her medical degree at the University of Otago. She was awarded the RANZCP College

2015 Clinical School Teaching Awards and the overall winner of The Award for Excellence in Clinical Teaching. These awards are student nominated and reflect the outstanding contribution our medical community make to teaching the next generation of doctors. *Clinical School Teaching Award Winners* 

The School of Medicine is proud to announce the winners of the

Dr Taraneh (Tara) Khoo Dr Chris Corney Dr Mazhar Haque Dr Emily Gordon Dr Emily Ramee Dr Kellie Tatham Dr Tom Hadwen Dr Roy West Dr Laxmi Camadoo

medal with her fellowship in 2004. Dr Khoo is a psychiatrist and has worked predominantly in the area of emergency psychiatry. She has commenced her PhD studies in neuroimaging in schizophrenia at UQ. Dr Khoo is a Consultant Psychiatrist with special interests in first episode psychosis, emergency psychiatric management and clinical teaching.

## UQ and IWC work to build new generation of medical skills

The Indigenous Wellness Centre (IWC) has created a ground-breaking, whole-of-person model that is bringing integrated health and wellbeing services to the Bundaberg and Wide Bay / Burnett regions.

This approach to indigenous health services is an invaluable resource for the UQ Rural Clinical School (UQRCS) in providing hands-on placements for its medical students

IWC CEO Mr Ara Harathunian explains the centres are community-run, have a purely community focus and are supported by a team of professionals who are committed to helping people from all walks of life – Indigenous and non-Indigenous.

"As a community and not-for-profit organisation, we are pleased to be working with UQ to provide hands-on experience for the next generation of medical professionals," he said. "The time spent with our medical team certainly supports the UQ model of delivering learning approaches that encourage lifelong learning skills."

Third-year medical student, Mr Jeremy Taylor recently undertook his Rural Rotation at the IWC's Health and Wellbeing Centre in Bundaberg and found it a rewarding experience.

"I was getting a lot of contact with patients – the doctors at IWC are very happy to share their knowledge and expertise," he said. "The patients are very complex, and the doctors at the IWC are passionate and heavily invested in teaching us."

The IWC's health and wellbeing services include a team of seven GPs, specialist services around diabetes and midwifery, a dental surgery, plus sports medicine and acupuncture. There also is a strong team of registered nurses and health workers who deliver outreach services across the community.

Third-years such as Jeremy are not the only medical students to benefit from the partnership between UQ and IWC. The relationship between UQRCS Bundaberg and IWC began with the development and delivery of a Cultural Responsiveness Program for third and fourth-year medical students.

UQRCS Bundaberg staff worked closely with IWC Chaplain and Director Cheri Yavu Kama Harathunian, a local Aboriginal Elder, to develop the workshop series specifically tailored around patient/practitioner communications. The students have been unanimous in their positive reviews. Given the success of these worships the delivery may be extended to communitybased group and medical colleagues.

#### INTERNATIONAL PARTNERSHIPS UNLOCK THE DOOR TO GLOBAL MEDICAL EDUCATION



L-R Professor Darrell Crawford, His Excellency Stephen Brady (Australian Ambassador to France) and Professor Didier Gosset (Dean of Lille University School of Medicine)

The development and maintenance of international partnerships by the School of Medicine International team plays an important role in achieving the School's mission of preparing global leaders in medicine.

International Officer at the School of Medicine, Ms Georgia Baker said exchange agreements with other universities around the world provide medical students with the opportunity to experience medicine in a new and different context.

"We are essentially opening the door for medical students to embrace medicine on a global scale," she said. "Developing strong and valuable partnerships has been a key focus of the School for many years and has resulted in a network that spans the globe with key partners in China, Singapore, Canada, USA, France, Germany, Austria and the Netherlands." Medical students travel to a host institute during their clinical rotation years and are integrated with the institute's medical student cohort and hospital system.

This exchange further diversifies the medical cohort, creates opportunities for research collaboration, increases comprehension of global medical education, and overall helps the school to become more globally connected.

The school expanded its European network to France and welcomed its newest official partner, The University de Lille 2. After several years of unofficial student exchange, the relationship was formalised with the signing of a Memorandum of Understanding. A signing ceremony was hosted by The University de Lille 2 and attended by Head of School, Professor Darrell Crawford and His Excellency Stephen Brady, the Australian Ambassador to France as well as staff and students from the host institution.

The School welcomed the first group of students for a clinical elective under the exchange agreement in June for a sixweek placement and the first group of UQ students left last year for France on their Year 1 Elective for a 4 week observership study tour in November.



Twenty-two promising medical students from China and Hong Kong participated in UQ's annual Health Conference for three weeks last year.

Students attended many seminars, learning how Australia combats some of its biggest health issues and manages its overall healthcare. Organisations including Cancer Council, Heart Foundation and Stroke Association also played a vital role in teaching the students how non-profit organisations can make a difference.

Students also had the opportunity to explore why Australia is ranked one of the happiest countries in the

#### CHINESE MEDICAL STUDENTS LEARN FIRST-HAND HOW AUSTRALIA TACKLES HEALTH ISSUES



world, visiting some of the top tourist attractions such as Stradbroke Island, Gold Coast, Australian Outback Spectacular and Lone Pine Koala Sanctuary to name a few.

To conclude the conference, students used their newly acquired Australian

healthcare knowledge and presented (in groups) on a new health initiative which could be implement in China to better their healthcare. One group won the title "Best New Health Initiative for China" for their presentation on how they could bring HIV awareness to the forefront.

# NEW FACILITIES STEER 'HOME-GROWN' UQ MEDICAL GRADS TO RURAL PRACTICE



The UQ Rural Clinical School (UQRCS) has officially opened the \$2.4 million UQ Health Sciences Learning and Discovery Centre at Bundaberg and the \$1.9 million centre at Hervey Bay, both featuring state-of-the-art interactive clinical simulation facilities.

UQ Vice-Chancellor and President, Professor Peter Høj said the centres are part of a wider commitment the University has made to invest across its rural academic sites.

"The centres are purpose-built to offer a high-quality clinical training

environment comparable to the best facilities offered anywhere in the world," he said.

"Australians in regional and remote areas on average face greater health care challenges, higher injury rates and higher mortality rates, so we need the best doctors to be rural doctors. That's why UQ, and the State and Federal governments have partnered to deliver a locally trained and self-sustaining rural, regional and remote medical workforce of home-grown medical graduates. UQ operates one of Australia's largest rural clinical schools, so our investment will help ensure students who train rurally get the very best education and are more likely to return to or remain in rural areas after they finish their degree."

UQ research has shown that students from rural backgrounds who complete at least a year of their medical training at one rural clinical school are more likely to continue training in the local hospital or serve in rural communities as qualified doctors.

UQ Rural Clinical School Head Associate Professor Riitta Partanen, explained that rurally trained medical students get a taste of the diversity of the rural lifestyle, clinical hands-on experience, smaller classes, greater one-on-one exposure to specialists and trainers, and have the chance to become part of a working clinical team.

"Our co-location on hospital grounds

L-R: (back, from left) Professor Nicholas Fisk, Executive Dean, Faculty of Medicine & Biomedical Sciences, UQ; Mr Stephen Bennett MP, Member for Burnett, Shadow Minister for Environment, Heritage Protection and National Parks; Dr Vanessa Greig, Director, UQ Rural Clinical School, Bundaberg, UQ; Mr Keith Pitt MP, Federal Member for Hinkler; (front, from left) Councillor Mal Forman, Mayor of Bundaberg Regional Council; Professor Peter Haj, Vice-Chancellor and President, UQ; Ms Leanne Donaldson MP, Member for Bundaberg; Mr John Story AO, Chancellor, UQ; Professor Darrell Crawford, Head, School of Medicine, Faculty of Medicine & Biomedical Sciences, UQ; Associate Professor Riitta Partanen, (Acting) Head, Rural Clinical School, UQ.



enables us to build relationships with outstanding teaching clinicians who not only welcome our students into their teams but use our teaching spaces for professional development and community health education opportunities," she said. "The centres feature simulated learning environments and make training more interactive and more realistic than ever before. What's more, our technology ensures students can observe training in an onsite lecture theatre or remotely from their desktop from anywhere in the world. Best of all, we are then able to record and store clinical scenarios and offer a library of experiences to students to further enhance their learning."



# Community and business leaders celebrated in UQ alumni awards

Dr James Morton AM, Medical Director of Haematology-Oncology Clinics of Australasia and Chairman and founder of the AEIOU Foundation, a non-profit organisation for children with autism is just one of a distinguished lineup of community and business leaders celebrated in UQ's 2015 Alumni Awards.

The awards recognise the achievements of alumni who have accomplished outstanding success in their fields and made exemplary contributions to their communities. The award winners were nominated by their peers and selected by a committee led by UQ Vice-Chancellor and President Professor Peter Høj.

"The impact UQ has in communities around the world is not limited to

cutting-edge research but very importantly through the actions and accomplishments of our 225,000 alumni," Professor Høj said. "Our UQ alumni family is a constant source of ins piration."

There are six Vice-Chancellor's Alumni Excellence Awards, five Distinguished Young Alumni Awards, an International Alumnus of the Year, an Indigenous Community Impact Award and a Colleges' UQ Alumni Award.

The recipients were celebrated at UQ's annual Courting the Greats ceremony on Wednesday 21 October.





# Securing the future of excellent anasthetic patient care

By Dr Kerstin Wyssusek

As Deputy Director of Anaesthetics at the Princess Alexandra Hospital (PAH) I am responsible for training, education and quality improvement. I am also the supervisor for the ten Provisional Fellows (PFs) in the department.

Anaesthetic trainees are eligible to move into provisional fellowship training after completing all requirements of advanced training, which also includes passing the final fellowship examination.

Anaesthetists are often faced with making difficult decisions in complex and life threatening situations. The Provisional Fellowship Year (PFY) is designed to



support transition into specialist practice and help them develop the specialist expertise they need to confidently meet the daily challenges of their chosen profession.

Although we offer pre-defined fellowship plans including clinical and non clinical activities, the PFs are encouraged to develop individualised plans relevant to their needs. All of them undertake further postgraduate education in areas such as simulation, clinical subspecialist practice and management. They greatly contribute to teaching, education, research and quality and safety improvement activities. This years' cohort of PFs has particularly impressed me.

Portfolios they have taken up in the department include the delivery of a structured departmental educational and tutorial program, a waste management and recycling program, critical incident reporting, clinical auditing system and simulation training. The introduction of a perioperative anaesthetic assessment team, a fibreoptic intubation training program and the design of a difficult



Dr Kerstin Wyssusek

airway management kit are further examples for the great impact on and commitment to improving patient safety and care these doctors have.

I am overawed by their enthusiasm, dedication and professionalism. These doctors will definitely secure the future of excellent anaesthetic patient care.

## PROMOTING INDIGENOUS HEALTH THROUGH SONG & DANCE

Medical students from TROHPIQ (Towards Rural and Outback Health Professionals in Queensland) and RHINO (Rural Health in Northern Outback) attended the Biennial Laura Aboriginal Dance Festival with a focus on promoting health and inspiring future health professionals.

The festival is a celebration of Aboriginal and Torres Strait Islander culture and showcases the people of the Cape York Peninsula through song and dance ceremony. Medical student, Ms Sarah Ayles said their main objective for the weekend was to engage with the youth of the Cape York and promote health careers.

"The hope was to inspire some future health professionals, but most importantly, as future clinicians we had the opportunity to learn and participate in Indigenous culture," she said. "We were truly blown away with the level of engagement of everyone at the festival. Our booth was frequently visited by people who were willing to have a yarn about their experiences with the health system from Weipa to Thursday Island."

"We were interviewed for the National Indigenous Radio Service and two of the most consistent messages being broadcast over the weekend were the importance of healthy starts for children and ongoing involvement with health professionals.

"Our UQ frisbees, casts for the children, apple slinkies, and anatomy game were very popular, not to mention our free sunscreen and hats in the 30 degree heat."

As well as attending the festival, the students had the opportunity for some sightseeing, visiting the Split Rocks with famous rock art in the Laura area, and also got to spend an afternoon at Mossman Gorge.



Ms Sarah Ayles



# The Francis Baron Burnett Centre

The Francis Baron Burnett Simulation Centre (FBBC), a collaboration between UQ and Ramsay Health Care, provides innovative healthcare education and training in a state-of-the-art facility at the Greenslopes Private Hospital. The centre is designed to provide a safe environment for healthcare students and professionals to engage in high and low fidelity simulated learning activities.

Centre Manger, Ms Wendy Katterns said the simulation courses and activities have been designed to help healthcare students and staff learn clinical skills, techniques and best practice in a supportive environment.

"Our courses target procedural skills, integrated clinical management, communication and teamwork," she said. "The FBBC has been purpose-designed to create scenarios and activities that mimic a variety of healthcare settings, ensuring the learning environment is set up to look and feel like a 'real life' situation for students."

"We use an extensive range of highfidelity manikins, part-task trainers and other simulators. These life-like manikins allow students to perform a range of procedures and protocols. They also provide real-time feedback. Video facilities are also available for real-time and post-session debriefings."

The FBBC simulation facilitation team has a depth and range of experience in the design and delivery of simulation learning in healthcare. It also has clinical experience in nursing, medicine and midwifery as well as academic experience in the tertiary sector.

Construction of the centre was funded by the Department of Health and Aging (DOHA). Initial and subsequent recurrent simulated learning environment (SLE) grants from Health Workforce Australia (HWA) have funded the development, implementation and evaluation of learning activities.

The Francis Baron Burnett Clinical Simulation Centre is very fortunate to be supported with funds from The Ford Burnett Charitable Foundation. The Foundation was established by Ms Cynthia Burnett in memory of her father, the late Dr Frank Burnett.

# MEDICAL LEADERSHIP PROGRAM SPARKS NEW PHONE APP

Two alumni, Dr Garth Douglas and Dr Patrick Tunney, have launched a new medical education phone app – MedSchool. Dr Douglas credits its development to the skills learnt during UQ's Medical Leadership program.

MedSchool is a succinct guide to clinical examination. It contains concise but comprehensive summaries of history and examination findings and covers the interpretation of ECGs, CXRs and arterial blood gases. There is also a pharmacology section and several clinical calculators.

The idea for the app came as during his studies Dr Douglas found gaps in the most commonly used course texts.

"We were constantly looking up information on our phones during class and bedside teaching, noting the complete lack of offline resources and so the idea was born," he said. The app's journey took three years from concept to market and the key strategies and marketing plan were based on concepts taught in the UQ Medical Leadership Program. "The leadership course gave me insight into business, marketing and corporate strategy. It made MedSchool seem possible and provided a forum to discuss ideas," he said.

Dr Douglas approached Dr Patrick Tunney with the concept and the two began to write content in 2013.

"All content is based on peer reviewed articles," he said. "We also approached colleagues to review chapters relevant to their specialty area in medicine."

Dr Tunney designed the user interface and taught himself to code in three different languages.

"As medical interns we started with a low budget, outsourcing the app's coding," he said. "Two failed IT partnerships and a blown budget almost laid the project to rest. Six months later Patrick Skyped me from the south of France and said he'd written the code himself, I couldn't believe it."

The app has now seen several iterations and continues to improve



L-R: Dr Garth Douglas and Dr Patrick Tunney

based on feedback from medical student focus groups.

The pair hope to see the app become a part of medical school culture and they have plans to develop a new app for medical residents with content tailored to junior doctors.

MedSchool is available on iPhone and Android, it is free to download with an optional in-app purchase to unlock full content. <u>http://themedicalcompany.co</u> or <u>https://itunes.apple.com/us/app/</u> medschool/id986942811?mt=8





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# PROFESSOR MALCOLM PARKER

By Dr Nikola Stepanov and Dr Sarah Winch

It was with sadness that the School of Medicine farewelled one of its longest serving and most accomplished academics at the end of 2015. Malcolm (Mal) Parker, Professor of Medical Ethics and Head, Discipline of Medical Ethics, Law and Professional Practice retired after 22 years with the School.

Professor Parker, who has qualifications in medicine, philosophy and health law, was in general medical practice for over thirty years. He developed and coordinated the teaching of ethics, law and professionalism in the MBBS/MD program since graduate entry began in 1997. Professor Parker also retires as Chair of UQ's Human Experimentation Ethical Review Committee, and immediate past president of the Australasian Association of Bioethics and Health Law. Over a career spanning several decades he published nationally and internationally in philosophy of medicine, bioethics, medical ethics, professionalism, health law, and medical education.

Professor Parker joined the School on a part-time basis in 1994, juggling working in a busy general practice with driving the development of ethics, law and professional practice courses that now form a significant component of the first two years of the MBBS and MD programs. In 2010, he established the first academic discipline of medical ethics in Australia. He retires as the inaugural Head of the Discipline of Medical Ethics, Law and Professional Practice at UQ.

Integrating ethics, law and professional practice into a clinically focused medical program was neither easy nor uncomplicated, and certainly few (if any) medical schools in Australia have equalled Professor Parker's achievement. Professor Ben White, Director of the Australian Centre for Health Law Research (ACHLR) at OUT believes that Professor Parker's tremendous success in the fields of medical ethics and medical law are due to his genuine interest in both areas and a desire to integrate them for the betterment of both disciplines, and for the benefit of medical practitioners. On a national level, Professor White

states there are many in the field who are strong in one or other discipline, but Mal made genuine contributions to the scholarship of both.

On a more personal note, Professor White credits Professor Parker's success as also being due to his collaborative, friendly, approachable nature. Colleagues including Professor Katrina Bramstedt of Bond University and Professor Lindy Wilmott, Director of QUT ACHLR, among many others, speak respectfully and fondly of a colleague who combined a terrific work ethic and commitment to the disciplines of medicine, medical ethics and law, with considerable intellect, friendship, and a formidable wit. Indeed Professor Parker is well-known for his wise counsel, his fondness for taking overseas colleagues on bushwalks through spider-invested Queensland rainforests and for being the last to speak at meetings. On the last point Professor White points out that "... whilst Professor Parker was usually the last to speak, others may have made more noise, but once everyone had had their say and the dust had settled, he would quietly and clearly zero in on the key issue/s every time". The School of Medicine's Head of School Professor Darrell Crawford, considers that whilst Professor Parker's retirement will be felt nationally at the local level it will leave a huge void in the day to day workings of the school (as will Professor Parker's cameos in the annual medical review!).

The medical ethics and law community in Australia is small and tight knit. Professor Parker's retirement and gradual withdrawal (if his colleagues allow it...) from academic activities will be keenly felt by all. But the community he has given so much to could not begrudge him time with his family, and time to indulge in his true obsession, craft beer.

On behalf of the medical ethics and law community, and the School of Medicine, thank you Professor Malcolm Parker for your significant contributions to the fields of medical ethics and law over the past thirty years, and good luck in your new endeavours.



# PROFESSOR LAWRIE POWELL AC

Bridging the bedside and the bench

He is one of Australia's most acclaimed clinical researchers. He can look back on an illustrious career spanning almost half a century of international research into the nature of liver disease, including ground-breaking research on the genetic basis of haemochromatosis. He can also take great satisfaction from the successes of the Queensland Institute of Medical Research (QIMR) that reached new heights under his decade-long leadership in the 1990s.

But what Professor Lawrie Powell AC most wants to talk about, sitting in his office overlooking the imposing contemporary architecture of the Royal Brisbane and Women's Hospital Herston campus, are other people – especially the family of four young female patients who set him off on his journey of exploration of iron storage disease and the man whose mentorship inspired him to take those first steps into the unknown, Professor John Tyrer.

"I was always passionate about clinical medicine and derived great

satisfaction from interacting with patients when I was a medical student," he said. "Part of the reason for entering medicine was that I was curious to know more about the illnesses that were affecting my family. My parents died at relatively young ages – my father during my fourth year of medical school and my mother soon after my graduation. But research wasn't something I'd always wanted to do. It was more that I was provided with an environment and mentors that stimulated and encouraged me."

That stimulating environment was created by Professor Tyrer, Foundation Professor of Medicine at UQ and a man of vision and foresight. On taking up his appointment in the early 50s, he'd set about establishing a University department of Medicine, in a hospital whose traditions had been almost wholly clinical, into a modern, research-based department.

As part of his overhaul, Professor Tyrer persuaded the then Vice Chancellor to fund several training posts called "temporary clinical lectureships". These aimed at giving medical registrars the opportunity to combine clinical responsibilities with research. The young Dr Powell was awarded one of them. He credits "John Tyrer's untiring and very sincere mentorship – his inspiration and stimulation "as the reason why he became "bitten by the research bug".

"John Tyrer recognised the importance of bridging basic science and clinical medicine – from the bedside to the bench and back again," he said.

"We spent half our time seeing patients and teaching and the other half on research. We had academic meetings, journal clubs and so on, and we had patient rounds in the hospital."

It was during this time he found himself caring for four young women from the same family with haemochromatosis. The accepted view of the day was that haemochromatosis was due to excessive alcohol use – people talked about "too much red wine". It was also considered rare in premenopausal women. But these women were young and they were teetotal. This fired his determination to challenge the accepted dogma.

He undertook a three-year systematic investigation of families with Haemochromatosis compared with other families with members with alcoholic liver disease. He was able to show they were clearly separate diseases.

The work was published in the prestigious journal "The Quarterly Journal of Medicine and attracted an editorial in The Lancet which stated that this work was the "last nail in the coffin of the alcohol theory of haemochromatosis"

With a successful doctoral thesis and several publications under his belt. Professor Powell was keen to experience the bigger world and gain overseas experience. Professor Tyrer, himself off on overseas travel, volunteered to "approach five professors" as to the best centre to train in liver disease. All five recommended Professor Sheila Sherlock at London's Royal Free hospital and Tyrer personally approached her on his protégé's behalf. Within a few months, with money from a College Fellowship and a bank loan for additional support, Professor Powell, his wife and the first three of their children, were setting sail for England where he would join the team at the Royal Free. It was no small challenge.

He recognises that the challenges today are greater than ever and the difficulties faced by young clinicians wanting a career in research are significant. "These days it's become more difficult for clinicians to undertake research. It's pretty tough for them to compete with full-time researchers. Funding is increasingly competitive.

Professor Powell was then able to

successfully apply for an advertised Senior Lectureship in the Department of Medicine and returned to the RBWH where he established a strong liver unit with Colleagues June Halliday (a basic scientist) and Graham Cooksley (another clinical scientist). This group soon developed international recognition and attracted research fellows from Australia, UK and the USA.

In 1990, Professor Powell was appointed to the position of Director of QIMR.

"Regrettably, dedicated clinical research departments no longer exists in our teaching hospitals – mainly due to financial stringencies. However, in most of the larger research institutions, clinical researchers and basic scientists work together side by side.

## The best option is to collaborate with others. "My advice is to follow your interests, choose a strong mentor and try to gain some experience overseas. Good mentorship is the key.

"It's only because young researchers are inspired by their mentors that historically, clinical science and medicine have flourished. Hospitals with a strong research culture attract staff with enquiring minds, tenacity and a desire for the pursuit of excellence – such staff themselves attract students and others of like mind and ultimately, the end result is better patient care at cheaper cost. "I have mentored many students and research fellows including some 28 who have completed successful doctoral theses (PhD or MD by research) at UQ including Professor Darrell Crawford current Head of our Medical School. International fellows have come from UK, several European countries including France, Italy and the Netherlands and also Canada and the USA. Some of these have been co-mentored by Professor June Halliday and/or Professor Graham Cooksley.

"More important than buildings is what goes on inside. When Sheila Sherlock started her department at the Royal Free there were no labs. She managed to get some money and had wooden huts built on the roof of the hospital. You had to be fit enough to climb a ladder! Yet the work produced there was exceptional – world leading. This was because of the spirit of endeavour she engendered among the people working with her.

"The first Dean of Johns Hopkins, the remarkable William Welch, wrote over 100years ago:

A university or a medical college may have large endowments, palatial buildings, modern laboratories, and still the breath of life may not be in it. The vitalising principle is in the men and women – both teachers and students – who work within its walls. Without this element of life, the bond between teacher and taught, these things are but outward pomp and show. But let these greater opportunities receive the breath of life from the inspiration of great teachers and they then become the mighty instruments of higher education and scientific progress.

"It stands to this day."

#### PROFESSOR LAWRIE POWELL'S 80 BIRTHDAY CELEBRATION



Back: Dr Peter Roeser, Professor Lawrie Powell, Emeritus Professor Graham Cooksley. Front: Professor June Halliday



Back: Professor Greg Anderson, Professor Grant Ramm, Ms Therese Murphy, Professor Darrell Crawford, Professor Lawrie Powell, A/Professor Linda Fletcher, Emeritus Professor Graham Cooksley, Front: Professor June Halliday

# Keeping it in the Family

#### UQ SCHOOL OF MEDICINE FAMILY TREE

In commemorating its 80th birthday this year, the School of Medicine will celebrate the generations of students who have entered its doors and gone on to make their mark on the world. The Family Tree Project aims to showcase the many connections that have been made among our medical alumni. We not only want to highlight those families who are most prominent but also share the many interesting stories that lie behind them.

We welcome you to contact us via our dedicated www.80-years.medicine.ug.edu.au website, email somcommunications@uq.edu.au or call us on 07 3365 5515.

Spanning three generations, the Cavaye family has many connections with The UQ School of Medicine. Graham Cavaye ('48) and his wife Diana ('48) were for many years active members of the university community. All four of their children attended UQ with Doug ('80) and Caroline ('77) becoming respected members of the medical profession. Each married doctors - graduates of UQ - and now Doug's children are following in the footsteps of their parents and grandparents.

Doug Cavaye recalls following his father, Graham, on ward rounds. "Dad was the Surgeon Superintendent of the Rockhampton Base Hospital. Those were the days before mobile phones or beepers and he used to visit patients at weekends. There was always one or more of us children with him. The hospital was really just part of family life. The nurses used to give us biscuits. We were part of the community - we knew everybody. It was a terrifically rich and wonderful childhood.

"Often I'd wait in his office while he was seeing patients. I remember spending a lot of time poring over surgical text books filled with the most confronting illustrations. I was fascinated. But I was only about eight or nine and of course I had no idea then what I wanted to be when I grew up."

Now, more than 40 years on and as





a respected Brisbane vascular surgeon, its Dr Cavaye's turn to pass on what he knows as his children become the third generation of the Cavaye family to study medicine at UQ.

"There was never any parental pressure on us to enter medicine." says Dr Cavaye. "We were left to make our own decisions. I hope it's the same with my children. I think it was just a matter that we were exposed to a way of life. We had good role models."

Graham Cavaye graduated from UQ School of Medicine in 1948 and went on to undertake surgical training in the UK. He returned in the mid-1950s and settled his family in Rockhampton



L-R: Dr Tom Cavaye, Dr Andrew Mercer, Dr Caroline Mercer (nee Cavaye), Dr Doug Cavaye, Dr Lisa Cavaye and Mr John Cavaye.

as one of only a handful of surgeons north of Brisbane. His wife, Diana a UQ science honours graduate ('48) taught in the UQ Department of Zoology. In Rockhampton, she became the founding Head of Biology at the Capricornia Institute of Advanced Education (now the Central Queensland University).

As her children grew and the family moved back to Brisbane, Diana's career expanded. Over the following two decades she held key positions with the UQ Senate, the National Health and Medical Research Council (NHMRC), the UQ Human Experimentation Ethics Committee (HEEC) and the Queensland Institute of Medical Research (QIMR) Ethics Committee. Diana's service was recognised by UQ with the award of an Honorary D Phil.

"Our mother set a formidable example. Thinking about it, there is a theme of strong, intelligent women running through the family," says Doug. "My mother, my sister Caroline, my wife Lisa and her mother Val are all exceptional people and have been a tremendously positive influence within the family."

Caroline was the first of the two siblings to enter medicine. She too

recalls following her father on hospital visits and the excitement of taking turns to fly with him in a small Cessna to western Queensland on occasional visits to operate on sick patients.

"I remember watching him suture Doug's lacerated foot which made me feel quite faint. I must have been about nine," she says. "The UQ Medical School was my education in every sense. Such a wonderful disparate bunch of committed students and teachers."

Caroline went on to marry fellow UQ graduate, anaesthetist, Andrew Mercer ('75) whose parents were also UQ graduates. Their three children chose careers outside medicine, two of them graduating from UQ (Katherine 2004, Alexandra 2012) and one from Griffith (Will 2013). They too have been shaped by lives spent in a medical household where care and compassion are to the fore.

As a dermatologist, Caroline taught UQ medical students for many years and was closely involved with The Australasian College of Dermatologists, taking on many roles in education, including Chief Censor. Having recently retired, she can look back at a highly satisfying career: "Medicine offers, perhaps uniquely, opportunities to spend a lifetime learning, improving in some small way the lives of others, and giving back to the community which has given us so much."

Doug married UQ graduate and general practitioner, Lisa Longden who he met when they were working at the Royal Brisbane Hospital. They moved to Los Angeles, where Doug continued his training in vascular surgery.

Returning to Brisbane, he taught at the UQ School of Medicine while establishing his surgical practice. In 2011, he resumed a formal commitment to teaching as Deputy Head of the Uniting Care Health Clinical School – one of 11 clinical schools at UQ. Lisa, too, has been actively involved in clinical teaching and





Andrew Mercer ('75)

(nee England)

Dr Diana Cavaye (nee England)



Back: Dr Tom Cavaye and Mr John Cavaye Middle: Dr Andrew Mercer, Dr Caroline Mercer (nee Cavaye), Dr Doug Cavaye Front: Dr Lisa Cavaye

mentoring of UQ medical students in their general practice rotation.

All four of their children are taking the first steps into a medical career with eldest, Tom graduated from UQ Medicine last year and daughter Diana entered third year at the University of Sydney. John is in second year - science direct entry - at UQ while Michael is studying science at UQ and is also destined for medicine.

"In growing up in a medical family, I

hope they have seen that we are happy," says Doug. "It's important they go into it for the right reasons. We haven't set out to influence them. We've made it clear they must make up their own minds.

"I suppose they've watched us over the years. They've grown up with a vision of medical



L-R: Dr Graham Cavaye and Dr Doug Cavaye

practice being a fulfilling life. We might be the boring parents they have at home but we do have really interesting jobs really fascinating jobs. Personally, I can't think of a better way to spend one's working life."



# QEII SCHOLARSHIP SUPPORTS RESEARCHER'S CEREBRAL PALSY ENDEAVOUR

UQ researcher Dr Katherine Benfer will soon depart for Bangladesh with the goal of improving diagnosis and treatment for children with cerebral palsy.

Dr Benfer, whose field is paediatrics and child health, will work in the Bangladeshi capital, Dhaka as a result of her prestigious Endeavour Queen Elizabeth II Diamond Jubilee Scholarship.

"We can reliably predict children at risk of cerebral palsy at 13 weeks of age, however many children in Bangladesh do not receive diagnosis or intervention until much later," Dr Benfer said.

### "We are missing a significant window of opportunity for treatment, when infants' neuroplasticity is optimal."

Dr Benfer plans to establish a community-based, parent-delivered intervention program for infants at high risk of cerebral palsy. "This disease is the most common cause of childhood disability, and 80 per cent of the estimated global burden is in low-resource countries," she said.

Dr Benfer said her work would bring together the strengths of four organisations providing world-class leadership in the disability sector: UQ, Cerebral Palsy Alliance (Australia), Shishu Hospital (Bangladesh) and the Centre for Rehabilitation of the Paralysed (Bangladesh).

Dr Benfer spent 18 months in Bangladesh as an AusAID volunteer in 2007-08, and later worked there during studies for her Masters of Public Health and her PhD.

"A community-based intervention, delivered parent-to-parent in the home, is a viable and sustainable solution in the low-resource setting of Bangladesh," she said.



DR KATHERINE BENFER

In Australia, more than 600 infants are born with cerebral palsy each year.

"With the imminent implementation of the National Disability Insurance Scheme, innovative and sustainable solutions and early interventions that have potential to reduce the disability's life-long impact, are of peak priority," Dr Benfer said.

The Endeavour Queen Elizabeth II Diamond Jubilee Scholarship is awarded to "an exceptional candidate in any field of study to undertake an international research programme that will contribute to the advancement of women's leadership in Australia".



# RESEARCH

# Over \$30 MILLION to the School to help take on global health challenges

#### SOM RESEARCH OFFICE TEAM

Professor Peter Soyer, Deputy Head, School of Medicine and Chair, SoM Research Committee Ms Anne Louise Bulloch, Manager Ms Judy Smith, Grants Officer Dr Matthew Lamb, Publications Officer Ms Lisa Hennell, Project Officer Ms Maxine Wienert, Senior Administrative Officer and RHD Team Leader Ms Marijke Schmidt, RHD Administrative Officer Ms Susan Ben Dekhil, **RHD** Administrative Officer Ms Jo Smith, RHD Administrative Assistant A/Prof Judith Greer, Academic Postgraduate Coordinator (North) Dr Rob Eley, Academic Postgraduate Coordinator (South) A/Prof Diann Eley, MBBS Program Research Coordinator & Chair SOM Internal Ethics Committee A 288 Herston Road. Herston, Brisbane 4006

T +61 7 3346 4938

E research.office@som.uq.edu.au

The School of Medicine boasted a record research income of greater than \$30 million for 2015. This surpasses previous record by almost \$4 million dollars. A significant portion is from the National Health and Medical Research Council (NHMRC) which awarded a total of almost \$54 million to 84 projects, fellowships and centres across UQ, just over a quarter is within the School.

Youth mental illness, musculoskeletal conditions, lung disease in children, neurodegenerative disease, cerebral palsy and better diagnosis and treatment of melanomas are among the raft of health issues that UQ researchers will tackle.

The School of Medicine will become home to two new national Centres of Research Excellence, each of which would receive more than \$2 million in NHMRC funding over five years. Professor Peter Soyer from the Dermatology Research Centre will lead the skin cancer centre in collaborate with the Cancer Council Queensland, Queensland University of Technology, the QIMR Berghofer Medical Research Institute and the University of Sydney. Professor Jason Roberts from the Burns Trauma and Critical Care Research Centre will lead the antibiotic-focused centre, which will bring together national and international collaborators.

#### Centres of Research Excellence

Professor Peter Soyer, Dermatology Research Centre: \$2,496,835

Professor Jason Roberts, Burns Trauma and Critical Care Research Centre: \$2,158,296

#### **Career Development Fellowships**

Dr Tarl Prow, Dermatology Research Centre: \$463,652

#### **Early Career Fellowship**

Dr Dan Siskind (Psych) \$187,322 Dr Lauren Auode (Barbour) \$314,644 Dr Li Lin, Dermatology Research Centre: \$314,644 Dr Mitchell Startk, Dermatology Research Centre: \$314,644

# Translating Research into Practice Fellowships

Dr Helen Benham (Rheum Arth): \$175,303

#### **Research Fellowships**

Professor Ros Boyd, Cerebral Palsy and Rehabilitation Research Centre, was in the fortunate position of being able to choose to take up her Research Fellowship at \$687,975, while foregoing a Practitioner Fellowship at \$467,961.

#### Practitioner Fellowship

Associate Professor James Scott, Discipline of Psychiatry and UQCCR: \$334,258.

#### **Project Grants**

Dr Dan Chambers (Thoracic) \$1,887,790 Dr Dan Cahmbers (Thoracic) \$725,180 Professor Kwun Fong, Thoracic Research Centre: \$3,032,884



#### Project Grant to transfer to SOM Dr Hayden Homer (Reprod Med) \$410,983

#### NHMRC-ARC Dementia Research Development Fellowships

Dr Paul Gardiner (Geriatrics) \$603,901 Dr Theresa Scott (DGP) \$594,644

Dr Paul Gardiner and Dr Theresa Scott are among six UQ researchers who will receive a total of almost \$3.6 million in federal funding over four years to continue their work on dementia. The six were announced as fellows in the joint Research Development Scheme run by the NHMRC.

The number of people with dementia in Australia was projected to triple by 2050. Many elderly Australians already face the challenges of living with dementia. This causes hardships for their families and carers, and as the number of diagnoses rises, these diseases increasingly will be a burden on the health care system.

These grants will allow UQ researchers to work towards the scientific discoveries that will underpin the development of new treatments for Alzheimer's, Parkinson's and Huntington's diseases, and their plethora of symptoms known under the collective term of dementia. In total, 76 dementia researchers received \$43 million in the funding package.



Dr Paul Gardiner, is researching recently identified links between older adults' sitting time, poorer cognitive health and Alzheimer's disease. The links between cardiometabolic health, premature mortality and high levels of sitting time in older adults are well established. To address incomplete data on the links between sitting time, Alzheimer's and cognitive function, Dr Gardner will collect data from a new cohort of frail older adults. Ultimately he aims to develop programs and resources that have a clinical impact and can inform policy through evidencebased recommendations on older adults' sitting time and brain health. Dr Gardiner's project, Stand up to dementia: Reducing prolonged sitting to improve cognitive function in older adults, has received \$603,901 in funding.



Dr Theresa Scott, is researching dementia and driving. She says the issue presents complex emotional, social, legal and ethical ramifications and has serious public health risks. Drivers with dementia have a risk of crashes two to eight times higher than that of other older adults. Dementia has a profound effect on capacity for driving, and stopping driving impacts health and quality of life for people with dementia and their carers. GPs are tasked with reporting patients with dementia who they believe are a risk to public safety, putting them in an uncomfortable ethical position. Dr Scott's project, Rolling it out: Targeted translation intervention to improve driving cessation outcomes for people with dementia across metropolitan and regional areas, has received \$594,644 in funding.

### ARTIFICIAL HEARTS AND UNGS CLOSER THAN YOU THINK

The gold standard treatment for end-stage heart and lung failure is a transplant however falling organ donation numbers gives rise to the need for artificial hearts and lungs to support critically ill patients in the management of acute and chronic end stage cardio-respiratory disease and as a bridge to transplantation.

RESEARCH

The rapid and continuous expansion of these Mechanical Assist Devices (MADs), such as Extra Corporeal Membrane Oxygenation (ECMO) and Ventricular Assist Devices (VAD) highlights the potential benefit to patients from research in this field.

In December 2014, the Critical Care Research Group at The Prince Charles Hospital was awarded a \$2.5 million from the National Health and Medical Research Council (NHMRC) to establish a Centre of Research Excellence (CRE) in Advanced Cardio-respiratory Therapies Improving OrgaN Support (ACTIONS).

Professor John Fraser said CRE ACTIONS is the first mechanical cardiorespiratory support CRE in Australia based in a hospital.

"We are researching MAD related complications, improving device components, developing clinical practice guidelines, training clinical and engineering researchers and exploring the cost benefits of this technology ensuring all Australians can access state-of-the-art mechanical life support," he said. "Our team of clinicians, nurses, engineers, allied health practitioners and scientific experts in VAD and ECMO provides the perfect silo-free environment to advance the understanding in this field and in doing so, improve the lives of patients - today and into the future."

CRE ACTIONS has evolved into a multi-national collaborative extending across Australia, USA, United Kingdom, Germany, France, Russia, Scandinavia, Malaysia, Singapore, China, Japan, Korea, Taiwan and Taipei which has led to PhD scholarships from the world's best mechanical support hospitals including Belfast, Toronto, The Alfred, and the Pitié-Salpetriere Hospital, Paris.

It has also leveraged its research funding to over \$8 million in conjunction with UQ, Metro North Hospital and Health Service, The Prince Charles Hospital Foundation, The Alfred, RPA, Monash University, The Queensland University of Technology, Griffith University, University of New South Wales and The Baird Institute for Applied Heart and Lung Surgical Research.



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# The Queensland Centre for Gynaecological Cancer (QCGC) Symposium

#### It's all in the family for cancer education

The Queensland Centre for Gynaecological Cancer (QCGC) Symposium was held on Saturday 29 August and focused on 'genetics' and how cancer can be inherited. Ovarian cancer survivor Mrs Merran Williams chaired the symposium.

Ms Williams is an experienced gynaecological cancer nurse and was diagnosed with ovarian cancer in 2008; she has been in and out of remission since then. Mrs Williams' daughter also presented at the symposium. Mrs Jo Hoey, who refers to herself as a 'previvor,' underwent genetic testing in 2014 after seeing her mother affected by ovarian cancer.

"I was told I carried the BRCA2 gene mutation, putting me at much greater risk of developing breast and/or ovarian cancer," Mrs Hoey said. "I subsequently underwent prophylactic (preventative) surgery, including double mastectomies, breast reconstructions and the removal of my fallopian tubes."

Mrs Hoey's story was invaluable in educating and informing other women and families about the options available to them.



Director of QCGC Research, Professor Andreas Obermair, presented a onehour update about the research projects undertaken at QCGC Research in the past twelve-months. Other topics included 'how cancer can be inherited,' 'lynch syndrome' (another genetic condition that predisposes to cancer) and screening and prevention updates on breast, ovarian, uterine and bowel cancer.

# \$1 MILLION For Earlier Detection of Lung Cancer

UQ and The Prince Charles Hospital will lead a new centre dedicated to the early detection of lung cancer thanks to \$1 million in funding from the Australian Cancer Research Foundation (ACRF).

Director of the UQ Thoracic Research Centre Professor Kwun Fong said the new ACRF Centre for Lung Cancer Early Detection would focus on the discovery and development of innovative methods for early stage detection of lung cancer. "Lung cancer remains the biggest cause of cancer deaths in Australia and worldwide and has a very low five-year survival rate in comparison to many other common cancer types," Professor Fong said. "Early detection can therefore significantly improve health and treatment outcomes for patients with lung cancer. We are very honoured to receive the ACRF grant to support research into early detection of lung cancer.



The Centre will greatly enhance capacity and act as a focal point for engaging consumers and clinicians in lung cancer research, educating clinicians and students, mentoring new and developing researchers, and translating research innovations into clinical policy and practice worldwide.

Australian Cancer Research Foundation CEO Professor Ian Brown said the grant would greatly boost lung cancer research capability in Australia.

"One of the projects will investigate unique molecules and biomarkers of lung cancer that are likely to be in the exhaled breath of a person with lung cancer from a very early stage," Professor Brown said. "The earlier a cancer is found, the greater is the potential success of the treatment. This is the kind of research ACRF likes to fund – it is bold and innovative and has the potential to change the way lung cancer is diagnosed."

The Centre will concentrate on three major innovative research streams: innovations in diagnostic imaging using Low Dose Computed Tomography (LDCT) screening and computer aided diagnosis (CAD); investigating unique molecular profiles and biomarkers of lung cancer; and advanced innovations in Bronchoscopy techniques.

Professor Kwun Fong

#### THE INAUGURAL ALAN COOPER EPIDERM LECTURE

The Role of Keratinocytes in inflammatory skin diseases

Proudly hosted by the School of Medicine and the Dermatology Research Centre, the Inaugural Alan Cooper Epiderm lecture, entitled: The Role of Keratinocytes in Inflammatory Skin Diseases, was presented by Professor Erwin Tschachler, President of the European Academy of Dermatology and Venereology, from the Medical University of Vienna, Austria.

Professor Tschachler discussed evidence for a central role of epidermal keratinocytes in the initiation and perpetuation of inflammatory skin disorders such as psoriasis and atopic dermatitis, concluding that skin is not only an inert cover of our body but a highly biologically active secretory organ. The lecture was established by UQ in recognition of Epiderm's (formerly the Australian Dermatology Research and Education Foundation) generous support of UQ's dermatology and skin cancer research programs. Professor Alan Cooper, AO, the lecture's name-sake and currently Head of the Department of Dermatology, Royal North Shore Hospital, played a lead role in bringing the 19th World Congress of Dermatology to Australia for the first time in 1997, established Epiderm and served on its board, and continues to be a driving force behind academic dermatology in Australia.

The inaugural event was held at Customs House on Friday 4 September



and generated considerable interest and attendees including UQ dignitaries, CEO's of other research institutions, benefactors and sponsors of skin and skin cancer research at UQ, as well as numerous clinicians and researchers from around Queensland and Australia. Psychosocial Factors in Coronary Heart Disease: An Important Road Rarely Travelled

By Associate Professor David Colquhoun

Psychosocial factors in relation to coronary heart disease as a cause and consequence has been haunting doctors ever since Heberden first described this relationship in 1768.

In 1994 the National Heart Foundation of Australia reviewed the data and was the first body in the World to state unequivocally that certain psychosocial factors were independent predictors of first and recurrent coronary heart disease events. 1 In 2013, the NHFA published a consensus statement regarding the need to screen and treat for depression using the PHQ2. 2

In the 1980s there was still significant skepticism regarding lowering cholesterol and its paradoxically, this made it easy to get cardiologists on board to join in the famous Lipid trial (published New England Journal 1988) which demonstrated for the first time that lowering LDL cholesterol by 1 mmol/L, even if the baseline was only 4 mmol/L, decreased mortality and all cardiovascular events including stroke between 20-30%. 9014 patients were randomised to pravastatin or placebo and the trial was stopped early (p values < 0.000000!!). A battery of psychosocial tests was done at baseline, four months and yearly for four years. This sub-study uniquely demonstrated that cholesterol lowering and statin therapy in particular did not decrease quality of life, did not precipitate depression, and did not precipitate general distress. We measured the General Health Questionnaire at those time points.

In August 2015 at the European Society of Cardiology meeting we presented data on the independent impact on total mortality of persistent moderate distress in patients followed up after 12 years following cessation of the trial. This was judged "Best in Session" in the Rehabilitation and Prevention section. The mini-oral presentation was enthusiastically attended by 30 cardiologists out of an attendance of 30,000! It still is a road less travelled.



#### All-cause mortality be severity and persistence of distress during the first 4 years

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2 Depression in patients with coronary heart disease: A practical tool for screening your patients. 2013 National Heart Foundation of Australia
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# Critical Care research done across two continents wins medical student award

Although the UQ partnership with the Ochsner Health System in New Orleans is focused on training US medical students through a one-of-akind program in Australia and the United States, developing robust research collaborations has also been the goal. One such collaboration is the work done by third year UQ/Ochsner medical student, Ms Chelsea Dymond, who recently won the Best Poster Abstract Award at the Mediterranean Emergency Medicine Congress held in Rome.

Chelsea won the award for her research titled: *The Association Between Emergency Department Quality*  Indicators and Clinical Outcomes for Severe Sepsis and Septic Shock, a joint project between the UQ Burns, Trauma, and Critical Care Research Centre (BTCCRC) based at the Royal Brisbane and Women's Hospital and the Ochsner Clinical School Department of Pulmonary and Critical Care in New Orleans.

Chelsea began her research project during Phase I (Years 1 and 2) of her medical training in Brisbane while working with Dr Julian Williams. She continued her work with Associate Professor and Senior Deputy Head of the Ochsner Clinical School Leonardo Seoane when she returned to the United States to complete Phase II (Years 3 and 4) of her training at Ochsner.

Associate Professor Seoane said Chelsea's research project demonstrates how medical students in the Ochsner cohort can also participate in complementary, cutting-edge research projects.

"By their mere nature such projects can utilise (compare and/or contrast) two different health care systems, across two continents," he said. "Chelsea is one of 10 students helping to foster research collaboration between our institutions by beginning projects in Australia and completing them at Ochsner. In addition, many other students have taken advantage of the multiple research opportunities offered at the UQ and at Ochsner."

Professor Jeff Lipman, Director of the BTCCRC said developing robust research collaborations has been a goal since the beginning of the partnership between the UQ and the Ochsner Health System.

"The BTCCRC and Ochsner's Department of Pulmonary and Critical Care have been a model for how to develop such collaborations," he said. "Ochsner is currently one of the research sites for 'Sampling Antibiotics in Renal Replacement Therapy,' an NHMRC funded multinational prospective pharmacokinetic study run by the BTCCRC. The collaboration leverages the basic science and translation research excellence at BTCCRC and the robust clinical research opportunities at Ochsner."

# Hosting overseas trainees at the Centre for Kidney Disease Research

The Centre for Kidney Disease Research (CKDR) usually hosts 2-3 overseas trainees each year. These trainees are supported by scholarships. The traineeships therefore provide motivated young professionals who bring an international perspective to the staff and students at CKDR, helping to establish new professional research contacts, and providing a stimulating cross-cultural experience for everyone. Three trainees are at the CKDR in 2015.

Professor Wenzhe Song is Associate Chief Physician and Associate Professor at Xuzhou Medical University of China. He is a surgeon with a specialty in surgery of breast and thyroid, working in the Department of General Surgery, in the hospital affiliated to Xuzhou Medical University. Professor Song is investigating the role of tumourassociated macrophages in cancer progression at the CKDR. He is also collaborating with Dr Tao Yong, pathologist from the Sydney & South Western Sydney Local Health Districts Pathology Services.

Dr Kunyu Shen is a Master of Medicine (Internal Medicine in Chinese Medicine). Guangzhou University of Chinese Medicine, and a Bachelor of Medicine (Chinese Medicine), Shandong University of Traditional Chinese Medicine, China. While working as an Intern at the Guangdong Provincial Hospital of Chinese Medicine, she was awarded a travel scholarship to study with Professor David Johnson and A/Professor Glenda Gobe at the CKDR. Her projects will involve acupressure as a therapy for sleep disorders in dialysis patients, and a basic science project studying alternative medicines for chronic kidney disease.

Mr Parth Thakor is a PhD research scholar from the BR Doshi School of Biosciences, Sardar Patel University, Gujarat in India. His field is biotechnology and he has been researching the use



L-R: Professor Wenzhe Song, Dr Kunyu Shen and Mr Parth Thakor

of natural compounds for novel cancer treatments. He was awarded INSPIRE Junior and Senior Research Fellowships in 2013 and 2015 in India, and is working at the CKDR on a prestigious Australian Endeavour Research Fellowship in 2015, researching a plant compound as a possible therapy for kidney cancer.

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# THE CLINICIAN SCIENTIST TRACK AT THE UNIVERSITY OF QUEENSLAND: **FIVE YEARS OF PROGRESS**

The decline in the number of clinician scientists continues to be a global concern. Clinician scientists fill a unique niche combining science with medical practice. A shortage of clinicians with research training could jeopardise clinical research and future healthcare. Medical training is long and arduous but introducing research training in the early stages of medical education not only instils critical thinking and important analytical skills but helps ensure a productive clinician scientist an average of 7-10 years earlier than postponing a PhD until after medical training.

In 2011 the School of Medicine introduced the Concurrent MD-MPhil, as part of the Clinician Scientist Track (CST), to allow outstanding research focused students the opportunity to undertake the MPhil concurrently with their medical program. The CST continues to fulfil our initial aims. Between 2000 and 2010 the number of medical students enrolled in a research higher degree was 16. Since January 2011 there has been an average of 14 enrolments per year, at present totalling 63 research higher degrees - including six completions. Furthermore, the rate of transfers from an MPhil to a PhD is approximately 30%.

Our most recent completion was Dr Tim Hanrahan, a 2014 MBBS graduate who completed his MPhil under the supervision of Prof Jason Roberts and Prof Jeffery Lipman of the Burn Trauma and Critical Care Research Centre. Tim's thesis was entitled 'Vancomycinassociated nephrotoxicity in the Critically-III'.

Other news is Dr Matthew Roberts (MBBS 2011), a PhD candidate supervised by Prof Frank Gardiner was chosen as a delegate to the Global Young Scientists Summit for 2016, an initiative of the Australian Research Council.



ABOUT ASSOCIATE PROFESSOR DIANN ELEY

Associate Professor Diann Eley is the Director of MD/ MBBS Research in the School. Her research career began as a bench scientist in reproductive physiology in the USA, Kenya and the UK but her move to Australia in late 2003 shifted her research focus to medical education, rural health and workforce.



Mr Tim Edwards 2017 MBBS-PhD

#### What is your research about?

I study human and animal models with agenesis of the corpus callosum in Professor Linda Richards' Lab at the Queensland Brain Institute. I combine ultra-high field MRI with tractography and a field of mathematics called graph theory to describe how brain networks are reorganized in this brain malformation. My ultimate goal is to discover principles and mechanisms of brain rewiring that will lead to improved prognosis (and eventually therapies) for neurodevelopmental disorders.

#### What made you decide to undertake a PhD alongside your medical degree?

In my high school and undergraduate years I have had some terrific mentors that have fostered a curiosity in science. I volunteered in my current lab during my undergraduate and first two MBBS years and I got the research bug. This culminated in working at the University of California, San Francisco with Profs Elliott Sherr and Jim Barkovich to establish the first developmental framework for classifying corpus callosum syndromes. These experiences got me interested in the diversity of neurodevelopmental disorders. I count myself as very lucky to have had the opportunity to do a PhD in this field early in my medical career. It has so far been incredibly rewarding.

#### How do you plan to use your Research Higher Degree training in your clinical career?

I would ideally like to combine clinical practice and research. There is huge potential for greater translational research in neuroscience, and a clinician-scientist career-path would hold me in good stead to contribute to future discoveries in the field. Next year I will go back to 3rd year MBBS and will continue part-time as a PhD candidate.



Dr Dylan Flaws developed an interest in medicine through clinical research. After he co-authored the ASPECT study in the Lancet in 2011, it was suggested that he begin by undertaking a concurrent MPhil which he soon upgraded to a PhD during his medical degree.

Under the supervision of Dr Louise Cullen and Dr Martin Than, Dylan's research compares various statistical methods available to researchers who wish to create a clinical decision aid.

"I created three decision aids each using a different statistical process from a single database of patients that presented to Royal Brisbane and Christchurch Public Emergency Departments with chest pain," Dr Flaws said. "I have been validating each of these decision aids in both local and international populations (Australia, New Zealand, United Kingdom, Canada, USA) to provide a robust within-subjects comparison of their performance."

Dr Flaws says eventually this will provide future researchers with a strong evidence base as to which method to use when producing decision aids. In the meantime, one of the decision aids produced by his thesis has proven highly useful clinically, and is now being used in **Emergency Departments** in Australia and New Zealand to aid clinicians in assessing chest pain.

"My ultimate goal is to become a clinician-scientist, and use my clinical practice to inform my research goals in order to continue producing clinically relevant research," Dr Flaws said. "I also hope to remain up-to-date with the cutting-edge research in my field, and assist in translating good research into good clinical practice."

Dr Flaws chose to specialise in Psychiatry, and began his registrar training this year. Once he has completed his PhD he aims to immediately engage in research projects in this field.

"Psychiatry is a specialty which is often predicting and managing risk," he said. "As such, there is ample opportunity to apply the findings of my PhD to this field. I am currently exploring the possibility of a multinational collaboration to this effect (still in its early stages at this point)."

# ALUMNI





#### **REUNIONS**

Planning class reunions is one of the services the School of Medicine offers our medical alumni.

For 2016, plans are underway for Classes of 1956, 1966, 1976, 1986, 1991 and 1996. If you have a milestone graduation anniversary in 2016 or 2017 and would like a reunion organised please contact me.

I look forward to celebrating your UQ class reunion with you.

Hayley Smith Events Officer, Alumni & Engagement E: h.smith7@uq.edu.au M: 0408 691 023 T: +61 7 3365 5515



Class of 1965



Class of 1995

# THE MAYNE CONNECTION



#### 1965

#### PROFESSOR MAURICE WEBB

Professor Maurice Webb graduated from the UQ School of Medicine in 1965. Following his residency at the Princess Alexandra Hospital in Brisbane, he was a Teaching Registrar in Obstetrics and Gynaecology at the Brisbane <u>Hospitals</u>.

In 1970 Professor Webb embarked on an international career, firstly in Portsmouth England, where he was a Registrar in Obstetrics and Gynaecology and obtained the MRCOG, London. He was awarded an Australian Postgraduate Federation Fellowship to the Mayo Clinic in Rochester Minnesota in 1971, where he undertook training in Gynecologic Oncology and Surgery before that subspecialty had been formally established in the USA.

Professor Webb was invited to join the consultant staff at Mayo Clinic in the Departments of Obstetrics and Gynecology and the Department of Surgery, and subsequently was certified by the American Board of Obstetrics and Gynecology. Once the American Board of Gynecologic Oncology was established he was certified by that Board in 1976, the first Australian to receive that qualification. He became a Fellow of the American College of Surgeons in 1976 and was also certified in Gynaecologic Oncology in Australia when that certification was established in 1988.

Professor Webb returned to Brisbane in 1981 and established the Queensland Gynaecologic Oncology Service based at Royal Brisbane, Princess Alexandra and Mater Hospitals. He also established a private practice in Gynaecologic Oncology based at The Wesley Hospital, Brisbane. In 1988 he returned to the Mayo Clinic and was appointed Professor of Gynecologic Oncology and Consultant in Gynecologic Surgery. Subsequently he became Chair of Gynecologic Surgery. He was inducted into the Teacher of the Year Hall of Fame at Mayo Clinic.

Professor Webb was elected to the Board of Regents, the governing body of the American College of Surgeons and served in this capacity for six years until his retirement from practice in 2003. He was President of the Society of Pelvic Surgeons in 2005.

His major interest was in international education in developing countries and he received numerous recognitions for his contributions, including an Honorary Professorship at the Carol Davila Medical School, University of Bucharest, Romania, and Doctor, "Honoraris Causa", University of Medicine & Pharmacy, Iasi, Romania.

He retired from practice at Mayo Clinic in 2003 and now lives in Mudgee NSW where he and his wife Dr Val Webb (Skerman) own Mudgee Homestead Guesthouse which is managed by their daughter and her husband. He was appointed Clinical Professor of Obstetrics and Gynaecology, University of Woolongong and taught medical students from that university for a number of years during their final year of medical school when they spent a year in Mudgee.



#### 1975 DR PATRICA HARRIS

Dr Patricia Harris graduated from the UQ School of Medicine in 1975 and is now a General Practitioner.

She has great memories of her time at Medical School and how those six years shaped her future life. She was one of the fortunate who knew from a young age that Medicine was what she wanted to do and she's spent the last 46 years living her dream. Dr Harris came from a small country town called Murgon and her first days at St Lucia campus were slightly daunting not knowing anyone. She soon made friends and some of those remain special friends and on the Christmas letter list to this day. She will always be forever grateful to her parents who gave her that opportunity.

After graduating, she spent three years at Princess Alexandra Hospital in Brisbane and then moved into General Practice. She was fortunate to spend three years working as a GP at Inala Community Health Centre, she had great mentors there and gained her FRACGP.

Dr Harris moved to Yeppoon in 1981 and commenced as a solo GP and is happy to say that she is still there. Working full time as a solo GP for 26 years has had its challenges especially when she has three sons as well. It does not happen without a very supportive husband and family - as her husband says "It's very difficult being married to a doctor- especially a solo GP!" For the last nine years Dr Harris has trained Registrars and her practice now supports three full time doctors. Teaching both Registrars and Students is challenging but rewarding and certainly assists her lifetime of learning.

The best thing about General Practice is the patient contact sharing the journey of individuals and families. Treating the babies of mother's she delivered is very special. The patients of course grow old with you and her practice now has a large Aged Care sector!

In her spare time Dr Harris is involved with medical boards and committees. She finds this work rewarding and interesting. She has tried to keep up her music, playing the piano, but there never is enough time for practice – on the retirement agenda! Whenever that is?

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UQMEDICINE SUMMER 2015 - 2016









# UQMS

28 STUDENTS' CORNER

Inspiring and offering each other a helping hand is what UQMS has always been about. Last year we ran our Mock OSCE that saw over 650 MBBS 2 and 4 year students completed full practice OSCEs in our biggest campaign yet. Our Peer Tutorials ran throughout 2015 - these tutorials offer peer support and teaching across all year levels, as well as masterclasses in topics such as Anatomy and Ethics. Our Surgical Interest Group has satisfied everyone with yearnings to hold a scalpel with a full suite of workshops, lectures, seminars and anatomy tutorials. We ran a number of conferences including the stimulating Global Health Conference and the annual Pre-Elective Workshop in early October. In partnership with the School of Medicine, two research events showcased the depth of student projects and research performance. We have also arranged a number of motivating speakers who have shared inspiration from different parts of the world. A highlight was Dr Tenzin Bhaye, personal physician to His Holiness the 14th Dalai Lama in his introduction to Tibetan Medicine.

We held our 2015 AGM on Tuesday 27 October at the Mayne Medical School at Herston. This meeting incorporated the election of the Management Committee for 2016, as well as several other convenor and representative positions. With this election, we announced that we would be restructuring the UQMS Management Committee for 2016 – where a number of new positions have been created or modified.

#### 2016 UQMS Elected Management Committee

President: Tom Pearson Treasurer: Tayla Tatzenko Secretary: Stephanie Zhu AcademicInternal: Tom Randell AcademicExternal: Jordan Budgen Community: Mitchell Cox Sponsorship: Honor Magon Engagement: Gough Kettle Social: Adam Tucker Liaison: Rob Thomas

All information regarding the AGM elections is available on the UQMS AGM elections website:

www.uqms.org/elections uqms.org



# Ashintosh Foundation

Our Teddy Bear doctors continue to visit school students around Queensland, and the first John Woolcock Memorial Innovation Grant was awarded to 4th year student Kate Engelke for her 'Docs 4-Students' program. In July, Ashintosh celebrated 10 years of charitable work, with the Queensland Medical Orchestra and Choir staging a beautiful concert in City Hall, enjoyed by over 800 people. The inaugural Ashintosh Trivia Night saw medicine's greatest minds compete to answer questions about everything but medicine. Surprisingly, the night was taken out by a group of MD1 students, showing they at least make up for the lack of medical knowledge with something. Our biggest sporting event of the year, Bridge to Brisbane, was another great success, with over 50 runners, including our mascot, Big Ted, joining the Ashintosh Team for the iconic run. A big thank-you to all our supporters so far this year, we hope to see you at the last few events for the year - Ashintosh Jazz Gala Ball, Coffeehouse, and QMO's Christmas concert.

# STUDENTS' CORNER





# TIME

#### Towards International Medical Equality

TIME is UQ's premier global health group with a mission to empower and support students to make a sustainable difference in health equity at home and abroad. We run projects throughout the year focusing on Refugee, Environmental, Maternal and Indigenous health. We also help our first years make the most of their electives and provide medical aid to the areas they visit. Like any good student club, our social events are not to be missed and we'd love to see you there. If you'd like to get involved or support us in any way, contact us on <u>exec@timeuq.org</u>

#### timeuq.org

instagram.com/time\_uq/

# SWIM

#### Supporting Women in Medicine

SWIM has been very busy, continuing to offer a wide range of events for medical students. During the month of August, we encouraged our members to sweat it out every Sunday morning at our circuit training sessions in the picturesque West End Park. Our second and third Clinician Dinners have brought doctors and students together over a marvellous meal: our students got the opportunity to chat with inspirational physicians in the fields of Dermatology, Geriatrics, Obs&Gyne, Cardiology and Rural medicine. SWIM would like to thank



students and clinicians alike for their involvement in all our events in 2015. swimuq.org.au



#### Towards Rural and Outback Health Professionals in Queensland

TROHPIQ is the rural health club for UQ, QUT and ACU, bringing together like-minded medical and allied health students who have the desire to improve rural health in Australia. We're dedicated to enabling students to experience various elements of rural health with the ultimate goal of increasing interest in what is an incredibly rewarding field. Our highlights in 2015 include, reaching over 350 high school students from rural Queensland, attendance of three Indigenous events from Cherbourg to North Queensland, three massive skills days, sponsorship of 20 rural elective scholarships, our charity gala ball, and many more positive rural experiences.

#### trohpiq.org

**#DiscoverRural** 



# GPSN

#### General Practice Students Network

GPSN is a national student-run organisation and our aim is to promote the career and life in GP. 2015 was an an incredible year for GPSN at UQ. With just a team of nine, we successfully ran nine phenomenal events. Each event had overwhelming sign-ups and feedback was unanimously positive, with students always calling for more. A particular highlight was the pilot run of two new events: the GP Grand Rounds and the GPSN symposium. Success of these events really proved that GPSN has



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flourished as a medical student club this year. We ended 2015 with an AGM and Social Bowls night where we welcomed the 2016 GPSN executive team. We look forward to seeing you all next year!

#### gpsn.org.au



# AMSA The Australian Medical

# Students' Association

AMSA is the peak representative body for Australian medical students. The key mandate of the Association is to connect, inform and represent every one of Australia's 17,000 medical students. AMSA has run a vast array of events, projects, and initiatives this year. They have been key in advocating on international student issues, Internships, the Border Force Act, Sexual Harassment in Medicine, Rural and Global Health and many more issues. The work of AMSA is sometimes hard to define due to the phenomenal number of volunteers and time that they invest into AMSA giving it its complexity. From the National Convention to the Global Health Conference and the National Leadership Development Seminar, AMSA is incredibly diverse. Students have represented UQ at these events, as well as in policy creation or debate at AMSA councils, in publications such as Panacea and in work such as AMSA Academy.

Fond Regards from the 2015 UQMS Executive

# MARKS HIRSCHFELD MUSEUM OF MEDICAL HISTORY



After 35 years as a rural GP in Charleville in Western Queensland Dr Chester Wilson has left for semi-retirement near Kingaroy in the South Burnett region of Queensland. He has kindly donated medical instruments and memorabilia to the Marks Hirschfeld Museum which includes items from the period when the Charleville practice had been run by Dr Lou Arriotti, also a long term rural doctor.

The collection reflects the need for doctors practicing in distant locations to be ready for almost anything. It also reminds us that while distance can be a tyranny it does not protect the practitioner from collecting coffee mugs.

The collection arrived at the museum coincidently at the same time that the School was planning the Family Tree Project, which aims to highlight the many generational connections the School has. We soon realised that the Museum had items from at least three of Chester's extended family.

The Banjo playing Chester is a third generation doctor. His great-great grandfather, Dr Benjamin Gilmore Wilson was a minister of the City Baptist Church in Brisbane and a practicing

homeopath. His Grandfather, also Dr Benjamin Gilmore Wilson was appointed medical superintendent of Ipswich Hospital in 1915 having trained in Sydney, as Queensland did not have a medical school. Chester's father Dr Chester Gilmore Wilson was the second child in a sib-ship of four, all of whom were doctors and all of whom bore the name Gilmore. Harry Gilmore Wilson, the eldest of the four, featured in the Marks Hirschfeld Museum 'Innovations' exhibition' with the lung capacity meter which he had built in the 1950's. Dr Brian Gilmore Wilson (Ophthalmologist) and Dr Esther Francis Gilmore Roe (GP) complete that generation.

Chester's generation has no less than eight doctors. Three of Dr Harry Wilson's children practiced Medicine - John Gilmore Wilson (O&G), Ian Gilmore Wilson (Psychiatrist) and Marny Gilmore Wilson (GP), both interstate. Chester's sib-ship includes Esther (O&G), Louise (GP), and Peter (Paediatric Oncology). Dorothy Steindl (GP) is the daughter of Ester Francis Gilmore Roe (nee Wilson), and Dr Charles Roe.

Research of this tree is incomplete at time of writing, gentle shaking of the tree could bear fruit. There is at least one vet in there which could prove decisive should there be an equally productive medical tree elsewhere.

The museum also has a humidicrib produced in 1947 suitable for twins by Stuart Patterson who is on a branch of the same tree that started with the homeopath teacher. That is another story.

# STAFF UPDATE

# **New Appointments**

#### **Professor Mark Smithers** Head of Discipline and Mayne Chair of Surgery



Professor Mark Smithers has been appointed to the role of Head of Discipline and Mayne Chair of Surgery and formally commenced this post on 1 October 2015. Professor Smithers has been the Director of the Upper Gastro-Intestinal and Soft Tissue Surgery Unit at the Princess Alexandra Hospital since 1996, and the Academic Lead in Surgery on the PAH campus since 2008. He obtained his MBBS at UQ in 1977 and became a Fellow of the Royal Australasian College of Surgeons in February 1985 and a Fellow of the Royal College of Surgeons of England in January 1986.

Professor Smithers has outstanding track records in teaching and research and has already made a great contribution to the School. His qualifications, experience, leadership qualities and other personal attributes will allow him to excel in this critical leadership role. Professor Smithers has been acting in this role since the passing of Professor Phil Walker.

#### **Professor Hayden Homer**

#### Professor Christopher Chen Chair in Reproductive Medicine



Professor Hayden Homer has been appointed to the role of Professor Christopher Chen Chair of Reproductive Medicine and formally commences this post in January 2016. He is currently the Co-Director of the Oocyte Biology Research Unit at the University of New South Wales (UNSW). Professor Homer leads the research programme in that unit which is aimed at understanding the molecular basis of oocyte quality and its striking decline with aging. He is also a Staff Specialist in Gynaecology and Reproductive Medicine at the Royal Hospital for Women in Sydney. Prior to this he was a

Wellcome Trust Clinician Scientist and Lead for the Mammalian Oocyte Research theme at the Institute for Women's Health, University College London. He was also Consultant Sub-specialist in Reproductive Medicine and Lead for NHS IVF at University College London Hospitals NHS Trust. Professor Homer obtained his MBBS in August 1992 and became a Member of Royal College of Obstetricians & Gynaecologists, UK in May 1999. In May 2009 he completed a Doctor of Philosophy on molecular oocyte regulation with the University of Newcastle-upon-Tyne in the UK. He is an accredited specialist in Obstetrics & Gynaecology and Sub-specialist in Reproductive Medicine & Surgery (RCOG, UK). Professor Homer's role as the Christopher Chen Chair in Reproductive Medicine will provide leadership in research into reproductive and infertility medicine. Professor Homer will conduct laboratory work within the UQ Centre for Clinical Research building and will also conduct clinical research activities within the Queensland Fertility Group.

#### Dr John Waugh

#### Deputy Head, UQ Northside Clinical School, Caboolture Hospital



Dr John Waugh has been appointed to the role of Conjoint Deputy Head, UQ Northside Clinical School, Caboolture Hospital and formally commenced this post on 6 July 2015. Dr Waugh is the Director of Paediatrics at Caboolture Hospital and was previously Director of Medical Services at Caboolture Hospital from 2007 to 2014. He obtained his MBBS from UQ in 1985, FRACP in 1994 and his FRACMA in 2010, and has previously held positions at the PA, Mater Children's, Royal Children's, Logan, Redcliffe and Nambour Hospitals.

# **Departures**



#### **Professor Malcolm Parker**

Malcolm (Mal) Parker, Professor of Medical Ethics and Head, Discipline of Medical Ethics, Law and Professional Practice, is retiring after 22 years with the School.



#### **Professor William Pinsky**

Professor William (Bill) Pinsky is Head of the Ochsner Clinical School and Executive Vice President and Chief Academic Officer at the Ochsner Health System will also be retiring in February next year. Prior to joining Ochsner in 1999, Professor Pinsky's career had been university-based in an academic career in Paediatric Cardiology. Professor Pinsky will be back in Australia next year for the MD Welcome Day.



#### **Professor Malcolm West**

Malcolm West is Professor of Medicine who has trained as a cardiologist. His principal research interests are genetics factors associated with susceptibility to cardiovascular diseases (especially hypertension, cardiac hypertrophy and hyperlipidaemia) and aortic aneurysm disease (Marfan syndrome and abdominal aortic aneurysm). He also has interests in the relationship between periodontal and cardiovascular diseases.

# STAFF LIST The University of Queensland, School of Medicine

#### **HEAD OF SCHOOL**

Professor Darrell Crawford

#### **DEPUTY AND CLUSTER HEADS**

Professor Leonie Callaway	Northern Clinical School Cluster and Deputy Head
Professor Peter Soyer	(Acting) Southwestern Clinical School Cluster and Deputy Head

#### **DEPUTY HEAD (ACADEMIC PROGRAMS)**

Professor Mieke van Driel

Deputy Head of School (Academic Programs)

#### HEADS OF DISCIPLINES

Professor Jeffrey Lipman Anaestheslology and Critical Care Professor Mieke van Driel **General Practice** Professor Alan Coulthard Medical Imaging Professor David McIntyre Medicine Professor Sailesh Kumar **Obstetrics & Gynaecology** Associate Professor Mark Coulthard **Paediatrics** Professor Sunil Lakhani Molecular & Cellular Pathology Professor Gerard Byrne Psychiatry Associate Professor Bruce Chater **Rural and Remote Medicine** Professor Mark Smithers Surgery

#### HEADS OF CLINICAL SCHOOLS

Associate Professor Elizabeth Chong Professor Michael Whitby Associate Professor Stephen Brierley Professor David McIntyre Professor Ian Yang Professor William Pinsky Dr Helen Benham Associate Professor Lata Vadlamudi Associate Professor Riitta Partanen Associate Professor Steven Coverdale Associate Professor John Allan

#### MEDICAL PROGRAM MANAGEMENT

Dr Jennifer Schafer Dr James Fraser Dr Margo Lane Associate Professor Diann Eley Dr Maree Toombs Professor Nicholas Hawkins

#### SOM MANAGEMENT

Mr Morgan Bingham Ms Anne Louise Bulloch Ms Danielle Clarke Ms Cheryl Connor Ms Bernie Cook Ms Brittany Forsyth Mr Tony Madsen Ms Cecile McGuire Ms Adrienne Pryor Northside Clinical School Ochsner Clinical School (Acting) PA Southside Clinical School (Acting) Royal Brisbane Clinical School (Acting) Rural Clinical School Sunshine Coast Clinical School UnitingCare Health Clinical School

Brunei Clinical School

Ipswich Clinical School

Mater Clinical School

Greenslopes Clinical School

Director of MBBS/MD Program Deputy Director MBBS/MD Program Deputy Director MBBS/MD Program MBBS/MD Program Research Coordinator Senior Research Fellow (Indigenous Health) Professor of Innovative Technology in Medical Education

Manager, Student Administration Manager, Research Office Manager Financial Analyst Manager, Finance Manager, Human Resources Manager, Infrastructure Planning and Development Manager, Engagement and International Manager, Operations

# PHILANTHROPIC SUPPORT HELPS SAVE LIVES

**PROFESSOR JASON ROBERTS** 

He's one of UQ's youngest professors and the winner of several prestigious scientific prizes but Professor Jason Roberts has never forgotten what philanthropy did for him when he was beginning his research.

"My first research grant meant I could buy catheters so I could work out the most effective way to administer antibiotics to seriously ill patients, and has led to a huge program of research that we now lead in the Burns Trauma and Critical Care Research Centre," Professor Roberts said.

"The gift was from the Royal Brisbane and Women's Hospital Foundation (RBWH) and they've been a fantastic supporter of research generally at the Herston campus.

"Philanthropic gifts have always been very, very important and now they are going to become more competitive because other funding models, such as the National Health and Medical Research Council (NHMRC), are also becoming increasingly competitive."

Professor Roberts works in the intensive care unit at RBWH, where

he does research into treatments for patients with severe infections, including multi-drug resistant bacteria as part of his research into immunity and infectious diseases with UQ's School of Medicine and the UQ Centre for Clinical Research. This research area is vitally important to reduce the high mortality rates that are still associated with infections in critically ill patients.

His work has been supported by several organisations, including the NHMRC, the Australian and New Zealand Intensive Care Foundation, the Prince Charles Hospital Foundatwion, the Viertel Charitable Foundation, Clive and Vera Ramaciotti Foundations and the Society of Hospital Pharmacists of Australia.

To learn more about what our researchers are working on and to make a gift to further research at UQ's School of Medicine, visit <u>uq.edu.au/giving</u>



CONTACTSchool of Medicine Alumni Network288 Herston Road, Herston Q 4006PHONE+61 7 3365 5515FAX+61 7 3365 5522EMAILalumnienquiries@som.uq.edu.au

www.medicine.uq.edu.au