Purpose and commitments

The School of Public Health and Preventive Medicine (SPHPM) is the second largest school within the Monash University Faculty of Medicine Nursing and Health Sciences.

Our mission is the prevention of disease and disability through a commitment to education, innovation, leadership, and research.

We are the Faculty’s principal source of expertise in epidemiology (including clinical epidemiology), biostatistics and large-scale clinical data management. We have particular expertise in large epidemiological studies, multicentre clinical trials, clinical registries, evidence synthesis and health social science.

Our skills underpin high quality research in public health, clinical and health services research. We have research programs in each of these areas.

Our research addresses several of the principal agendas of healthcare including:

- chronic disease prevention and health promotion;
- increasing the evidence base of healthcare;
- improving quality and safety of healthcare;
- advancing health information technology;
- improving cost-effectiveness;
- improved translation of biomedical research into clinical and public health practice;
- prolonging disability-free survival among the elderly;
- improving the care of the critically ill and injured;
- reducing adverse health impacts in the environment and the workplace; and
- global health improvement.

We work closely with the Alfred Hospital and other major Monash-affiliated hospitals, research institutes and public health units within Victoria. Our skills provide a key resource underpinning translational research within our Faculty.
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In 2009, the School responded to two major public health issues critical to Victoria and Australia.

The year began on a sad note as a result of the Victorian bushfires. This presented a major undertaking for our colleagues in the Victorian Institute for Forensic Pathology. Other parts of the School also advised on the effects of fire-fighting chemicals on drinking water, reported on the management of those hospitalised with burns and on the impact of heat stress on older people.

The H1N1/09 influenza outbreak was the second major health issue for the year. Again, individuals from several parts of the School contributed to the national public health response. Members of our Infectious Disease Epidemiology Unit helped to develop the national clinical and infection control guidelines, set up a hospital-based sentinel surveillance program (FluCAN) and performed studies of the immunological responses to influenza infection and vaccination. Other contributions included studying the effect of the influenza pandemic on the supply of blood and blood products and an involvement in the national committee monitoring the safety of the H1N1/09 vaccine.

Both these examples portray only some of the contributions of our staff to major public health issues and the depth of expertise present in the School. We provide this expertise in a wide range of areas to governments and other organisations in Australia and abroad. We employ over 100 doctoral-qualified staff and are now the second largest School within the Monash Faculty of Medicine, Nursing and Health Sciences. We have a staff of over 300 and an annual budget of $34 million of which $21 million is derived from research, with over $11 million from the National Health and Medical Research (NHMRC) and Australian Research Council (ARC). This strong research environment has increased our capacity for clinical, public health and health services research.

Research

In research, we continued with our long-term goal of strengthening our ‘methodology core’ of epidemiology, biostatistics and data-management. This will progressively strengthen our capacity to undertake high quality clinical, public health and health services research. Our capacity to handle large health-related datasets has now reached a high level of sophistication. This is made possible thanks to our newly formed Clinical Informatics and Data-Management Unit and our excellent Biostatics Unit that has been fundamental in underpinning our research performance.

We also progressed in our second major goal of developing a high-level infrastructure of large trials, cohort studies and registries. This took a major step forward with funding from the US National Institute of Aging for the ASPrin for Reducing Events in the Elderly (ASPREE) trial. This study is being undertaken in collaboration with colleagues at the Berman Centre for Outcomes and Clinical Research in Minneapolis, headed by Richard Grimm. The study will recruit nineteen thousand participants who will be randomised to either low-dose aspirin or placebo and followed for five years. Our registry development program continued with the establishment of a new pilot prostate cancer registry and two specialised registries in haematology in conjunction with colleagues at the Red Cross Blood Transfusion Service.

Among other research highlights in 2009 were the successful renewal of the NHMRC Program grant by Henry Krum and Chris Reid (to study chronic heart and kidney disease) and a Capacity Building Grant to a consortium of researchers headed by Malcolm Sim and the Monash Centre for Occupational and Environmental Health. The School was also successful in gaining two of the new NHMRC partnership grants, one for transfusion research and the other for studies of water quality. The Australian and New Zealand Intensive Care Society (ANZICS) Clinical Trials Group successfully applied for renewal of an NHMRC Enabling Grant. Major funding was also received from the Victorian Neurotrauma Initiative for a variety of projects including a $4.4 million Program grant to Russell Gruen and Sally Green to study the outcomes of brain injury.
Several of our senior staff were included in the successful application to establish the new $26 million Institute for Safety, Compensation and Recovery Research, a partnership among Monash University, WorkSafe Victoria and the Transport Accident Commission. This institute will have close links with our school and is expected to be the source of many collaborative research projects.

Publications
The media showed significant interest in several of our research studies. Paul O’Brien and his colleagues at the Centre for Obesity Research and Education found that recently diagnosed type 2 diabetic patients who underwent lapband surgery had a substantial reduction in lifetime healthcare costs. In the New England Journal of Medicine (NEJM), Rachelle Buchbinder published a study evaluating the effectiveness of bone cement osteoporotic fractures. In another NEJM study, the ANZICS group led by Steve Webb (from Perth) described the epidemiology of H1N1/09 influenza as measured by intensive care admissions. Henry Krum received extensive publicity for several studies involving a new surgical technique to reduce high blood pressure and Charles Livingstone received extensive publicity for his work on gambling.

We continue to publish several high profile newsletters, including the Australian Patient Safety Bulletin and Health Stream, a newsletter summarising new information on water and health that is widely circulated internationally. Our NHMRC Centre for Research Excellence in Patient Safety continued its successful seminar series examining issues of safety and quality of care.

Teaching
The year was also eventful on the teaching front. Under the direction of Helen Keleher and Brian Oldenburg, extensive planning was undertaken for a new and redeveloped program for the Bachelor of Health Science degree that will become the flagship undergraduate course of the School. The degree is intended to produce public health practitioners and provide an entry into a variety of other postgraduate degrees, including medicine. It has been co-developed with a similar course to be conducted at Monash South Africa. Redevelopment of the course was facilitated by the move of the Department of Health Social Science from the Peninsula campus to the Caulfield campus where we now have a substantial base of activity.

The School also assumed the coordination the Victorian Public Health Training Program. This is coordinated by Robert Hall on behalf of the Victorian Department of Health and provides public health training for a selected group of students who will graduate with a Doctorate of Public Health. The program consists of a mix of coursework and research and involves research placements from a variety of Victorian public health organisations. There were 10 students enrolled in 2009, five of whom had transferred from the previous course at La Trobe University and five were new enrollees.

Staff
During the year several of our staff and students were recognised with a variety of individual awards. Helena Teede received the Minister’s award for outstanding individual achievement at the 2009 Victorian Public Healthcare Awards ceremony. Jamie Cooper received the Dean’s award for research excellence while Helen Walls was awarded a prize for the best student presentation at the Australasian Epidemiology Association conference in Dunedin, New Zealand. In the annual promotion round, Karin Leder, Wendy Brown and Leanna Darvall were promoted to Associate Professor while Anita Wluka and Helena Teede were each awarded NHMRC Career Development Awards. In sport, Hendrik Zimmet (with colleague Larry Cohen) was Australia’s first medal winner at the Maccabah games in Israel winning a bronze medal. Hendrik was also seventh in his category in the triathlon event.

I would also like to make special mention of our doctoral program that has continued to flourish under the expert direction of Elizabeth Douglas and Rory Wolfe. During the year, 65 students were enrolled and nine graduated.

During the year we said farewell to several staff and students who moved to new careers. In particular, I would like to recognise the excellent work of Max de Courten who left at the end of the year to take up a Chair in Public Health in Copenhagen.

We also welcomed several new staff and adjunct appointees. Associate Professor Allen Cheng who joined the Infectious Disease Epidemiology Unit bringing his skills in mathematical modelling to the School. Megan Brooks took up the role of research governance coordinator taking over from Brad Crammond.

Finally, I would also like to thank many others for their contributions to our activities. I am particularly grateful to Julia Veitch who managed our communications with great skill. Thanks also to our wonderful administrative team who managed the many activities needed to keep the School afloat during the year. I would also like to express great thanks to the senior staff of the School whose talent and dedication have yet again helped us through every challenge.

John McNeil

John McNeil
ASPREE grows into a major international trial

The ASPREE (ASPirin in Reducing Events in the Elderly) project has increased its total funding from $3.5M (initial NHMRC grant) to more than $60 million. This extra money comes from both local and international sources. The project has now grown to become a large-scale international study. It provides a platform of opportunity for many secondary studies that will address important questions related to diseases of the elderly and healthy ageing.

In September 2009, the funding of the ASPREE study by the National Institute on Aging (NIA; one of the National Institutes of Health (NIH), US) was announced. The funding was for the joint Principal Investigators, Professor John McNeil (SPHPM, Monash University) and Professor Richard Grimm (Berman Center for Outcomes Research in Minneapolis, US) for US$50 million for seven years. Bayer Schering Pharma will also provide around $3 million of in-kind support for aspirin and the matching placebo.

The primary aim of ASPREE is to determine whether regular low dose aspirin prolongs disability free survival in an ageing population. The study is a placebo-controlled, double-blind clinical trial. ASPREE will look at the influence of aspirin on the incidence of cardiovascular disease, dementia and common malignancies. This study will have the potential to inform clinical practice for the majority of those 70 and over who are free of vascular disease, dementia and physical disability.

The ASPREE project’s sub-studies such as the Healthy Ageing Biobank, which is run in collaboration with the CSIRO. Another sub-study is the ENVISion (Elderly: a Neuro-Vascular Imaging Study) neuroimaging project that has attracted NHMRC funding.

This will be the largest Australian clinical trial for primary prevention conducted entirely in General Practice. Evidence of the importance of the project is the high calibre of the current sponsoring organisations – NHMRC, CSIRO and NIH.

How will ASPREE work?

Important to the success of this funding award was a series of modifications required to the original ASPREE protocol, primarily to incorporate the US collaborating sites. As part of the requirement for NIH funding support, a Data and Safety Monitoring Board (DSMB) of US experts in a range of fields appropriate to oversee the study was constituted by the NIA. At the end of 2009, the DSMB confirmed the new joint Australia-US ASPREE protocol.

ASPREE will recruit a total of 19,000 healthy participants aged 70 years of age and above (12,500 from Australia and 6,500 from the US). Over the next two and a half years, current metropolitan and regional sites in Victoria, Tasmania and the ACT will actively recruit ASPREE participants as well as General Practitioners (GPs) as co-investigators. Active recruitment to ASPREE had to be curtailed during 2009 pending the outcome of the NIH grant award and the DSMB approval of the protocol.
ASPREE: an important opportunity for regional Victoria

Although ASPREE is a major international trial, it will serve as a spearhead to build clinical trial capacity in regional Victoria, supported by funding from the Victorian Cancer Agency (VCA). It will encourage participation by healthy elderly Victorians living in regional and rural Victoria in a major publicly-funded clinical research program. An earlier 12 month grant from the VCA supported the establishment of a Clinical Trials Unit (CTU) in collaboration with the University of Melbourne Rural Clinical School in Shepparton. This CTU is now recruiting for ASPREE and Biobank.

Further CTUs are planned in collaboration with Monash Clinical Schools in Bendigo and Gippsland (Traralgon), with additional facilities to be developed in Ballarat and Warrnambool. These key regional study centres will be the focal point for patient recruitment, community engagement, data collection and laboratory testing. The research personnel trained as part of this program and the infrastructure built for clinical trials will underpin future research outside the metropolitan area. This will provide a Victoria-wide resource that will allow regional Victorians to participate in clinical research. An important feature of the ASPREE project in regional Victoria is the Seven-year duration of the funding as this will allow regional trial capacity to be developed in a sustainable fashion.

Sub-studies of ASPREE give additional benefits to ageing research

A major benefit of ASPREE is that studies into other aspects of ageing research can use data and specimens collected during ASPREE.

A collaborative group will establish the ASPREE Healthy Ageing Biobank. This will focus on biomarkers for cancer, neurodegenerative diseases, cardiovascular disease and stroke outcomes. The CSIRO Preventative Health Flagship Cluster collaboration has been set up with Monash University (as the lead university), Australian National University (ANU), Menzies Institute (Tasmania) and the University of Melbourne. The Biobank will collect baseline blood and urine specimens from 10,000 ASPREE participants. Stored samples will then be available for future investigation into novel predictors and diagnostics of diseases in the elderly. Factors that predispose to healthy ageing may also be discovered.

A second substudy of ASPREE is ENVIS-ion. The neuroimaging sub-study of ASPREE will investigate the effects of aspirin treatment on retinal and cerebral vascular structure and cognitive function (NHMRC support of $1.27 million). ENVIS-ion will study 600 ASPREE participants in a continuing collaboration between Monash University and the ANU. New recruitment for ENVIS-ion was also placed on hold in 2009, pending the NIH and DSMB outcomes. The ENVIS-ion project in Canberra and Melbourne will be re-activated in 2010, with full recruitment expected within a year.
Victorian Bushfires Report

The ability of staff at the School to respond to the Victorian Bushfires reflects our broad research areas across public health and preventative medicine. We were able to contribute to a number of phases of the response to the disaster, from the time immediately after the fires, to research over the ensuing months that recommend ways to strengthen Victoria's fire medical response systems.

Immediate response

- The Department of Forensic Medicine participated in the Disaster Victim Identification (DVI) process. The department has an international reputation for its expertise in this area.
- Impact on individuals and the community.
- The Infectious Disease Epidemiology Unit incorporates the School's research activities in water quality. The unit provided expert advice on the effects of the bushfires on Victorian water catchment and the likely effects of 'run-off' of fire retardants on human health. *(Health Stream*, March 2009, Issue 53).
- The Monash Centre for Occupational and Environmental Health (MonCOEH) examined the influence of air pollution resulting from the bushfires and the incidence of cardiac arrest. Furthermore, they also examined the incidence of cancer among the operational full-time and auxiliary fire fighters.
- The five days preceding the Victorian bushfires were accompanied by a hot heatwave of unprecedented intensity creating a public health hazard, particularly for the elderly. The School's Centre for Research Excellence in Patient Safety (CREPS) completed a study for the Victorian Health department titled ‘Reducing harm to older persons in Victoria from extreme hot weather’.

Lessons learned

- The School's Critical Care Division examined and reported on the response of the Victorian State Trauma System. Recommendations were made about the handling of casualties. *(Cameron P. et al. Black Saturday: the immediate impact of the February 2009 bushfires in Victoria, Australia. Medical Journal of Australia, 2009; 191(1), 11-16).*

Swine Flu Pandemic Report

Australia was just entering winter when the WHO declared the influenza A (H1N1 2009) (also known as “Swine Flu”) a pandemic. Staff from SPHPM contributed to the Australian and Victorian response to the crisis as well as providing expert advice to panels and committees analysing aspects of the crisis.

- Associate Professor Allen Cheng was involved in establishing a number of clinical studies early in the course of the pandemic, including the establishment of hospital-based surveillance and early reviews of the clinical features of the infection.
- Staff of the Infectious Diseases Unit contributed to the development of national clinical and infection control guidelines. A national hospital-based sentinel surveillance program (FluCAN) was established to provide real-time information on hospital admissions due to influenza. A study of quarantine measures in patients presenting to three Melbourne hospitals found that compliance with quarantine measures was good. However, the study also found that the clinical syndrome used to identify patients with influenza was imprecise, leading to many patients being placed in quarantine who were not confirmed to have influenza. Members of the Infectious Diseases Unit were involved in panels for the NHMRC and the Health research Council of New Zealand reviews.
Staff of the Transfusion Outcomes Research Collaborative and the Epidemiological Modelling Unit were involved in a project examining the potential impact of an influenza pandemic on the supply of blood and blood products.

The Australian and New Zealand Intensive Care Research Centre (ANZIC-RC) coordinated a bi-national Influenza A registry, collecting information on every patient in Australia and New Zealand admitted to the intensive care unit with confirmed influenza A (H1N1 2009). This culminated in an article in the prestigious New England Journal of Medicine. The article was a rapid publication to inform the northern hemisphere, prior to their winter, of the impending likely impact on intensive care services. (The ANZIC Influenza Investigators, Critical Care Services and 2009 H1N1 Influenza in Australia and New Zealand, The New England Journal of Medicine, 2009, 361, 1-10).

Dr Robert Hall attended the Influenza Pandemic subcommittee of the Strategic Advisory Group of Experts on Immunization meeting on 7 July 2009 in Geneva. He was the Chair of the Regional Technical Advisory Group for Immunization and Vaccine-Preventable Diseases for the Western Pacific Region of WHO. The recommendations were published in the Weekly Epidemiological Record of 24 July 2009 (Strategic Advisory Group of Experts, WER, 2009, 84: 301-305).

Professor John McNeil was a member of the Therapeutic Good Administration’s pharmacoepidemiology panel that monitored reports of adverse events associated with influenza vaccination.
New Centres and Registries

New Centres

Centre for Public Health and Human Rights

The Michael Kirby Centre for Public Health and Human Rights is an exciting collaboration of interdisciplinary scholars in Monash University’s School of Public Health and Preventive Medicine. The Centre is named for the former Justice of the High Court of Australia, a renowned human rights expert, advocate and defender who will maintain an active involvement in the Centre’s work and future direction. The Centre was created to consolidate existing SPHPM capacities in the study of public health and human rights that have developed over 20 years.

The Centre comprises activists, lawyers, scientists and ethicists who undertake research that critically examines the contribution of human rights and law to the realisation of good health, particularly in vulnerable communities in Australia and in the developing world. The Director is Associate Professor Bebe Loff, a scholar with some 30 years experience working at the intersection of law and health. When the HIV/AIDS epidemic emerged, Bebe played an integral role in the legal and policy response in Australia and internationally. Bebe was a community activist who, along with others including Ms Cheryl Overs (also of the Kirby Centre), established Australia’s first Prostitutes’ Collective. She has since worked with sex workers in many countries.

The Centre aims to conduct research that informs the development of public health policies and programs in which human rights standards and norms are critically considered. The Centre will also undertake teaching programs that facilitate informed inquiry about public health, law and human rights.

The current research, teaching and consultancy projects of the Kirby Centre include:

- investigating the ethical duties of health professionals in the care and treatment of asylum seekers in detention. This work has recently been shortlisted for a 2010 Eureka Prize;
- a collaboration with the Victorian Institute of Forensic Medicine to examine and document the role and contribution of forensic medical and nursing staff to the welfare of survivors of sexual assault;
- developing a reform strategy that addresses the local, national and international regulatory environments which promote obesity;
- investigating the attitudes of the Australian population about the protection of personal privacy when conducting health and medical research;
- examining the obligations of clinical researchers to disclose and manage conflicts of interest, particularly in their dealings with pharmaceutical companies; and
- exploring the testing of women for HIV in antenatal settings in Tamil Nadu, India.

The Kirby Centre is a core partner of the Paulo Longo Research Initiative (PLRI). The PLRI aims to develop and consolidate ethical, interdisciplinary scholarship on sex work to encourage policy that helps improve the lives of men, women and transgender people who sell or buy sex. The other core partners are:

- the Institute of Development Studies (IDS), UK;
- the Centre for Advocacy on Stigma and Marginalisation (CASAM), India; and
- the Global Network of Sex Work Projects.

PLRI projects led by the Kirby Centre include:

- the establishment of a legal service for Cambodian sex workers; and
- an investigation of the impact of laws and enforcement policies on sex workers in a number of countries.

The Kirby Centre also performs postgraduate teaching. The Centre coordinates the Monash University Master of International Health and the Master of International Research Bioethics. The latter program is funded by the Fogarty Centre of the US National Institutes of Health to create expertise in research ethics, law and methodology in countries in the Asia-Pacific region in order to promote the ethical conduct of medical research in developing countries.
New Registries

Australian Cardiac Procedures Registry (ACPR)
A cardiac procedures registry is essential to ensure that patients receive the best possible treatment for their cardiac conditions. It helps patients to understand the risks and outcomes associated with different treatments so that they can make informed choices. It also enables clinicians to review their own practice and to make changes where necessary. These types of registries work by collecting clinical healthcare information about different treatments of particular diseases with a view to improving safety and quality.

The Australian Cardiac Procedures Registry (ACPR) was developed through a project funded by the Australian Commission on Safety and Quality in Health Care (ACSQHC). The pilot project ran from November 2008 to November 2009.

The ACPR pilot project has led to a number of outcomes for quality of care and the provision of high-cost, high-risk cardiac services in Australia. A structure was developed for clinical leadership and for stakeholders to meaningfully engage in the process. In addition, a process was established through which standardised data can be collected via a secure web-based system that was developed and is operating according to regulatory standards.

To achieve these results, the ACPR was established on the basis of the successful Australian Society of Cardiothoracic Surgeons (ASCTS) registry and the Melbourne Interventional Group (MIG) registry, both of which had been developed in Victoria in the preceding decade. The ACPR project enabled in-depth examination of the principles and standards associated with quality clinical registries and how they relate to the capture of complex cardiac procedural data. The project identified barriers and challenges to the adoption and implementation of the principles and standards at individual hospitals. It also developed a framework from which the ACPR web-based registry was established for cardiac surgery, percutaneous cardiac intervention and implantable devices. This framework consists of a governance structure that includes leadership from the key clinical and surgical craft groups in Australia (the Cardiac Society of Australia and New Zealand (CSANZ) and ASCTS) as well as key stakeholder funding and consumer representation.

Initially, the ASCTS and MIG datasets were revised to provide the minimal data collection framework. This enabled capture of epidemiologically sound, minimal data sets for the complex area of cardiovascular interventions. The purposes of the data sets are to address the identified key performance indicators and to allow adequate risk adjustment. While the implantable device collection module does not yet include pacemakers, this was identified as a future component for development. In addition, the need to develop and implement percutaneous valve and cardiac defect closure device modules was also identified.
School of Public Health and Preventive Medicine (SPHPM), Monash University

Research

Research income: $23 million

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<th>Year</th>
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<td>NHMRC research funding</td>
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Total number of research projects, scholarships and fellowships funded by grants in 2009.

Continuing: 88
Starting: 57

Publications

<table>
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<th>Peer reviewed articles (includes letters and editorials)</th>
<th>320</th>
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<td>Book chapters</td>
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Education

Student enrolment
Undergraduate: 465 students were taught by SPHPM staff in the Bachelor of Biomedical Science and 3509 in years 1–5 of the Bachelor of Medicine/Bachelor of Surgery (3302 in Australia, 672 in Malaysia)

Honours: 7

Postgraduate certificate, diploma and masters by coursework: 427

Short courses: 637

PhD:
36 new
84 continuing
12 completed and graduated

In the 2009 round of PhD scholarships, 22 students were awarded competitive scholarships.
Disease prevention is a challenging area of medical science. There are many unanswered questions about the right balance between community-based programs and a targeted approach to those at high risk of disease. The cost effectiveness of many proposed interventions is unclear and, in some instances, long-term safety requires further study. Separating unwarranted enthusiasm from science is a major challenge for all researchers involved in this field.

Our division of prevention science brings together units involved in the prevention of cardiovascular disease, cancer, renal disease, diabetes and obesity. The division also includes the Department of Forensic Medicine, a part of the Victorian Institute of Forensic Medicine. Here, a major focus is on analysing deaths reported to the Victorian coroner and using the information to prevent premature death in others. The Department of Health Social Science brings its expertise in community-based health promotion programs to add to the breadth of skill within the division.

Research activities investigate primary, secondary and tertiary prevention strategies. Another major focus is the prevention of disability among those already affected by early disability. Studies that are currently underway include the ASPirin for Reducing Events in the Elderly (ASPREE) trial (see page [insert page number]), a program to evaluate outcomes of bariatric surgery, and epidemiological studies modelling the future impact of obesity and other lifestyle challenges.

Experienced researchers in the division can access the full range of the clinical and public health skills required for active and successful evaluations.

The Department of Forensic Medicine (DFM) is the only university department in Australia to be set up in parallel with a forensic medical service facility. It therefore operates as both a publicly-funded institution and an academic unit. This unique arrangement has arguably contributed more to forensic medicine and the allied forensic sciences than any other facility in this country. Many of our staff are world leaders in their disciplines and this has contributed to an international reputation for excellence.

Since its inception 21 years ago, the Victorian Institute of Forensic Medicine together with the DFM has produced many significant research findings that have contributed to prevention of injury and death and to public health. It also has developed a significant postgraduate teaching output, with postgraduate courses in forensic medicine producing 62 graduates over 10 years. There have been almost 50 Bachelor of Science (honours) and Bachelor of Medical Science graduates, and almost 20 postgraduate degrees by research including PhD, many of whom have remained with us and work at the Institute. There have been over 500 publications in this time covering a variety of themes related to disciplines encompassing forensic medicine.
The recent reorganisation of the executive team of the Institute was designed, in part, to enhance the role of the DFM and increase its profile. This strategy helps align the Institute with changes in the Coroner’s Act that increase the prevention focus of death investigations. Indeed at its inception in 1988, the Government believed that the Institute and its connection with the DFM was an ‘investment in public health’.

The Centre for Obesity Research and Education (CORE)
The Centre for Obesity Research and Education (CORE) aims to better understand obesity, obesity-related diseases and the associated psychosocial conditions. Research focuses on identifying optimal methods for the safe, cost-effective, long-term management of obesity, coupled with developing preventive strategies that can be implemented in the community.

The Centre conducts active programs in clinical, basic science and public health research and engages in many collaborations, nationally and internationally. Through its close association with a major clinical obesity treatment program at the Centre for Bariatric Surgery, CORE has become the foremost research group in the world for studying the health benefits of weight loss. Research has been published extensively in leading journals over the past seven years. To date, the number of publications stands at over 100 papers.

Clinical Epidemiology
Clinical Epidemiology is the application of epidemiological methods to the care of individual patients. The Division was formed in 2009 to bring together the School’s research interests in cardiovascular disease prevention and therapeutics, respiratory and musculoskeletal epidemiology, infectious diseases, women’s health and research synthesis and translation. The component units and centres are located at the Alfred, Cabrini and Monash Medical Centre. Most of the unit heads have clinical appointments at one of these hospitals.

Jean Hailes Clinical Research Unit
The Jean Hailes Clinical Research Unit is affiliated with both Monash University and Southern Health and sits within the SPHPM. The integrated research team focuses on the continuum of adverse lifestyle, obesity, insulin resistance, insulin-resistant syndromes including metabolic syndrome and polycystic ovary syndrome (PCOS), gestational diabetes, pre-diabetes, diabetes and cardiovascular disease. Progression through this continuum is not inevitable. The research team’s focus is on both mechanisms of prevention and the translation of evidence to optimise prevention. The Unit also conducts an extensive menopause research program. The Jean Hailes Clinical Research Unit maintains an independent approach to research and undertakes single centre studies as well as collaborating locally, nationally and internationally in projects with other research organisations.

As part of The Jean Hailes Foundation for Women’s Health, the research team works closely with the Education Unit to translate the latest research findings into practical health and lifestyle approaches for women and their health professionals. The team also has skills in evidence synthesis and appraisal. Our research interests focus on areas that impact the quality of life and longevity of women. The strength of our research program lies in our ability to produce solid results and focus on community health outcomes, in an environment that fosters quality research.
The Australasian Cochrane Centre
The Cochrane Collaboration is an international, independent organisation of over 28,000 contributors from more than 100 countries. It is dedicated to making up-to-date information about the effects of health care readily available worldwide. Our contributors work together to produce systematic reviews of healthcare interventions, known as Cochrane reviews, which are published in The Cochrane Library.

The Australasian Cochrane Centre co-ordinates Cochrane activities in Australia and the wider region. This is achieved mainly by providing training and support to authors of Cochrane reviews, working with policy makers, advocating on behalf of The Cochrane Collaboration in our region, and promoting the use and uptake of The Cochrane Library. The Centre works in partnership with its branches in New Zealand, Korea, Singapore and Thailand.

There are over 1900 authors of Cochrane reviews in Australia, mostly comprising clinicians, researchers and consumers who contribute on a voluntary basis. The Centre conducts regular workshops for new authors on how to prepare Cochrane reviews, as well as more intensive programs for those completing a review. Our role extends to co-ordinating the Collaboration’s overall training program.

The Department of Health and Ageing funds the Centre and the national subscription to The Cochrane Library. Our work with policy makers is particularly focused on ensuring that evidence in the form of systematic reviews underpins policy and is made available in formats that policy makers can use. The Centre is aligned with core Cochrane activities and has an extensive program of research that explores effective ways to inform healthcare decisions through the uptake of evidence. This includes projects investigating the synthesis, interpretation, dissemination and implementation of research evidence for clinical practice and policy.

Cardiovascular Prevention Research Unit
Major achievements for 2009 involved large-scale clinical trials and collaborative public health research. The Unit also provided leadership for the LIPID study (NHMRC grant). This study has completed an average of 16 years of follow-up of 9014 coronary heart disease patients from 87 hospitals in Australia and New Zealand. Analyses of biomarkers will predict recurrent cardiovascular events and possible new therapeutic targets. The Unit is also working with spatial geographers (ARC grant) to map the availability of necessary medical services for those in Australia’s 20,000 population centres who are at risk of an acute cardiac event. These findings will be used to develop new strategies to overcome access barriers.

Centre of Cardiovascular Research and Education in Therapeutics (CCRET)
The mission of Centre of Cardiovascular Research and Education in Therapeutics (CCRET) is to improve clinical outcomes for individuals and communities. This is achieved by analysing evidence based on high-quality clinical research. In 2009, CCRET led a pivotal and highly successful study into the treatment of hypertension that cannot be properly controlled with drug treatment. The study evaluated the novel strategy of renal denervation to help patients with this condition. The exciting outcomes of this study were presented at a late-breaking clinical trials session of the American College of Cardiology meeting in March 2009. The Chronic Heart Failure Assisted by Telephone (CHAT) study also received a late-breaking trials session at the European Heart Failure Association. This was a randomised control trial of telephone support for chronic heart failure patients at the risk of rehospitalisation. The SCReening Evaluation of the Evolution of New Heart Failure (SCREEN-HF) study recruited over 4000 patients in the initial cohort study leading to further funding for a longitudinal and interventional study.
Respiratory Epidemiology Group (REG)

A Respiratory Epidemiology Group (REG) trial was designed to look at ways of improving management and intervention by GPs of patients with chronic respiratory diseases, like asthma (SPIRO-GP). SPIRO-GP was a randomised controlled trial of spirometry in general practice that was completed in 2009. The Burden of Obstructive Lung Disease (BOLD) study was undertaken in collaboration with the Woolcock Institute in Sydney and other centres around Australia (NHMRC funding). We are also collaborating with the University of Melbourne on two large NHMRC supported cohort studies: the Tasmanian Longitudinal Health Study (TAHS) and the Melbourne Atopic Cohort Study (MACS).

Monash Department of Clinical Epidemiology (Cabrini Hospital)

In 2009, a study from the Department was published in the prestigious New England Journal of Medicine. The results of a 6-month randomised placebo-controlled trial showed that vertebroplasty (injection of bone cement into painful acute osteoporotic vertebral fractures) was not an effective treatment. The Department also manages the Australian Rheumatology Association Database (ARAD) that collects long-term data on the effectiveness and safety of biologic therapy for inflammatory arthritis and is an editorial base of the Cochrane Musculoskeletal Group (CMSG). We collaborate with several Australian researchers in the Global Burden of Disease 2005 project to determine the burden of arthritis and back pain and also collaborate with Deakin University researchers to develop new ways to measure health literacy and the overall burden of back pain. Our work on developing and validating the Evaluative Linguistic Framework (ELF) won the Arthritis Victoria inaugural Helen Moran Award. The ELF is a tool to improve the quality of written information about medication that is given to the patient.

The achievements of the Infectious Disease Epidemiology Unit, Jean Hailes Clinical Research Unit and Australasian Cochrane Centre can be found elsewhere in this report.

Health Services and Global Health Research

The Division is concerned with a diverse range of issues that influence the effective, efficient and ethical delivery of health services, locally and across the globe. There are a number of centres and units associated with this division.

- The new Michael Kirby Centre for Public Health and Human Rights. The Centre comprises lawyers, ethicists, medical practitioners, scientists and activists who undertake research that critically examines the contribution of human rights and law to the realisation of good health, particularly among vulnerable communities in Australia and around the world.

- The International Public Health Unit (IPHU). The Unit comprises researchers and other staff from Monash University campuses in Australia, Malaysia and South Africa. The main aim of IPHU is to develop research, education and capacity-building programs that improve health and well-being related to the origins, prevention and management of chronic non-communicable diseases.

- The NHMRC Centre for Research Excellence in Patient Safety (CRE-PS). The Centre designs, conducts and promotes high quality multicentre research to improve quality, safety, efficiency and effectiveness of healthcare for Australians.

- The Health Services Management and Research Unit. The main aim of this unit is to contribute to the effectiveness of clinicians by assisting them to develop competencies in management and health policy. It is a research partner with CRE-PS and conducts research in health policy and financing.

- From late 2010, the Division will also host the Alan and Elizabeth Finkel Chair in Global Health.
Department of Health Social Science

Established in 2006, Department of Health Social Science (DHSS) is committed to improving and understanding health and well-being from a social perspective. DHSS offers comprehensive programs in health promotion and prevention, population health, and policy. DHSS is based at the Caulfield campus and is home to the Bachelor of Health Science, Bachelor of Health Science/Bachelor of Social Work, the Honours year of the Bachelor of Health Science, postgraduate coursework programs and PhD programs. The Department is a WHO Health Promoting Health Service.

Our mission is to conduct research and education that builds capacity to promote health and foster effective strategies to improve the health of communities and individuals. Multi-disciplinary approaches to research and teaching are adopted along with a commitment to work that strengthens community-based health services, and the development and adoption of policy that actively promotes health and well-being. DHSS is also committed to addressing health and social inequities. We value partnerships between communities and higher educational institutions and participate in various University-community partnerships through joint appointments and research partnerships. Our students have practical opportunities to apply their knowledge to health problems in Victoria and beyond.

Our vision is for all our graduates to have a strong sense of civic engagement and a commitment to public health, healthy public policy and the health and well-being of all people and their communities, whether in Australia or in countries overseas.

Occupational and Environmental Health

The occupational and environmental division is made up of three main units: The Monash Centre for Occupational and Environmental Health (MonCOEH), The Australian Centre for Human Health Risk Assessment (ACHHRA) and Infectious Disease Epidemiology Unit.

A diverse research program includes several occupational cohort studies of chronic diseases in petroleum workers, aluminium industry workers, orchardists, lead workers, asbestos cement workers, firefighters, nurses and military veterans.

The main research activities involve occupational disease surveillance, respiratory and cardiac effects of small particles and other air pollutants, occupational health and safety aspects of occupational light vehicle use, the health effects of mobile phone use, workplace health promotion, nanotechnology, methods of exposure assessment, water quality and public health, environmental impacts on infections, travellers’ health, health issues in immigrants/refugees, and infectious disease transmission modelling.

The division has studies of infectious diseases such as influenza and infections associated with treatment in a hospital or medical unit. These represent important problems in clinical practice.

In 2009, we assisted government agencies to set or review environmental health standards. We have also assisted with peer-review of reports developed by regulatory agencies. There are a number of project highlights.

- Revision of the seminal 2002 enHealth guidance document on environmental health risk assessment.
- Assisting the Queensland Government with the health risk assessment (HRA) component of the Clean-Air-for-Gladstone project and providing expertise on the Expert Panel advising on the South East Queensland Recycled Water Project.
- Preparation of a literature summary on the toxicology of six nanomaterials of interest to the National Industrial Chemicals Notification and Assessment Scheme (NICNAS), the Australian regulator of industrial chemicals.
- Assisting the Cooperative Research Centre for Contamination Assessment and Remediation of the Environment (CRC-CARE) in its Australian Remediation Industry Cluster program (ARIC) and with a project developing Health Screening Levels (HSLs) for sites contaminated with petroleum hydrocarbons.
- Participation in various expert committees of Australian government agencies and in a community consultative committee for cleaning up the Botany industrial site in Sydney.
- The division has many national and international research collaborators and is a research hub for the Institute for Safety, Compensation and Recovery Research. It also has an active PhD program, runs regular short courses and offers several postgraduate courses in occupational and environmental health. The division has strong collaborative links in the Asia-Pacific region including Thailand, Malaysia and Sri Lanka.
Critical Care Research

The Critical Care Research Division investigates improvements to patient care from the pre-hospital phase through the emergency department and operating theatre to the intensive care unit (ICU). Lead Investigators manage large national and international trials to improve outcomes for critically ill patients with conditions as diverse as cardiac arrest, head injury and sepsis. We also monitor the overall improvements in the management of critically ill patients through state and national databases. This has allowed benchmarking of clinical outcomes at a national and international level.

The research group has had a particular emphasis on building capacity in critical care research through the training of clinical leaders in research. Doctoral and postdoctoral training schemes are strongly supported within the School.

Our resources and linkages allow access to a variety of specialised patient groups including those in the pre-hospital phase, emergency departments, ICUs and anaesthesia. We are home to the Australian and New Zealand Intensive Care Society Clinical Trial Centre (ANZICS-CTG, linking ICU’s across Australia) the Anaesthesia Trials Network and the Monash Centre for Therapeutics Research and Education. Our resources include one of Australia’s most advanced data management units capable of handling tens of thousands of clinical records. The centre has extensive capacity in web-based data entry, real-time feedback of results, quality control procedures and high-level data security.

Health Research Methodology

The Division of Health Research Methodology consists of Units providing the methodological foundation underpinning most of the research conducted within the SPHPM. It brings together the areas of Biostatistics, Epidemiological Modelling, Clinical Informatics and Data Management, and Research Governance. Activities incorporate methodological and technological development and implementation to enable high quality research to be conducted within the School. It also provides a rigorous framework for appropriate and ethical conduct of research.

Staff of the Biostatistics Unit are involved in the development of new statistical analytical methods to solve practical problems arising in clinical and epidemiological research. They also extensively collaborate on research projects inside and outside the School and provide a biostatistical consulting service to the University and external clients. The Unit runs a range of teaching and short course activities, varying from basic concepts and methods for clinical researchers to mathematically-based advanced biostatistical theory and methods.

Epidemiological modelling involves the analysis of existing trends and data patterns of burdens of disease. This enables the prediction of the likely needs for health care resources and the effectiveness of different approaches to disease prevention. Research in these areas provides a foundation for developing costed options for policy makers and for decision-making frameworks for general practitioners and their patients about lifestyle changes that improve health outcomes.

The Clinical Informatics and Data Management Unit (CIDMU) has extensive capacity in data management for the conduct of large-scale national and international multi-centre clinical trials, registries, occupational cohorts and health surveys. Staff in the unit possess expertise in all aspects of data collection and data management, including forms design, web-based data capture, entry and randomisation services, data validation and quality control. Consulting services for data management are provided to external clients. CIDMU staff also train SPHPM researchers in the principles of database design and management.

Research governance is the framework by which institutions support, monitor and attest to the safety, ethical acceptability and quality of the research they undertake. The Research Governance Unit has developed and implemented a framework which is underpinned by four components: a risk management plan; publication of guidelines for responsible conduct of research; training and education of staff and students; and formation of a School Research Governance Committee to oversee these aspects.
Executive Board

Professor John McNeil

John McNeil is the head of the SPHPM based at the Alfred Hospital. His research background is in epidemiology and clinical pharmacology. He came to his present position at Monash in 1986.

He is currently a member of the Boards of the Colonial Foundation, the International Society of Cardiovascular Pharmacotherapy and Austin Health, Melbourne. He is a previous member of the Boards of Alfred Health, the Metropolitan Ambulance Service, Water Quality Research Australia and the Victorian Public Health Research and Education Foundation. He has been a member of ministerial committees reporting on renal failure services, organ transplantation and medical staff salaries. He also serves on scientific committees for the Red Cross Blood Transfusion Service, the National Blood Authority, the Therapeutics Goods Administration and the Australian Commission for Safety and Quality in Healthcare. He has a long-standing interest in clinical registries and their use in benchmarking outcomes of treatment.

He has served on the senior medical staff of the Austin and Alfred Hospitals and the Monash Medical Centre and was awarded a Member of the Order of Australia (AM) for services to public health.

Professor Michael Abramson

Professor Michael Abramson is the Deputy Head of SPHPM and the Divisional Head of Clinical Epidemiology. He is also a Visiting Medical Officer in Allergy, Immunology and Respiratory Medicine at the Alfred Hospital.

His research interests include both environmental and genetic risk factors for chronic lung diseases and the health effects of mobile telephones.

He chairs the COPD-X Guidelines Committee of the Australian Lung Foundation. He has been a member of grant review panels for the National Health and Medical Research Council. He received the TSANZ/ALF Prize for the best presentation on primary care-related issues in 2008.
Professor Just Stoelwinder

Professor Just Stoelwinder is Chair of Health Services Management and the Head of the Division of Health Services and Global Research. He is also a Director of Medibank Private Limited and its subsidiary, Australian Health Management Group.

His past appointments include Professor and Head of the Health Service Management Development Unit at Flinders University and Board Member of the Private Health Insurance Administration Council. For over 16 years, until the end of 1998, he was the foundation CEO of the Southern Health Care Network, and its antecedent teaching hospitals, the Monash Medical Centre and CEO of the Queen Victorian Medical Centre.

Just has also held professorial appointments in the Business School and Medical Faculty at Monash University and has been a Visiting Fellow at a number of international organisations including the King’s Fund, London, UK, Kaiser Permanente Medical Group, Oakland, Boston University and the Wharton School, University of Pennsylvania, USA. He was formerly a specialist physician and Fellow of the Australasian College of Physicians.

Just has published extensively on health policy and financing, organisational change, management development, managing health professionals and management accounting in journals, monographs and textbooks.

Professor Peter Cameron

Professor Peter Cameron is Head of the Critical Care Research Division within the School. Peter is also Academic Director of the Emergency and Trauma Centre at The Alfred Hospital, Head of the Victorian State Trauma Registry and Associate Director of the National Trauma Research Institute. Peter also chairs the Victorian Orthopaedic State Registry and the Bi-national Burns Registry Steering Committees. In 2010, Peter was appointed as Head of the International Federation of Emergency Medicine. His main research interests include trauma epidemiology, injury prevention and management, pre-hospital care and health services and systems research.

Past appointments include Professor of Emergency Medicine, Chinese University of Hong Kong; Chief of Service, Prince of Wales Hospital Hong Kong; Professor/Director of Emergency Medicine, Royal Melbourne Hospital, and Director of Emergency Medicine, Geelong Hospital. Peter is also a Past President of the Australasian College of Emergency Medicine (ACEM), co-editor of the Textbook of Adult Emergency Medicine and the Textbook of Paediatric Emergency Medicine and a senior examiner for the Australasian College for Emergency Medicine (ACEM). Peter also has over 250 peer-reviewed publications.

Professor Malcolm Sim

Professor Malcolm Sim’s main research interests include the human health effects of occupational and environmental exposures, occupational disease surveillance, veterans’ health, cohort studies of working populations and exposure assessment. Malcolm is the Principal Investigator for an NHMRC Public Health Capacity Building Grant concerned with building capacity in workplace public health. He is a co-investigator on several national and international collaborative studies and is a co-leader of the Occupational and Environmental Health program of the Monash Initiative for Global Health Improvement (MIGHI). His research group was awarded the Victorian Public Health Research Excellence Award in 2005.
**Professor Sally Green**

Professor Green is Co-Director of the Australasian Cochrane Centre and a Professor in the Faculty of Medicine, Nursing and Health Sciences at Monash University.

She holds a PhD in Epidemiology and Preventive Medicine from Monash University in addition to her clinical qualifications in Physiotherapy. Professor Green is an active Cochrane reviewer and is Co-editor of the Cochrane Handbook of Systematic Reviews of Intervention. She has several competitively-funded research projects that aim to improve health outcomes by investigating the most effective and efficient pathway of knowledge from research result to sustained change in clinical practice and policy.

Professor Green is the epidemiology expert on the National Medicines Policy Committee at the Department of Health and Ageing in Canberra.

**Professor Andrew Forbes**

Professor Andrew Forbes is the head of the Division of Health Research Methodology in SPHPM as well as the head of the Biostatistics Unit within the Division. He joined Monash University in 1992 following completion of his PhD in Statistics from Cornell University, USA.

His research interests are in the areas of causal modelling in observational studies, latent variable modelling, methods for evaluating non-randomised population level interventions, and general statistical methodology for clinical and public health research.

He is a Chief Investigator on a number of NHMRC-funded methodological and epidemiological research projects. On two occasions he has been a member of the research team awarded the Victorian Public Health Award for Excellence in research. He is actively involved in teaching biostatistics at basic to advanced levels for both undergraduate and postgraduate students and is engaged in statistical consultancy via the Biostatistical Consulting Centre in DEPM. He serves as the biostatistician on a number of Data and Safety Monitoring Boards for clinical trials in a range of clinical areas including anaesthesia, emergency medicine and renal therapy.

**Professor Paul O’Brien**

Professor Paul O’Brien has been involved in clinical and basic research for more than 30 years and has published more than 200 peer-reviewed papers. His studies have almost all been in various aspects of gastrointestinal function and disease.

He is the founder and Director of the Centre for Obesity Research and Education (CORE) and is also an Emeritus Professor of Surgery. He is the head of the Centre for Bariatric Surgery, Melbourne and the National Medical Director of the American Institute of Gastric Banding in Dallas, Texas.

He began studying obesity and its treatment in the 1980’s and was part of one of the leading randomised controlled trials that was performed during the era of gastric stapling procedures. With the advent of laparoscopic obesity surgery, he introduced the laparoscopic adjustable gastric banding procedure to Australia and has been at the forefront of the clinical application of this approach. His research derived from this clinical activity has permitted study of the technique and its outcomes but more particularly, the effects of obesity on health and the effects of weight loss on the serious co-morbidities of obesity.

**Professor Helen Keleher**

Professor Helen Keleher is Head of the Department of Health Science, School of Primary Health Care, Monash University. She was appointed to the position of Professor and Head of Health Science at the Peninsula campus in early 2006.

Helen’s current research program is in health promotion, mental health and well-being, health inequalities, chronic illness and pathways to them via the social determinants of health, particularly gender and social inclusion.

Helen’s research has resulted in studies on mental health promotion, primary health care, and building capacity for health promotion in the workforce. She has co-authored evidence reviews on health promotion in cardiovascular disease, self-management in diabetes and mental health promotion. Her teaching areas include health promotion, health systems and policy, and community capacity building.

Currently, Helen holds an appointment to the Women and Gender Equity Knowledge Network of the World Health Organisation’s Commission on the Social Determinants of Health. She is the immediate past National Convenor of the Australian Women’s Health Network and was convenor of the 5th Australian Women’s Health Conference in 2005. She is a past Vice-President (Policy) of the Public Health Association of Australia, and is a long-standing member of the Australian Health Promotion Association, the International Union of Health Promotion and Education, and the International Society for Equity in Health. Helen is co-editor of Understanding Health: A Determinants Approach, and published by Oxford University Press.
Professor Helena Teede
Professor Teede holds the Monash Chair of Women’s health in her role as the Director of Research at The Jean Hailes Foundation for Women’s Health and is Head of Diabetes Southern Health. The Jean Hailes Foundation Research Unit aims to address key women’s health gaps, across biological, psychological and social influences, preventing and reducing the impact of illness and optimising health outcomes for Australian women. Her specific focus is on lifestyle/obesity-related diseases and her research links directly with the education/translation and clinical activities of the Jean Hailes Foundation.

She sits on the International Polycystic Ovary Syndrome (PCOS) committee, is a member of the National Endocrine Society of Australia council and is on the Board of Diabetes Australia-Victoria. She sits on both state and federal women’s health advisory round tables/policy committees and on the NHMRC principal health care committee, as well as three NHMRC subcommittees.

She recently received an NHMRC research excellence award and the Victorian Health Minister’s award for the most outstanding individual contribution to health care in Victoria, 2009 (one annually). This award was primarily for leadership in research/evidence translation into practice. Professor Teede also holds a Premier’s Commendation for Medical Research.

Professor Olaf Drummer
Professor Olaf Drummer is Head of the Department of Forensic Medicine, Monash University. He also occupies the position of Head of Forensic Scientific Services at the Victorian Institute of Forensic Medicine. His research interests focus on drug-associated harm and prevention opportunities. He is an editor for Forensic Science International and is President of The International Association of Forensic Toxicologists (TIAFT) and the Forensic and Clinical Toxicology Association (FACTA) of Australasia. He is also an Honorary Fellow of the Royal College of Pathologists of Australasia (RCPA).

Malcolm is the Deputy Editor of Occupational and Environmental Medicine, one of the specialty journals of the BMJ (British Medical Journal) group. He is also an Associate Editor for the Asia Pacific Journal of Public Health. He is also an elected member of the Management Group of the Scientific Committee for Epidemiology in Occupational Health of the International Commission on Occupational Health (ICOH) and was chair of the organising committee for the International Symposium on Epidemiology in Occupational Health (EPICOH 2004) which was held in Melbourne, Australia, in October 2004. Malcolm is the course coordinator for the Masters degree in Occupational and Environmental Health at Monash and has been very active in the Australasian Faculty of Occupational and Environmental Medicine of the Royal Australasian College of Physicians, for which he was awarded a College Medal for outstanding service in 2003. He is also an external examiner at the University of Malaya in Kuala Lumpur, Malaysia and is involved in collaborative projects in workplace health surveillance with Mahidol University in Bangkok, Thailand.

Associate Professor Wendy Brown
Associate Professor Wendy Brown is Deputy Director of CORE. She holds a clinical appointment as a Visiting Medical Officer in Upper Gastrointestinal and General Surgery at the Alfred Hospital and is an Associate Professor in the Monash University Department of Surgery.

She has played an active role locally within both the hospital and university communities as a member of many Alfred Hospital and Monash University strategic committees. In addition, she has served the broader medical community as an examiner and assessor of the Australian Medical Council, serving on the Royal Australasian College of Surgeons (RACS) court of examiners as well as on the Board in Physiology, co-convening the RACS bariatric section of the Annual Scientific Congress in Hong Kong (May 2008). She was a member of the Victorian State Ministerial Cancer Taskforce (2003-2004) and the Bariatric Working Party (2008). In 2006, she was awarded the American College of Surgeons International Guest Scholarship and in 2008 she was made a fellow of the American College of Surgeons.

Along with an active clinical practice in Upper Gastrointestinal and Bariatric Surgery, Associate Professor Brown has been establishing a research practice focusing primarily on the oesophago-gastric junction and obesity.
Research Governance

What is research governance?

“Research governance is the framework by which institutions support, monitor and attest to the safety, ethical acceptability and quality of the research they undertake.”

“The purpose of research governance is to ensure research integrity through accountability, transparency and responsibility. Good governance also seeks to ensure that research is carried out with the highest scientific and ethical standards, appropriate use of finances, and robust monitoring, review and evaluation processes.”

Dr Megan Brooks took over from Mr Brad Crammond in July 2009 as Research Governance Coordinator. The Coordinator and the Research Governance Committee provide researchers with resources, advice and assistance to ensure that research at the School continues to meet high standards of research conduct.

Specific activities undertaken in 2009 included educating researchers about the value of collaborative agreements, investigating intellectual property issues that can arise for PhD students and revising the content of the departmental Guide to Good Research Practice. The revised Guide includes reference to the Australian Code for Responsible Conduct of Research and the updated National Statement for the Ethical Conduct of Human Research.

Research Governance is comprised of four elements at SPHPM:

• Research Governance Coordinator and Committee;
• Audits of research projects by the Research Governance Officer and self-audits by researchers;
• Induction of all new students; and
• Education through Good Research Practice short courses.

Members of the Research Governance Committee in 2009 were:
Dr Megan Brooks, Mr Brad Crammond, Dr Elizabeth Douglas, Professor Andrew Forbes, Associate Professor Damien Jolley, Professor John McNeil and Ms Marina Skiba (Chair).

Awards, Prizes and Fellowships

Dr Deborah Zion, of the Human Rights and Bioethics Unit, DEPM, was invited to serve on the editorial board of the Cambridge Dictionary of Bioethics (CDB). The CDB is, in its editors’ words, “comprehensive, international, concise and authoritative.”

Professor Russell Gruen has been awarded the 2010 James IV Association of Surgeons Travelling Fellowship, worth US$20,000, which will be devoted to Trauma Quality Improvement in North American centres.

Dr Amanda Zatta received notification that her abstract was accepted for a poster presentation at the American Heart Association Resuscitation Meeting. The Resuscitation Science Symposium precedes the Scientific Sessions. The abstract will also be published in the journal, Circulation.

Professors Malcolm Sim and Brian Priestly are members of an Expert Panel on Aircraft Air Quality (EPAAQ), established by the Civil Aviation Safety Authority (CASA) to review issues relating to cabin air quality.

Professor Helena Teede, Head of the Diabetes Unit – Southern Health and Director of Research – The Jean Hailes Foundation (MIHSR), has been appointed to the NHMRC’s Health Care Committee (HCC). The function of the HCC is to provide the NHMRC with advice on clinical matters in health. Helena was also awarded the Minister’s Award for Outstanding Individual Achievement at the 2009 Victorian Public Healthcare Awards on September 10 2009.

Dr Lisa Moran, The Jean Hailes Foundation, was awarded the Australian and New Zealand Obesity Society Young Investigator Award.

Professor Olaf Drummer was appointed president of The International Association of Forensic Toxicologists (TIAFT). He also received an Honorary Fellowship of the Royal College of Pathologists of Australasia at its annual meeting in March 2009 in Sydney.

Professor Jamie Cooper received a Dean’s award for excellence in research (Distinguished career award).

Dr Anitaa Wluka was awarded an NHMRC career development award (2009-2012).

Jeph Tobing was awarded the best oral presentation from the Indonesian B Med Science Committee.
Dr Bronwyn Fredericks has been awarded a 2009 Endeavour Research Fellowship from the Australian Government. The Award will allow Dr Fredericks to spend six months in New Zealand exploring approaches and management strategies for Maori chronic disease prevention. She will also study Maori advancement in health research and education.

Dr Jodie Leditschke received an Australian Federal Police Commissioner’s Group Citation for Excellence in Overseas Service for duties following the bombing of the Australian Embassy in Jakarta, 2004.

Dr Alistair Nichol, Senior Lecturer, Intensive Care Medicine (The Australian and New Zealand Intensive Care Research Centre, ANZIC-RC), was a 2009 Victorian Neurotrauma Initiative (VNI) Fellowship recipient. He will conduct a clinical trial of early hypothermia, or lowered temperature, after traumatic brain injury to minimise further brain damage.

Professor Brian Priestly, DEPM, was appointed as a member of the National Industrial Chemicals Notification and Assessment Scheme (NICNAS) Human Health Expert Working Group. This is an advisory committee that advises NICNAS on toxicological issues related to its chemicals regulatory activities. Professor Priestly reviewed recent literature on the subject of nanotoxicology under a contract with NICNAS. A report outlining his literature review was submitted to NICNAS on 30 October 2009. This work complements his activities as a member of the NICNAS Nanotechnology Advisory Group.

Dr Denise O’Connor was awarded an NHMRC Public Health Fellowship (four years) to support the development and testing of methods to increase the uptake of research into practice.

Dr Wendy Brown, promoted to Associate Professor.

Dr Karin Leder, promoted to Associate Professor.

Professor Helen Keleher made major contributions to the Public Health Association Victorian branch.

Ms Penny Robinson made major contributions to the Public Health Association Victorian branch.
Professor Lawrence (Lawrie) Beilin accepted an Adjunct appointment as a Professor, at the Department of Epidemiology and Preventative Medicine (DEPM) and the Department of Pharmacology, Faculty of Medicine, Nursing and Health Sciences, effective 1 June 2009 to 31 December 2012.

Mr Jason Wasiak and Ms Heather Cleland were awarded the prize for Best Medical and Scientific Paper at the 2009 Australian and New Zealand Burns Association (ANZBA) Conference in Wellington, New Zealand. The paper reported a randomised, placebo-controlled, double blind, crossover design trial into the use of intravenous lignocaine for pain relief in those with burn injury. It was a Transport Accident Commission (TAC) funded project, which ran from December 2007 to May 2009.

Dr Jennifer Wong, The Jean Hailes Foundation, was highly commended at the Southern Health Research Week 2009 Poster Competition in the Endocrinology and Metabolism Research Category.

Dr Emma Bruce, Department of Health Sciences, won the Cross Campus Staff Mobility Scholarship to travel to the Monash campus in South Africa (MSA) in November. She looked at workforce development for MSA staff teaching in the new degree course.

Ms Emily Orchard received the Recognition for Service Award from the Australian Federal Police for her work during deployment to East Timor July, 2007.

Dr Samantha Hutchison, of The Jean Hailes Foundation at Monash Institute of Health Services Research (MIHSR) was announced as a finalist for the Bryan Hudson Award at the Endocrine Society of Australia meeting.

Leanne Darvil promoted to Associate Professor.

Note: all PhD awards are listed in the PhD section.
SPHPM is a leader in developing a critical mass of expertise around the establishment, management and analysis of clinical registries. A number of trends in health care have led to an increased demand for the following specialist skills and data:

- collection and management of large health-related data sets within IT systems;
- provision of evidence of effectiveness and long term safety of medical and surgical interventions;
- evidence of the effectiveness of preventive interventions is often dependent on data from large scale trials;
- measuring and benchmarking quality of health care through data from disease and procedure registries; and
- long-term surveillance programs for long-term hazards of medical and surgical interventions.

### SPHPM Registries during 2009

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<tr>
<th>Registry Name</th>
<th>Description</th>
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<tr>
<td>REACH Registry</td>
<td>Prostate Cancer Clinical Quality Registry</td>
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<tr>
<td>Australian Society of Cardiothoracic Surgeons (ASCTS) Database</td>
<td>Australian Rheumatology Association Database (ARAD)</td>
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<td>Atherothrombotic Effects Registry</td>
<td>Bosentan Patient Registry</td>
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<td>National Burns Registry</td>
<td>Neonatal Alloimmune Thrombocytopenia Registry</td>
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<tr>
<td>Haemostasis Registry</td>
<td>Melbourne Interventional Group (MIG) Cardiology Registry</td>
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<tr>
<td>National Burns Registry</td>
<td>Neonatal Alloimmune Thrombocytopenia Registry</td>
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<tr>
<td>Surveillance of Australian Workplace Based Respiratory Events (SABRE)</td>
<td>Thrombotic Thrombocytopenic Purpura Registry</td>
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<tr>
<td>Victorian Cardiac Arrest Registry</td>
<td>Victorian Orthopaedic Trauma Registry (VOTR)</td>
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<tr>
<td>Victorian State Trauma Outcomes Registry (VSTORM) – Monitoring and Evaluation of the Victorian State Trauma Registry</td>
<td>Australian Cardiac Procedures Registry (ACPR)</td>
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### Clinical Informatics and Data Management Unit

During 2009, the Clinical Informatics and Data Management Unit (CIDMU) in the Department of Preventive Medicine (DEPM) provided a range of data management services for SPHPM and external clinical registries, clinical trials and cohort studies.

These included:

- case report form design;
- database design;
- data capture systems – paper, scan, fax, electronic and web-based;
- reporting systems – recruitment tracking, data query resolution and real-time web reporting, data management services that conform to GCRP standards;
- web-based or telephone randomisation services;
- trial and site monitoring capabilities; and
- statistical data analysis and study design capabilities.
# Staff

## Director/Head
Assistant Professor Christopher Reid BA, Dip Ed, MSc, PhD

## Systems Development Manager
Mr Carl Costoloe

## Senior Projects Manager
Ms Angela Brennan

## Research Assistants

<table>
<thead>
<tr>
<th>Ms Molly Bond</th>
<th>Ms Vibhasha Chand</th>
<th>Ms Harriet Carruthers</th>
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<tr>
<td>Ms Philippa Loane</td>
<td>Ms Amy Finlay</td>
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<td>Ms Fanny Sampurno</td>
<td>Ms Lavanya Vijayasingham</td>
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## Software Developers

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<tr>
<th>Mr Waraonon Buranasiri</th>
<th>Mr Nino Hay</th>
<th>Mr Phillip Scotney</th>
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<tr>
<td>Mr Miteshkumar Chaudhari</td>
<td>Ms Ramya Jajanathan</td>
<td>Mr Douglas Wong</td>
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<td>Mr Mahfuzal Haque</td>
<td>Mr Kunnapoj Pruksawongsin</td>
<td>Mr Igor Yeykelis</td>
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</tbody>
</table>

## Students

Mr James Phung (RMIT)
Registries and clinical trials managed by the CIDMU

<table>
<thead>
<tr>
<th>Administering Institution</th>
<th>Project</th>
<th>Project Type</th>
<th>Clinical Context</th>
<th>Sponsor</th>
<th>Period</th>
<th>Recruitment</th>
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</thead>
<tbody>
<tr>
<td>DEPM-CCRE</td>
<td>ANBP2</td>
<td>Cohort Study</td>
<td>Cardiovascular Disease</td>
<td>GPs</td>
<td>2006 – ongoing</td>
<td>1199 GPs</td>
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<tr>
<td>Australian Rheumatology Association</td>
<td>ARAD</td>
<td>Registry</td>
<td>Rheumatology</td>
<td>NHMRC</td>
<td>2001 – ongoing</td>
<td>159 rheumatologists</td>
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<td>DEPM-CCRE</td>
<td>ASCTS</td>
<td>Registry</td>
<td>Cardiac Surgery</td>
<td>DHS</td>
<td>2002 – ongoing</td>
<td>10 Australian hospitals</td>
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<tr>
<td>DEPM-CCRE</td>
<td>ASPREE</td>
<td>Clinical Trial</td>
<td>Cardiovascular Disease</td>
<td>NHMRC/NIH</td>
<td>2005 – ongoing</td>
<td>88 Australian GPs</td>
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<td>DEPM-CCRE</td>
<td>HOPE3</td>
<td>Clinical Trial</td>
<td>Cardiovascular Disease</td>
<td>National Heart Foundation</td>
<td>2008 – ongoing</td>
<td>150 international sites</td>
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<tr>
<td>DEPM-CCRE</td>
<td>INTEGRATE</td>
<td>Clinical Trial</td>
<td>Cardiovascular Disease</td>
<td>Bristol Myers Squibb</td>
<td>2007 – ongoing</td>
<td>755 Victorian GPs</td>
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<tr>
<td>DEPM-CCRE</td>
<td>MIG</td>
<td>Registry</td>
<td>Cardiovascular Disease</td>
<td>Commercial-various</td>
<td>2006 – ongoing</td>
<td>8 Victorian hospitals</td>
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<tr>
<td>Alfred ICU</td>
<td>ENTERIC</td>
<td>Clinical Trial</td>
<td>Intensive Care</td>
<td>Various</td>
<td>2005 – ongoing</td>
<td>14 Victorian sites</td>
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<tr>
<td>Alfred ICU</td>
<td>STATINS</td>
<td>Clinical Trial</td>
<td>Intensive Care</td>
<td>NHMRC</td>
<td>2007 – ongoing</td>
<td>17 Australian hospitals</td>
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<td>Alfred/NTRI</td>
<td>DECRA</td>
<td>Clinical Trial</td>
<td>Trauma</td>
<td>NHMRC/TAC</td>
<td>2005 – ongoing</td>
<td>30 Victorian hospitals</td>
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<tr>
<td>Burnet</td>
<td>Sentinel Surveillance</td>
<td>Observational Study</td>
<td>Infectious Diseases</td>
<td>DHS</td>
<td>2005 – ongoing</td>
<td>16 Victorian clinics</td>
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<tr>
<td>DEPM-CCRE</td>
<td>TRIAGE</td>
<td>Observational Study</td>
<td>Emergency Medicine</td>
<td>Inverness</td>
<td>2007 – ongoing</td>
<td>6 Australian hospitals</td>
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<td>DEPM-CCRE</td>
<td>ASPECT</td>
<td>Observational Study</td>
<td>Emergency Medicine</td>
<td>Inverness</td>
<td>2008 – ongoing</td>
<td>9 Asia-Pacific hospitals</td>
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<td>DEPM-CCRE</td>
<td>APCR</td>
<td>Registry</td>
<td>Cardiovascular Disease</td>
<td>ACSQHC</td>
<td>2009 – ongoing</td>
<td>Pilot project – 9 Australian hospitals</td>
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<td>DEPM-CREPS</td>
<td>Prostate cancer</td>
<td>Registry</td>
<td>Neoplasms</td>
<td>Cancer Australia</td>
<td>2009 – 2012</td>
<td>7 Victorian Hospitals</td>
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</table>
Visitors

SPHPM is an international hub for researchers, students and educators in its wide array of interdisciplinary subject areas. Other countries require their medical personnel and epidemiologists to obtain experience in first world countries as part of their professional development.

The School has an international reputation and Australia has active relationships in other ways with these countries. We host a number of doctors and epidemiologists from Sri Lanka and elsewhere.

Retired High Court Justice Michael Kirby visited the Bioethics Unit group on Friday 5 June 2009.

Dr Jagath Amarasekera is a visiting academic from Sri Lanka. He is based in the Central Epidemiology Unit at the Sri Lankan Ministry of Health. The Unit employs about 100 staff, of which about 25 are doctors. As part of their Community Medicine training they complete a one-year rotation in a developed country. Jagath will be working on several chronic disease prevention programs while in Australia.

Ms Mary Redmayne is a Masters student at the Victoria University of Wellington in New Zealand. Mary visited the Department for five weeks in January and February 2009. Mary was working on the Mobile Radiosfrequency Phone Exposed Users Study (MoRPhEUS) looking at mobile phone use in school children with Michael Abramson and Geza Benke.

Dr Emily Williams, a visiting postdoctoral researcher from the University College of London, visited for six weeks with Brian Oldenburg and the International Public Health Unit. She worked on the AusDiab database.

Dr Xu Zongyu, Deputy Division Director, Department of Maternal and Child Health and Community Health, Ministry of Health, Beijing was a WHO Training Fellow with Professor Brian Oldenburg.

The National Trauma Research Unit (NTRI) hosted Professor Jerry Jurkovich (11 September 2009) and Dr David Clark (14 September 2009) from the USA for the NTRI/Alfred Trauma Quality Improvement Program.

Professor Guy Parcel, School of Population Health, University of Texas visited DEPM in September and October 2009. He was involved with the teaching of the Intervention Mapping short course.

Professor Ed Fisher, Global Director, Peers for Progress, from the University of North Carolina at Chapel Hill, attended meetings for the Australasian Peers for Progress Project.
Dr David Campbell, National Primary Care Research and Development Centre, University of Manchester, gave a seminar on 14 October 2009, ‘Developing clinical quality indicators for primary care in Europe – what works and doesn’t work for cardiovascular disease – a 10 country indicator development study’. His presentation is available for SPHPM staff on the intranet.

VSTORM (Victorian State Trauma Outcomes Registry) hosted the following visitors from Singapore who wish to establish a Singapore Trauma Registry:

- **Dr Mabel Yap**, Director (Health Services Research and Evaluation) in the Ministry of Health, and Chairperson of the National Trauma Registry Workgroup (NTR WG).
- **Dr Chow Khuan Yew**, Deputy Director (National Registry of Diseases Office) in the Health Promotion Board, and Deputy Chairperson of the NTR WG.
- **Dr Wong Ting Hway**, Registrar in the Department of General Surgery, Singapore General Hospital, and member of the NTR WG.
- **Dr Alan Ong**, Assistant Director (Health Services Research), and Secretariat to the NTR WG.

Dr Dominik Rachon, from the Department of Clinical Nutrition, Medical University of Gdansk, Poland, was one of four inaugural Group of eight European Fellows to spend six months at The Jean Hailes Foundation. He worked with The Jean Hailes Clinical Research Unit investigating mitochondrial function and exercise in Polycystic Ovary Syndrome.

**Professor Simon Chapman** (University of Sydney), **Professor Mike Daube** (Curtin University), **Dr Peter Miller** (Deakin University) and **Associate Professor Adams** (University of Auckland) visited the Department of Health Social Sciences as part of the annual Dangerous Consumption Colloquium sponsored by VicHealth. **Associate Professor Adams** also participated in a forum within DHSS to discuss population health issues.

Three Fijian final year dental students, Tanveen Kaur, Vinal Kumar Ambaram Harikishan and Monesha Pritashni Singh from Suva (under the supervision of Dr Tony Hill at Victorian Institute of Forensic Medicine (VIFM)), reviewed over 200 ante-mortem dental records as an audit to determine completeness and compliance to the minimum standards set by the Australian Dental Association (ADA). Unfortunately, a large proportion of the records were below standard. This information will be fed to the ADA to improve record keeping and will hopefully improve the quality of information for forensic odontologists involved in identification of deceased persons.

Dr Nick Thomson visited on 2 December 2009, giving a seminar on his experience in Thailand researching drug use, STIs and harm reduction programs. Nick is a DEPM PhD graduate and is now a Field Director at John Hopkins School of Public Health, USA.

Dr Glenn Brown, Head of the Department of Family Medicine at Queen’s University in Canada attended the staff morning tea on 26 November 2009. He visited the Monash Centre for Occupational and Environmental Health (MonCOEH) with a group of academics from Queen’s as part of an exchange program between Monash and Queen’s. The group had discussions with Malcolm Sim about occupational medicine teaching.

The following individuals visited the Australasian Cochrane Centre:

- **Dr David Tovey**, Editor-In-Chief of The Cochrane Library in February 2009.
- **Ms Natthaleeya Narash**, Co-ordinator of the Thai Cochrane Network. She was awarded the 2009 Cochrane Visiting Fellowship and spent three weeks at the Centre during February and March 2009.
- **Ms Juliane Reid**, Singapore Branch of the Australasian Cochrane Centre in November 2009.
Seminars

The School held a number of seminar series that featured local, national and internationally-based researchers.

The SPHPM Seminar Series

30 March: ‘Injury risk management’. Professor Paul Barach, Professor of Safety and Injury and Director of the NSW Injury Risk Management Center (IRMRC).


25 March: ‘Ethics of healthcare of asylum seekers’. Dr Deb Zion, Senior lecturer, DEPM.

16 April: ‘WHO surgical checklist’ Professor Allan Merry, Auckland University.

29 April: ‘Do we need radical reform of Medicare? Consumer choice’. Professor Just Stoelwinder, Divisional Head of Health Services and Global Research, DEPM.

20 May: ‘Global prevention and management of diabetes and other chronic diseases’. Professor Ed Fisher, Global Director, Peers for Progress, from the University of North Carolina at Chapel Hill.

10 June: ‘An update on swine flu’. Dr Robert Hall, Senior Research Fellow, DEPM.

17 June: ‘Lifestyle related diseases and effective prevention’. Professor Helena Teede, Director, Jean Hailes Foundation.

5 August: ‘Evidence-based decision-making’. Dr Claire Harris, Director, Centre for Clinical Effectiveness (CCE), Southern Health.

17 August: ‘Inflammation, hsCRP, statins, and primary prevention: Controversies and Implications of the JUPITER Trial’. Professor Paul Ridker, Harvard Medical School, Director, Centre for Cardiovascular Disease Prevention, Brigham and Women’s Hospital in Boston, Massachusetts.


2 September: ‘Sea orchid’. Professor Sally Green, Director, Australasian Cochrane Centre.

7 October: ‘Research in health social science: our contributions to public health’. Professor Helen Keleher, Head of the Department of Health Science, Monash University.

11 November: ‘Talking about TORC (Transfusion Outcomes Research Collaborative)’. Dr Louise Phillips, Senior Research Fellow, DEPM.

2 December: ‘Amphetamines, prisons, chlamydia and Moroccan mud wraps: reflections on a field based PhD in northern Thailand’. Dr Nick Thomson, Field Manager, School of Public Health, John Hopkins University.

AMREP Global Health Seminar Series

22 April: ‘HIV treatment at scale: what are the known unknowns?’ Dr Julian Elliott, Alfred Hospital.


2 July: ‘Climate change: the biggest global health threat of the 21st century? And, a not-to-be-missed opportunity for health promotion?’ Professor Alistair Woodward, University of Auckland.

16 July: ‘Ethics of research in vulnerable populations: the other model’. Assistant Professor Bebe Loff, Monash University.

20 August: ‘Letting men in: engaging men in sexual, reproductive, maternal and child health in Asia and the Pacific’. Dr Wendy Holmes, Burnet Institute.

21 September: ‘Urbanisation and non-communicable disease risk in Tamil Nadu, India’. Assistant Professor Steven Allender, University of Oxford.


24 November: ‘An evaluation of the major barriers to interrupting polio virus transmission in Afghanistan’. Professor Mike Toole, Burnet Institute and ‘Report on the barriers to polio eradication in Nigeria’. Dr Robert Hall, Monash University.
Epidemiological modelling SIG Seminar Series

2 April: ‘The design of reliability studies in physiotherapy and gait.’ Associate Professor Rory Wolfe, SPHPM.

‘Variance components analysis for balanced and unbalanced data in reliability studies of gait measurement.’ Dr Mohammad Reza Mohebbi, SPHPM.

11 June: ‘Socioeconomic inequalities in CVD: The explanatory role of risk factors.’ Ms Allison Beauchamp, SPHPM.

‘Associating with DAG’s can be beneficial.’ Professor Andrew Forbes, Divisional Head, SPHPM.

16 July: ‘Risk factors of late antenatal care.’ Ms Penny Robinson, Alfred Hospital

‘Validation of two Framingham cardiovascular risk prediction algorithms in an Australian population: The ‘old’ versus the ‘new’ Framingham equation.’ Ms Ella Zomer, SPHPM.

20 August: ‘Prediction and use of ICU length of stay as a performance indicator with standardized hospital mortality ratio.’ Professor Ville Pettila, SPHPM.

‘Cost-effectiveness analysis of drug-eluting stents in Australia from the Melbourne Interventional Group Registry.’ Mr Molla Huq, SPHPM.

17 September: ‘Modelling the health impact of current obesity trends.’ Dr Anna Peeters, SPHPM.

‘Predicting the Brownlow medal.’ Associate Professor Michael Bailey, SPHPM.

29 October: ‘Classification and regression trees in model identification and validation.’ Dr Dean McKenzie, SPHPM.

‘Does Intention To Treat (ITT) analysis provide a realistic answer to the question of clinical effectiveness?’ Dr Fahad Hanna, SPHPM.

12 November: ‘Hospital in-patient modelling across Australia.’ Mr Anthony Gust, Alfred Hospital.

‘Framingham risk prediction equations for CVD incidence using detailed measures for smoking.’ Dr Haider Mannan, SPHPM.

Centre for Obesity Research and Education (CORE) Seminars:

14 October: ‘BMI, Obesity and PCOS: A key public health issue’. Professor Helena Teede, Director Research, Jean Hailes Foundation, Head Diabetes, Southern Health, Professor of Women’s Health, Monash University.

14 October: ‘Fat Talks: How the function of fat changes in obesity’. Associate Professor Matthew Watt, Associate Professor of Physiology, R Douglas Wright Fellow (NHMRC), Monash University.
Short courses

Centre for Obesity Research and Education (CORE)
In 2009, CORE conducted the following training programs for 32 participants under the direction of Professor Paul O’Brien and Associate Professor Wendy Brown.


Department of Epidemiology and Preventive Medicine (DEPM)
Throughout 2009, Dr Elizabeth Douglas (Director) and Ms Suzy Guiliano (Coordinator) ran a successful year of varied Short Courses. The DEPM short course policy is to share profits with participating units exclusively for the purpose of supporting PhD students and early career researchers who wish to attend conferences.

In 2009, 16 short courses were run and there were a total of 239 enrolments.

Short courses in 2009:
- Billah, B. Biostatistics for Clinical and Public Health Researchers
- Wolfe, R. Introduction to Stata
- Crammond, B. Ethics and Good Research Practice
- Zion, D. Research with Vulnerable Populations
- Newman, D. Australian Certificate of Civil Aviation Medicine
- Leder, K. Infectious Diseases Epidemiology
- Parcel, G. Intervention Mapping
• Priestly, B. Environmental Risk Assessment
• 2009 Monash Spring School for Public Health and Preventive Medicine:
  • Billah, B. Biostatistics for Clinical and Public Health Researchers
  • Brooks, M. Ethics and Good Research Practice
  • Cumpston, M. Introduction into Systematic Reviews of Interventions
  • Wolfe, R. Introduction to Stata
  • Wolfe, R. Survival Analysis with Stata
  • Aroni, R. Qualitative Research Methods

**Department of Health Social Sciences (DHSS)**

The following short course was run by the Department of Health Sciences with 72 participants:

• Bruce, E., McCormick, J. ‘Health Promotion’ Australasian Cochrane Centre
  In 2009, 13 short courses were run with 294 participants:

• Cumpston, M., Pitt, V. Developing a protocol for a systematic review workshop and introduction to analysis workshop, 25–26 May, Melbourne.
• Cumpston, M. Cochrane review completion and update program, 27–29 May 2009, Brisbane.
• Page M., Cumpston, M. Developing a protocol for a systematic review workshop and introduction to analysis workshop, 25–26 June, Sydney.
• Pitt, V. Developing a protocol for a systematic review workshop and introduction to analysis workshop, 20–21 July 2009, Perth.
• Pitt, V. Cochrane Review Completion and Update Program, 22–24 July 2009, Perth.
• Cumpston, M., Pitt, V. Introduction to systematic reviews of interventions, 13–14 August 2009, SPHPM Melbourne.
• Page M., Cumpston, M. Cochrane review completion and update program, 27 August 2009, Adelaide.
• Cumpston, M., Pitt, V. Cochrane review completion and update program, 16–20 November 2009, Melbourne.
• Cumpston, M. Developing a protocol for a systematic review workshop and introduction to analysis workshop, 3–4 December 2009, Sydney.
Teaching

Undergraduate
Staff of the SPHPM teach into the Bachelor of Medicine and Bachelor of Surgery (MBBS) program and the Bachelor of Biomedical Science (BBiomedSc). The Faculty of Medicine, Nursing and Health Sciences administers these programs centrally, at the Clayton Campus. The SPHPM manages the Bachelor of Health Science (BHSc) and Bachelor of Health Science/Bachelor of Social Work degrees which are delivered from the Caulfield campus.

Bachelor of Medicine and Bachelor of Surgery
Theme 2, Population, Society, Health, and Illness, of the MBBS program equips medical students with the knowledge, skills and values to enable them to deal with broad social and population issues relevant to their work after graduation. The theme comprises 15 per cent of the overall undergraduate medical curriculum and is taught by staff from SPHPM, the Department of General Practice and the Centre for Health Economics. Medical students learn the basics of public health in first year, health promotion in second year, and evidence-based practice and occupational and environmental health in third year. In fourth year, medical students learn the essentials of health services management. The School provides opportunities for students to undertake a public health elective in their fifth year.

The unit about evidence-based clinical practice equips students with the skills to identify, appraise and integrate the best available evidence into their clinical training and practice. Health promotion and knowledge management introduces students to community-based organisations caring for people, and the place of health promotion in modern health care. Students undertake a research project as part of this unit. This is their first taste of the role that research has in developing an evidence base for practice. The occupational medicine program fosters interest in a doctor’s role in the health of workers. The prime focus is fitness, return to work and concerns about health and work. The program features a special examination for the John Desmond Prize. A total of 305 students elected to sit for this prize. Wei Ping Yew (Malaysia) won first prize ($1000), Chien Yew Kow (Malaysia) second ($300), and Yu En Chia, Airman Ahmad (Malaysia), Ahmad Mohd Soffi, Chau Wang Ng (Monash Medical Centre, Clayton) equal third ($150 each). The environmental medicine program concerns a doctor’s role where environmental factors (other than work) aggravate or cause illness.

The medical program is taught in many different and widely separate sites, which presents a challenge, particularly in fourth year. Much of the School’s teaching is conducted online, to enable equity of access for all students. The School plays a major role in planning and oversight of the content of Theme 2, with colleagues from the Clayton, Gippsland and Kuala Lumpur campuses.

Undergraduate and Graduate Entry
Medical Law Programs
This year the Institute of Forensic Medicine (with the Department of Forensic Medicine, Monash University) successfully delivered the medical law tutorial program. This is an examinable component of the undergraduate medical curriculum at Monash University, Clayton.

Associate Professor Leanna Darvall, in a position jointly funded by Avant and the Medical Indemnity Protection Society (MIPS), coordinates over 70 medical lawyers and clinicians who provide small group tutorials for students in years one, three and four of the MBBS course. The program takes a collaborative approach, including having tutorials in third year delivered jointly by lawyers and clinicians at metropolitan and regional hospital sites.

A number of Department of Forensic Medicine staff are involved in program delivery including Drs Noel Woodford, Shelley Robertson, Matthew Lynch and Associate Professor David Ranson.

A graduate-entry medical degree was offered at the Churchill campus. The medical law component of the Gippsland program is delivered as a multi-disciplinary seminar series in each year of the graduate-entry program involving medical lawyers, ethicists and clinicians, many of whom are also engaged in delivery of the Clayton program.

Associate Professor Darvall has also assisted with the development of a medical law program for Monash Malaysia that mirrors the format of the Clayton and Gippsland programs.

Bachelor of Biomedical Science
The School teaches two units of the BBiomedSc program, including one core unit, Biomedical Sciences and Society; and one elective unit, Introduction to the Health System. When they graduate, students can choose from a variety of careers, so we aim to stimulate their interest in population health. They learn foundation concepts in epidemiology and public health, including how health is maintained and illness is controlled at local, regional and national levels.
Honours program

We welcome enquiries from students considering Honours. Enquiries can be directed to Dr Anna Peeters on 03 9903 0177 or at anna.peeters@monash.edu.

The Bachelor of Medical Science (BMedSc) and BBiomedSc (Hons) are diverse programs. The BMedSc is a research year within the undergraduate medical course. The BBiomedSc honours year is open to BBiomedSc graduates with sufficient grades from the undergraduate BBiomedSc course. BBiomedSc (Hons) and BMedSc students in SPHPM participate in classes in epidemiology and biostatistics, the cornerstones of medical research. They also complete research supervised by researchers within the department and become proficient in presenting their results at departmental seminars.

A variety of Honours projects were available to students in 2009:

- Biostatistical methods in epidemiological research;
- Cardiovascular disease epidemiology;
- Rheumatology;
- Obesity prevention;
- Clinical pharmacology;
- Diabetes epidemiology;
- Environmental health;
- Infectious disease epidemiology;
- Musculoskeletal epidemiology;
- Occupational health;
- Pharmacoepidemiology;
- Preventive medicine;
- Risk assessment; and
- Women’s Health.

BBiomedSc (Hons) and BMedSc students in 2009 were:

Amanda Barnett, Zhongxiong Cai, Venu Ariathyane, Samantha Kozica, Rebecca Haward, Claire Weedon and Brodwen McBain.

Bachelor of Health Science and Bachelor of Health Science/Bachelor of Social Work

The BHSc is a three-year public health program which includes core units for foundation learning, stream units for specialization and electives for breadth. All students are expected to develop sound research skills. Core units include foundations of health, research, global health, anatomy and physiology, health systems, epidemiology, health promotion, health programs, policy, and disease prevention. The two specialisation streams are Clinical and Public Health Sciences, and Health Programs and Policy. Students are encouraged to undertake a semester of Study Abroad. In 2009, 60 students were enrolled. The course is supported by a range of community partnerships nurtured by staff in the Department of Health Social Science. These partnerships enable student practicum opportunities and bring real-world experience to their learning.

The BHSc/BSW is a four-year double degree that gives students a two-year health science context for their social work degree. The health science component concentrates on areas including health promotion, programs and policy, and community partnerships. In 2009, 30 students were enrolled.

One BHSc/BSW student, Marama Kufi, has established the South Eastern Oromo Community Health Team, which takes a health promotion approach to the issues of mental health, family relationships, domestic violence, drug and alcohol use and the relationships between young people and their families. Chaired by Mr Kufi, it is a collaboration between the Oromo community, Monash University, and the Cardinia-Casey and Greater Dandenong Community Health Services.

Another BHSc/BSW student, Sarai Dee, won a coveted Oxfam-Monash internship in 2009, to undertake volunteer work in Oxfam’s human rights and HIV/AIDS campaigns in South Africa for two months.
Teaching – Postgraduate

The Victorian Institute of Forensic Medicine (VIFM) ran two postgraduate courses in forensic medicine:

• Master of Forensic Medicine Program; and
• Forensic Nursing.

The program continues to attract national and international students. In 2009, 55 students were enrolled in the various programs. These students were from all Australian states and territories and from overseas. The Graduate Certificate of Nursing (Forensic) course had 20 students enrolled, of which 16 nursing students were offered scholarships (Qld 15, Vic 1, Tas 3, NSW 1).

The DEPM postgraduate program is extensive and offers the following courses:

• Masters in Public Health;
• Biostatistics;
• Clinical Epidemiology / Clinical Research Methods;
• Health Services Management;
• International Health; and
• Occupational and Environmental Health.

DEPM’s postgraduate courses attract students from a wide range of medical and allied health backgrounds, including medicine, nursing, physiotherapy, pharmacy and health management.

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Number of Students Enrolled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Masters in Public Health</td>
<td>220</td>
</tr>
<tr>
<td>Biostatistics</td>
<td>17</td>
</tr>
<tr>
<td>Clinical Epidemiology/Clinical Research Methods</td>
<td>21</td>
</tr>
<tr>
<td>Health Services Management</td>
<td>88</td>
</tr>
<tr>
<td>International Health</td>
<td>45</td>
</tr>
<tr>
<td>Occupational and Environmental Health</td>
<td>36</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>427</strong></td>
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</table>

During 2009, DEPM’s postgraduate courses had 427 students enrolled, with 220 of these studying the Master of Public Health (MPH).
Master of Public Health (MPH)

The MPH provides students with the full range of quantitative, analytical and communication skills necessary to work in public health. We are a partner in the Victorian Consortium for Public Health, which is a collaboration between Deakin, La Trobe, Melbourne and Monash Universities. In 2009, Monash University continued its responsibility for this course and Ms Joy Markwell worked as the consortium's administrative coordinator.

Through the Victorian Consortium for Public Health, we offer specialisation streams for students enrolled in this course through Monash. These streams are clinical epidemiology, environmental health, health economics, health services management, international health, occupational health and environmental health.

The MPH is studied in two parts. In part one, students from the four member universities study together. In 2009, the core units were:

- Epidemiology and demography;
- Introductory statistics; and
- Research methods/field methods for international health planning and evaluation.

In part two of the MPH, students study with their university of enrolment. In this part the students select and focus on specialised streams.

Course Coordinator – Professor Flavia Cicuttini.

Biostatistics

The Graduate Certificate and Graduate Diploma in Biostatistics give a broad range of biostatistical theory and techniques especially designed for health professionals.

The Master of Biostatistics develops the technical skills needed to commence a professional career as a biostatistician.

Course coordinator – Associate Professor Andrew Forbes.

Clinical Epidemiology/Clinical Research Methods

The Graduate Certificate in Clinical Research Methods is an off-campus course with some on-site block requirements. This degree guides students through the many stages required for undertaking research and includes introductory subjects in biostatistics, epidemiology and study design.

The Graduate Diploma in Clinical Research Methods assists clinicians or public health professionals to become familiar with clinical research methodology. It assists health professionals to make rational evidence-based decisions in clinical practice and to undertake clinical audits and small clinical research projects. It can lead to the Master of Clinical Epidemiology or Master of Public Health.

The Master of Clinical Epidemiology is offered as an off-campus or on-campus course, and may be undertaken either part-time or full-time. This may include elective subjects in infectious diseases, injury prevention and epidemiology, health promotion and advanced statistical methods. It provides a solid basis in clinical research for health professionals who participate in investigator-initiated or industry-supported studies, including doctors, research nurses and allied health professionals.

Course coordinator – Associate Professor Allen Cheng.

Health Services Management

The Graduate Certificate, Graduate Diploma and Masters in Health Services Management are off-campus, part-time or full-time courses. The Masters degree caters for medical or general hospital administrators, clinicians, quality assurance managers, team leaders, senior nursing administrators, unit managers and case managers within the health care system.

Course coordinator – Professor Just Stoelwinder.

Occupational and Environmental Health

The Graduate Certificate in Occupational Health, Graduate Diploma and Masters in Occupational and Environmental Health are off-campus, part- or full-time courses offered by the Monash Centre for Occupational and Environmental Health (MonCOEH) at DEPM.

Course coordinator – Professor Malcolm Sim.

International Health

The Graduate Diploma in International Health and Master of International Health are offered in collaboration with the Centre for International Health at the Burnet Institute. It provides students with the skills to design, implement and evaluate relevant programs that address the major public health priorities of communities in developing countries.

The Graduate Certificate and Masters in International Research Bioethics deal with ethical issues that arise in healthcare settings, in vulnerable populations and in international settings. Particular emphasis is given to ethical issues associated with research in developing countries in the Asia-Pacific region.

Course coordinator – Associate Professor Bebe Loff.
Master of Forensic Medicine Program
This program offers medical practitioners an opportunity to develop advanced knowledge and skills in clinical forensic medicine. In addition to units offered by the Department of Forensic Medicine, students have the opportunity to complete relevant units from other tertiary institutions. After satisfactory completion of the three core units and one elective unit, students may exit the program with a Graduate Certificate of Forensic Medicine. This is usually one year of part-time study. To continue in the Master's program, students must complete the core units to honours level. Should the students gain 48 credit points, they may exit the program with a Graduate Diploma in Forensic Medicine. This is usually two years of part-time study. The full Master's program requires 72 university credit points, which equates to at least three years of part-time study. Generally, part-time study is considered to be two units per semester, however, students may complete two or three units per year if they wish.

Core units will be offered yearly. Elective units may be offered either annually or on alternate years. The availability of elective units is dependent on minimum enrolment numbers.

All students will be required to attend a program of formal teaching and assessment that involves face-to-face teaching. This will be over a period of one to two weeks, with approximately two days allocated for each unit. Residential arrangements will be the responsibility of the student. The course administrator will provide assistance with these arrangements for overseas candidates.

Course coordinator – Associate Professor David Wells.

Forensic Nursing
This course aims to assist those with an interest in pursuing professional development in the area of forensic nursing. Areas covered are: forensic knowledge and nursing responsibilities in forensic cases; clinical consultations with victims of crime and offenders; medico-legal report writing and provision of evidence in court; theoretical and cultural aspects of interpersonal violence. The course comprises four core units including: sexual assault nursing 1 and 2; understanding injuries; and nursing and the criminal justice system.

Course coordinator – Dr Angela Williams.
SPHPM Doctoral program

Our doctoral program has trained many health professionals for senior careers in public health. The program has continued to grow and attracts students from around Australia and globally.

In 2009, we had 36 new doctoral students enrolled, and 84 continuing PhD students. Twelve submitted and passed during the year. The students are from many backgrounds, including microbiology, pharmacy, physiotherapy, public health, medicine, radiography, science, psychology and nursing. The progress of students is facilitated by a very strong research environment, with an extensive program of NHMRC funded research and access to extensive infrastructure support including assistance in biostatistics, data management, computing and support from experienced staff and a large student body. We also have a Good Research Governance Coordinator who works with each doctoral student on the development of protocols and the following of strict research guidelines.

The PhD program coordinator in 2009 was Dr Elizabeth Douglas (elizabeth.douglas@monash.edu). Kaylene Hanlon (kaylene.hanlon@monash.edu) was the doctoral program administrator.

Doctor of Public Health and the Victorian Public Health Training Scheme

The Doctor of Public Health (DPH) is a professional doctorate offered through the Department of Epidemiology and Preventative Medicine (DEPM) in SPHPM. The DPH has research, coursework and professional practice components comprising 70 per cent, 20 per cent and 10 per cent of the program respectively. Currently there are 10 students enrolled in the DPH program.

The Victorian Public Health Training Scheme (VPHTS) is administered and funded by the Victorian Government and currently supports candidates for two years while they study in the DPH program. It aims to build the capacity and skills of the public health workforce through advanced academic training and supervised work in a series of public health field placements. Successful completion of the scheme leads to the award of the DPH degree from Monash University.

Currently, nine students are studying for the DPH as part of the VPHTS. These students have studied in a variety of applied public health settings including the Department of Health, the Coroner’s Court, the Victorian Institute of Forensic Medicine, VicHealth, the Burnet Institute and the Nossal Institute for Global Health, among others. Five students are completing their second year and four are completing their third year of candidature.
Scholarships
In the 2009 round of PhD scholarships, 22 students were awarded competitive scholarships from a number of organisations.

NHMRC: Paul Buton (also held a Royal Australasian College of Surgeons (RACS) Surgeon Scientist Scholarship).
National Heart Foundation Scholarship: Adrienne O’Neil.
Australian Postgraduate Award: Stephanie Tanamas, Bridget Pratt, Brad Crammond, Elizabeth Moore.
Monash Graduate Scholarship: Conor Deasy, Lal Rawal, Dr Lisa Doyle, Darshini Ayton.
CSIRO: Marlien Varnfireld.
Victorian Public Health Training Scheme: Angela Rintoul, Karen Moore, Claire Tobin, Chebi Kipsaina, Susan Heywood, Elizabeth Headley, Kate Gibson, Nathan Grills, Marian Abouzeid.

Awards, Prizes, Bursaries, Travel Grants during 2009

Jonathon Slater won the best oral presentation prize at the Australian Society for Medical Research Conference in June 2009.
Judy Lowthian was one of six winners from the Faculty of Medicine, Nursing and Health Science for the Monash University 2009 Higher Degree by Research Poster Exhibition.
Helen Walls was awarded a prize for the best student presentation at the Australasian Epidemiology Association conference (30 Aug–1 Sept), held in Dunedin, New Zealand. She won two awards: a student travel bursary and a prize for best student oral presentation.
Louisa Lam, DEPM and Amaali Lokuge (Alfred Emergency Department) won equal first authors in the Whole Time Medical Specialists Private Practice Scheme Prize for Clinical Research during the Alfred Week.
Rosanne Freak-Poli, DEPM, won the poster prize for the Whole Time Medical Specialists Private Practice Scheme Prize for Clinical Research during the Alfred Week.
Adrienne O’Neil was awarded the highest-ranking scholar in public health in Victoria (2009) by the National Heart Foundation of Australia.

Sabrina Gupta, was highly commended in the Southern Health Research Week 2009 Poster Competition in the Cardiovascular Research Category.
Samantha Hutchison was a finalist in the Endocrine Society Brian Hudson prize for clinical research.
Cate Lombard won the 2009 poster competition at the Southern Health Research Week in the Women’s Health Research Category.
Michael Wu won the 2009 Poster prize at the Southern Health Research Week in the Endocrinology and Metabolism Research Category.
Dr Lisa Doyle, from the Centre for Obesity Research and Education (CORE), was awarded the Foundation for Surgery Research Scholarship.

Sharon Brennan
- received a certificate of merit at the Smart Geelong Research and Innovation Expo, Geelong 2009; and
- received a travel award from the Australia and New Zealand Bone and Mineral Society (ANZBMS).

Geraldine Lee
- was awarded a National Heart Foundation Travel Grant that provides $2,000 to attend an overseas conference.

Doctoral students enrolled in 2009
A hundred and thirty two doctoral students were enrolled during 2009 across all areas of the school. Their names and their topics are listed under the following headings:
- New students enrolled during 2009;
- Continuing students enrolled during 2009; and
- Completed and passed during 2009.

Dr Adrian Lowe, a former PhD student (co-supervised by Professor Michael Abramson, DEPM, and Assistant Professor Shyamali Dharmage, University of Melbourne as principal supervisor), has been awarded the Melbourne School of Population Health’s “Head’s award for PhD excellence” and at the Faculty level, the “Dean’s award for PhD excellence”. Adrian is now an NHMRC Research Fellow at the Murdoch Children’s Research Institute, University of Melbourne.
New students enrolled during 2009

Marian Abouzeid (DPH)
Evidence, equity and health-contemporary issues in the Australian public health arena.

Katherine Anders
Individual and household risk factors for dengue and acute viral respiratory infections in Vietnamese infants.

Darshini Ayton
Local Churches as settings for Health Promotion in Victoria.

Richard Bassed
The assessment of age using CT scanner genotyping.

Luke Bonato
Outcomes after tibial plafond fractures: does the treatment approach matter?

Genia Burchell
Haemostatic Abnormalities in Polycystic Ovary Syndrome (PCOS).

Paul Burton
The physiology and pathophysiology of laparoscopic adjustable gastric bands.

Bradley Crammond
Factors relevant to the success of a rights-based health program.

Conor Deasy
Cardiac arrest – addressing the gaps in our scientific knowledge.

Lisa Doyle
The impact of weight loss on the metabolic syndrome.

Kristine Egberts
The role of lifestyle factors in surgically induced weight loss.

Katherine Gibson (DPH)
Reflections on the role of partnerships in public health practice.

Nathan Grills (DPH)
The iterative process of project initiation, planning and management in public health; the example of determining the seropositivity of Pandemic (H1N1) 2009 in Victoria.

Anthony Gust
Surveillance of in-hospital central line associated bacterial infection: Using data linkage to assess the utility of routinely collected hospital data.

Elizabeth Headley (DPH)
Health inequalities; population-wide changes in the prevalence of inequalities and their implications.

Susan Heywood (DPH)
Evidence and policy approaches to address health and social inequities.

Alisa Higgins

Danny Hills
What makes GPs and specialists entering rural practice stay? Impact of personal characteristics, community connectedness and sense of place.

Sara Ivory
Epidemiological risk prediction tools; methods and applications.

Val Kay
Using a primary care partnership as a platform to improve population health, reduce health inequalities and increase environmental sustainability.

Chebi Kipsaina
Public Health in low-income settings: Does context matter?

Jessica Killian
Alcohol and drugs in external injury deaths.

Erwin Loh
The utility of monitoring the outcomes of mortality reviews as a marker of quality of care within hospitals.

Zoe McQuilten
Improving patient outcomes through understanding and changing transfusion practice.

Elizabeth Moore
Renal function and renal biomarkers in traumatic brain injury treated by erythropoietin and controlled hypothermia.
Karen Moore (DrPH)
Evaluating the nature and adoption of evidence in action to address public health priorities.

Peter Wayne New
A study of patient flow through inpatient rehabilitation and potential for improvements.

Adrienne O’Neil
Using communications technology to improve the health and well-being of patients following myocardial infarction (MI).

Bridget Pratt
Developing a just policy framework for the conduct on international health research.

Lal Rawal
Why do women in rural Nepal choose to deliver at home and not in a health facility?

Angela Rintoul (DPH)
Improving the health of vulnerable populations: from evidence to practice.

Mosoumeh Sanagou
Preoperative hierarchical risk prediction modelling for 30 day mortality following cardiac surgery in Australia.

Stephanie Tanamas
The effect of angles on knee structure.

Claire Tobin (DPH)
Exploring the relationships between evidence, public opinion and policy in public health.

Marlien Varnfield
Clinical outcomes of an ICT-based home care model in primary and secondary prevention with lifestyle modifications for chronic diseases and mental health.

Bryan Yan
Drug-eluting stent utilisation and impact in contemporary Australian interventional cardiology practice: insight from the Melbourne Interventional Group Registry.
Continuing Students enrolled during 2009

Asnawi Abdullah
The duration of obesity and its impact on estimating risk, burden of chronic diseases, costing and health policy.

Hendrik Ackland
Novel experimental strategies combining mesenchymal stem cells (MSC) with angioblasts and cost-efficacy analyses of such strategies in the treatment of congestive heart failure.

Nadine Andrew
Epidemiology and outcomes of serious sport and leisure injuries.

Zanfina Ademi
Pharmacoeconomics and Health Outcomes of Cardiovascular Disease.

Thathya Ariyaratne
Comparison of long-term outcomes and cost effectiveness of Coronary Artery Bypass Graft Surgery (CABG) and Percutaneous Coronary Interventions (PCI).

Jocasta Ball
Optimising the management of patients with atrial fibrillation.

Olivia Ball
A handbook of human rights analysis.

Dimitri Batras
What are determinants of organisational change to increase health equity through sports and recreation settings?

Rinaldo Bellomo
The effect of intensity of continuous renal replacement therapy in critically ill patients.

Alison Beauchamp
Socioeconomic status as a determinant of cardiovascular disease in the Melbourne Collaborative Cohort study.

Charmian Bennett
The impact of environmental exposures to particulate air pollution on respiratory health.

Patricia Berry
The role of lifestyle factors on hip cartilage volume and rate of cartilage loss in a normal community-based population a longitudinal study.

Megan Bohensky
Linking clinical and administrative data to evaluate intensive care outcomes.

Helen Bonato
Assessment of the correlation of clinical and radiographic findings in acute cervical discoligamentous injury with long term outcomes in road trauma patients.

Molly Bond
Why diet and exercise alone won’t solve the obesity epidemic.

Sharon Brennan
How does bone metabolism affect knee cartilage in healthy women?

Sue Brennan
CQI in implementing practice.

Frank Buchanan
The influence of gender on recovery from general anaesthesia.

Jessica Chellappah
Surveillance and modification of cardiovascular risk factors in children and young adults.

Lei Chen
Development and validation of appropriate methods for the prediction of risk of future cardiovascular events in the contemporary Australian population.

Georgiana Chin
Transitions of care – obstetric clinical handover. The study, observation and improvements in obstetric clinical handover to improve the efficacy and patient safety in this practice.

Enayet Chowdhury
Epidemiological modelling of chronic disease – particularly cardiovascular disease and its economic implications.

Barbary Clarke
What is best practice healthcare for lesbian and heterosexual women with life-threatening illness?

Ben Clissold
Analysis of ambulance factors in identification of stroke and accessibility to hospitals with acute stroke therapies.

Paul Crammond
Analgesia in the Victorian prehospital setting.
Janet Davey  
Forensic studies of Graeco-Roman mummies genotyping.

Miranda Davies  
Factors affecting the knee joint in health and disease: towards an improved understanding of knee osteoarthritis.

Jennifer Davis  
Evaluation of clinical indicators for safety and quality in colorectal cancer surgery.

Basia Diug  
How do social risk factors affect Warfarin therapy? What are the social responsibilities and strategies in place to deal with these risk factors?

Glenn Doolan  
Occupational exposure using self reports and a job exposure matrix in relation to prostate cancer from an Australian case-control study.

John Duncan  
Incidence and prevalence study of people experience chronic wounds in the community in Victoria.

Maros Elsik  
Myocardial fibrosis and extracellular matrix remodelling in chronic heart failure – novel treatment and monitoring strategies.

Soula Fillipas  
Exercise and HIV/AIDS.

Rosanne Freak-Poli  

Judith Gold  
Increasing demand for emergency patient services in the Australian community: underlying drivers, implications and potential solutions.

Cameron Gosling  
Incidence, risk factors and outcomes of injuries in triathletes.

Sabrina Gupta  

Steven Haas  
The epidemiology of chronic heart failure.

Cheryce Harrison  
Lifestyle intervention in insulin resistant reproductive aged women.

Alexander Hodge  
Efficacy and mechanism of action of the antifibrotic agent FT52 in cell cultures and animal models.

Judith Hodge  
The medium and the message: an investigation of how youth access, interpret and implement sexual health information.

Victor Hoe  
The CUPID study: risk factors for musculoskeletal and somatic symptoms and associated disability in workers.

Samantha Hutchison  
Role of exercise in treatment of women with PCOS: Mechanisms of action.

Imo Inyang  
Assessment of exposure to radiofrequency energy in an epidemiological cohort.

Marsha Ivey  
Gender – a case for change in the management of Chronic Obstructive Pulmonary Disease (COPD) in Australia.

Thomas Jeavons  
Fungal exposure and asthma.

Daryl Jones  
The medical emergency team: Patient characteristics and resource utilization.

Nerida Joss  
Drivers of collaborative practice in health promotion.

William Wilson Kemp  
The impact of norfloxacin on portal pressures and endotoxaemia in clinically significant portal hypertension and the role of urotension II.

Natasha Khamisa  
A study exploring the relationship between work-related stress and public health service delivery: Managing stress in South Africa Health Service Organisations while improving public health service delivery.

Louisa Lam  
The diagnosis and treatment of patients with acute decompensated heart failure.
Geraldine Lee
The utility of the ECG in detecting and managing cardiovascular disease in South Africa: The heart of Soweto study.

Suree Lekawanvijit
Cardiorenal syndrome: Pathophysiology and role of protein-bound uremic toxins and biomarkers.

Shan Liu
Contribution of uremic toxins to cardio renal syndrome in patients with co-morbid heart failure and kidney disease.

Ewan MacFarlane
Long-term health outcomes in Australian pesticide exposed workers.

Michele McGrady
Epidemiological assessment of Aboriginal and non-Aboriginal Australians at high risk of developing heart failure.

Joanne McKenzie
An internet based clinical trials service: feasibility in technical terms.

Biswaudev Mitra
Transfusion practice in trauma resuscitation.

Mohammadreza Mohhebi
Multilevel (hierarchical) regression models and their application to spatial statistics and reliability studies.

Shymala Nataraj
Bioethics and HIV interventions.

Gerard O’Reilley
International trauma epidemiology: paths and challenges to the establishment of trauma registries in developing (and developed) countries.

Alisa Pedrana
Next Wave: Innovative HIV prevention for men who have sex with men (MSM) in Victoria.

Jennifer Pilgrim
Pharmacogenetics and adverse drug reactions.

Kate Roberts
Developing a public health perspective for gambling in Australia.

Shelly Rodrigo
Health effects of increased usage of recycled water and alternative water sources.

Eva Saar
Toxicology of antipsychotic drugs genotyping.

Padaphet Sayakhott
Menopause and breast cancer.

Durga Shrestha
Aspects of work/life satisfaction of doctors in Australia.

Margaret Stebbing
Exploring risk: current issues in health risk perception in Australia.

Margaret Stuckey
Evaluation of occupational health for light vehicle use.

Geoffrey Strange
Seeing the invisible: The impediments of timely diagnosis of pulmonary hypertension.

Andrew Teichtal
The determinants of articular cartilage health.

Gillivie Thom
Preventative aspects of non-invasive hemodynamic monitoring in severely ill patients in the emergency department.

Lavinia Tran
Therapeutic targeting of signalling pathways in cardiovascular disease.

Tess Tsindos

Helen Walls
Population-wide changes in obesity: their causes, trends and implications.

Nicholas Walsh
Psychosocial, environmental and pharmacotherapy determinants of antiviral treatment in injecting drug users.

Jason Wasiak
The physical and psychosocial outcomes following burn injury: A 12 month follow-up study.

Carolina Weller
Chronic wounds: outcomes for people attending specialist wound clinics.

Ruwan Wijemungie
Improving the prevention and early detection and secondary brain injury in traumatic brain injury patients within the ICU setting.
Michael Wu
Assessment of the mechanisms involved and the severity of arterial disease in insulin resistant states including diabetes.

Pauline Zardo
Application of research evidence in Australian health policy: How to build support and capacity for evidence based decision making.

Ella Zomer
Funding sources

2009 Funding

<table>
<thead>
<tr>
<th>Year</th>
<th>2009</th>
</tr>
</thead>
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<tr>
<td>NHMRC research funding</td>
<td>$10,213,383</td>
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<tr>
<td>Category 1 Funding</td>
<td>$11,419,862</td>
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<tr>
<td>Other Funding</td>
<td>$10,109,432</td>
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<tr>
<td>TOTAL</td>
<td>$21,529,294</td>
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</tbody>
</table>

The grants included are only those administered by the School. They include Commonwealth schemes such as the National Health and Medical Research Council (NHMRC) and Australian Research Council (ARC) project and program grants, fellowships, scholarships and commercial grants.

Grants are listed according to whether they are new or continuing in 2009 and further divided according to the type of category. In each section, research projects are listed in alphabetical order of the Principle Investigator. Information includes:

- Principle Investigator
- Grantor
- Grant type/Grant Scheme
- Title
- Start-to-end date
- Total financial contribution
- Financial contribution for 2009 (shown in italics)

Research Funding Beginning in 2009

Category 1 Grants

Abramson M., Sim M., Benke G. NHMRC Project Grant. Mobile phones, radiofrequency exposure and the development of cognitive function in primary school children, 2009–2011, $531,000 ($223,500).


Cameron P. NHMRC Practitioner Fellowship. 2009-2013, $360,625 ($72,125).


Dietze P. NHMRC Project Grant. Understanding the barriers to improved access, engagement and retention of methamphetamine users in health services, 2009–2011, $118,350 ($39,450).


Ding C. NHMRC Career Development Grant. Longitudinal studies of knee osteoarthritic changes using magnetic resonance imaging (MRI), 2009–2011, $61,350 ($20,450).


Keleher H., Nagorka T. Frankston Mornington Peninsula Primary Care Partnership. Frankston Mornington Peninsula primary care partnership integrated health promotion plan & Mornington Peninsula Shire municipal public health plan, 2009, $16,000 ($16,000).


Liu M., Teede H., Zounga S. Cardiovascular Lipid Pfizer Research Grant. Improving outcomes in patients with Type 2 diabetes and chronic kidney disease by defining the relationship between glycated haemoglobin and mean glucose, 2009–2010, $55,000 ($55,000).


McNeil J. CSIRO Flagship. ASPREE Healthy Ageing Biobank. 2009–2013, $1,942,000 ($500,000).


Mitra B. NHMRC Biomedical Scholarship. 2009–2011, $97,884 ($32,628).


Oldenburg B., Joyce C. ARC Linkage with Transport Accident Commission. Citizen engagement: listening to citizen’s views about Australia’s health system and prevention, 2009–2011, $582,605 ($72,360).

Owen A., Reid C., Krum H. National Heart Foundation Grant. Omega-3 fatty acid status and cardiovascular risk in older Australians, 2009 – 2010, $129,000 ($64,499).


Sim M., Abramson M. NHMRC Capacity Building Grant. Linking research, policy and health services to build a better evidence base for workplace public health, 2009– 2013, $693,550 ($378,650).


Teede H. NHMRC Career Development Award. The prevention and optimal treatment of Type II Diabetes, 2009–2012, $204,500 ($11,125).

Tonkin A., Glass D., Dennekamp M., Sim M. NHMRC Project Grant. Cardiac effects of exposure to Melbourne air pollution caused by the 2006/07 bushfires in Victoria. 2009, $57,675 ($57,675).

Tran L. National Heart Foundation Postgraduate Research Scholarship. 2009, $21,927 ($21,927).

Wluka A. NHMRC Career Development Award. Using good measurement principles to examine musculoskeletal disease and improve the evaluation of new diagnostic tests, 2009–2012, $370,000 ($92,500).


Category 2

Cicuttini F. Mesoblast Ltd. Post ACL prevention of osteoarthritis, 2009, $68,400 ($68,400).


Keleher H. South East Healthy Communities Partnership Health Literacy Review. Health Literacy and Vulnerable Groups, 2009, $9,000 ($9,000).


Ozone-Smith J. Victorian Workcover Authority (WorkSafe), ISCHR Work-related fatality project, 2009–2011, $977,589; ($977,589).


Category 3:

Bruce E. Inner East Primary Care Postgraduate Scholarship. Development of a submission for the parliamentary inquiry into the potential for developing opportunities for schools to become a focus for promoting healthy community living, 2009, $1,636 ($1,636).


McCormick J., Keleher H. Inner Eastern Community Health Service. Evaluation report of IECHS health promotion priority area: Mental health and wellbeing – public housing, 2006–2009, $12,000 ($12,000).


Nagorika-Tsindos T. Eastern Access Community Health Centre. Evaluation report of EACH supporting accommodation for vulnerable Victorians initiative (SAVI) and implementation of SAVVI program improvement plan, 2009–2010, $40,000 ($20,000).

O’Brien P. Allergan Australia. Research services for the various projects related to Allergan’s BIB and LAP–BAND devices, 2009–2012, $2,217,000 ($739,000).

Reid C. George Institute for International Health. Kanyin guidelines adherence with the PolyPill (GAP) study, 2009–2010, $160,000 ($10,000).

Reid C., Millar I. M-DACS (Malaysia). Hyperbaric oxygen in diabetic foot amputation (HODFA), 2009–2013, $70,000 ($70,000).

Sim M., Benke G., MacFarlane E. Cement Australia Pty Ltd. A study of cancer and mortality in Cement Australia workers at the Railton plant, Tasmania, 2009–2010, $200,000 ($100,000).

Tonkin A. State Trustees Australia Foundation. Identification of factors predicting the risk of death, further heart attack, stroke and other major events in survivors of heart attack and hospitalisation for angina, 2009, $8,000 ($8,000).

Zoungas S., Liu M. Australian Diabetes Society Grant. Improving glycaemic control in diabetic patients with chronic kidney disease in order to better clinical outcomes, 2009, $33,000 ($33,000).

Continuing Grants

Category 1 Grants

Animastos A. NHMRC Peter Doherty Fellowship, ACE inhibition - A potential new therapy for peripheral arterial disease, 2007–2010, $274,000 ($68,500).


Buchbinder R., Reid C. NHMRC Enabling Grant. Australian rheumatology association database (ARAD), 2006–2010, $1,625,000 ($325,000).


Finfer S., Myburgh J., Cooper D., Higgins A. Neurotrauma Grant. The impact of rigorous glycaemic control on mortality and neurological function in traumatic brain injury patients: a sub-study from a large randomised trial (NICE), 2008–2011, $98,797 ($23,710).

Fredericks B. NHMRC Training Fellowship. New methods and approaches for the management and prevention of chronic disease in indigenous people, 2008–2010, $274,000 ($68,500).


Gabbe B. NHMRC Fellowship. Improving the measurement and monitoring of long term outcomes following trauma. 2007–2010, $452,000 ($90,500).


Myles P. NHMRC Fellowship. Large multicentre trial in anaesthesia and perioperative medicine, 2007–2011 $346,250.00 ($69,250).


Oldenburg B. NHMRC Project Grant, CCRE – circulatory and associated conditions in urban Indigenous people, 2007–2009, $120,000 ($40,000).


Reid C. NHMRC Research Fellowship, Senior research fellowship Level B. 2008–2012, $537,500 ($107,500).


Category 2 Grants

Bernard S., Cameron P. Transport Accident Commission, Pre-ambulance basic life support for patients with severe head injury in rural areas (PABLES), 2008–2009, $53,800 ($38,800).


Oldenburg B. VicHealth (Discovery Grant), Listening to citizen’s views about chronic disease prevention and health promotion, 2008–2009, $74,435 ($74,435).


Category 3 Grants

Bellomo R. ANZIC Intensive Care Foundation. Economic evaluation of resuscitation in sepsis, 2009, $100,000 ($100,000).

Cameron P. Novo Nordisk Pharmaceuticals Pty Ltd., Haemostasis registry, 2004–2009, $1,042,787 ($153,564).


Cooper J., Westbrook A., Nichol A. Australia and New Zealand Intensive Care Research Centre. The relevant study, 2009, $8,000 ($8,000).


Hanna F., Cicuttini F., Urquhart D. ANZ Charity Trust: Medical Research and Technology Grant. The effect of physical activity on the knee joint: is it good or bad? Investigation of a community based cohort, 2009, $20,000 ($20,000).


Loff B. VicHealth Senior Fellowship. Health inequalities, governance and participation. 2007–2010, $650,000 ($130,000).


Oldenburg B. Finkel Foundation. Finkel chair in global health, 2008–2009, $2,000,000 ($440,000).


**Content**

1. **Book Chapters**

2. **Peer-reviewed articles**

**Total for 2009**

| Book Chapters | 16 |
| Peer-reviewed articles | 320 |

**Book Chapters**


**Journal Article: Refereed Article in a Scholarly Journal**


Staff

Head of School
Professor John J McNeil; MBBS MSc PhD FRACP FAFPHM

Deputy Head of School
Professor Michael Abramson; MBBS(Hons), BMedSc, PhD, FRACP, FAFPHM Heads of Divisions within SPHHPM

Deputy Head of Divisions within SPHHPM
Professor John J McNeil; MBBS MSc PhD FRACP FAFPHM Prevention Science
Professor Michael Abramson; MBBS(Hons), BMedSc, PhD, FRACP, FAFPHM Clinical Epidemiology
Professor Malcolm Sim; BMedSc, MBBS, MSc, GDipOccHgy, PhD, FAOM, FAFPHM, FFOM Occupational and Environmental Science
Professor Just Stoelwinder; MD, MBBS, FRACMA, FACHE, FAFPHM Health Services and Global Health Research
Professor Peter Cameron; MBBS, MD, FACEM Critical Care Research
Professor Andrew Forbes; BSc (Hons) MSc PhD, FACS, FAAA Research methodology

Heads of Departments within SPHHPM
Professor Olaf Drummer; FRCPA, PhD, BAppSc(Chem), CChem MRACI Department of Forensic Medicine (DoFM)
Professor Sally Green; PhD, GDip(ManipPhysio), BAppSc(Physio) Co-director Australasian Cochran Centre
Professor Helena Teede; MBBS, FRACP, PhD
Jean Hailes’ Womens Health Research Group
Professor Helen Kelker; BA, MA, PhD, FRCNA. Department of Health Social Science (DHSS)
Professor John J McNeil; MBBS, MSc, PhD, FRACP, FAFPHM. Department of Epidemiology and Preventive Medicine (DEPM)
Emeritus Professor Paul O’Brien; MD, FRACS and Associate Professor Wendy Brown; MBBS(hons) PhD FRACS FACS Centre for Obesity Research and Education (CORE)

Professors
Robert Atkins; AM, MBBS, MSc(Colorado), DSc, FRACP
Rinaldo Bellomo; MBBS (Hons), MD (USA), MD (Monash), FRACP, FACC, FJFICM
Rachelle Buchbinder; MBBS (Hons), MSc (Clin Epi), PhD, FRACP
Robert Burton; MBBS, BMedSci, PhD, MD, BA
Flavia Cicutti; MBBS (Hons), MSc, PhD, DHTM, FRACP, FAFPHM
David (Jamie) Cooper; BMBS(Flinders), MD(Adel), FRACP
Joseph Ibrahim; MBBS, GradCertHigherEd, PhD, MRACMA, FAFPHM, FRACP
Henry Krum; MBBS, PhD, FRACP, FCSANZ
Brian Oldenburg; BSc(Hons), MPych, PhD
Joan Ozanne-Smith; MBBS, MPH, MD, FAFPHM
Brian Priestly; BPharm, MPHarm, PhD
Andrew Tonkin; MBBS, MD, MRACP, FRACP
Barbara Workman; MBBS, MD, FRACP
Andrew Tonkin; MBBS, MD, FRACP

Associate Professors
Caroline Brand; MPH, BA(Fine Arts), FRACP, MBBS
Maximilian de Courten; MD MPH
Paul Dietze; BSc(Hons) PhD
Damien Jolley; MSc(Epidemiol)(London) MSc(Statistics) Astat
Bebe Loff; BA, LLB, MA (Medical Law and Ethics), PhD
Chris Reid; BA, DipEd, MSc, CertHE, PhD
David Wells; MA (Melb), MBBS, GradCertHigherEd, DMJ(Clin), FACLM, FRACGP
Rory Wolfe; BSc, PhD
Karim Leder; MBBS(Hons), FRACP, MPH
Priscilla Pyett; DHSc, BA (Hons)
Chang-Hai Ding; MBBS, MMed, PhD
Ian Scott; MBBS, FRACP, MHA, MED

School Manager
Connie Mogg; Grad Cert Commerce (CSU)

Executive Research Manager
Elizabeth Douglas; BA, GradDipHealthPsych, PhD

Research Governance
Megan Brooks; BAppS, PhD, GradCert
Senior Lecturers and Senior Research Fellows

Rosalie Aroni; BA(Hons), PhD
Michael Bailey; BSc(hons), MSc(Stats), PhD
Geza Benke; BSc, MAppliedSci, GDipQuanMeth, FAOH, PhD
Neville Betts; BA, GDipOccHazMan, MBA, CFSAI
Angela Brennan; RN
Beverley Copnell; RN, RSCN(UK), BAppSc, PhD
Carl Costelloe; BSc, MEng
Leanna Darvall; LLB, PhD
Lisa Demos; BPharm, GDipHospPharm, PhD
Diem Dinh; BAppSci(Hons), PhD
Sue Evans; BN, GDipClinEpi, PhD
Nadine Ezzard; PhD
David Fish; MBBS, PAFOM, FAAPFM
Bronwyn Fredericks; DipT, BEduc, MEduc, MEducStudies, PhD, JP
Belinda Gabbe; MAppliedSci, BPhysio, PhD, MBioStat
Deborah Glass; MA, MSc, DipOccHyg, PhD, COH
David Goddard; BMEdSc, MBBS, DOH, FAAPM, MFOM
Robert Hall; BSC(Hons), MBBS, DipRACOG, MPH, FRACMA, FAFPHM, MASM
Dragan Ilic; PhD, MSc(Reprod), BSc
Shelley Jeffcott; BSc(Hons), PhD
Catherine Joyce; BA(Hons), MPsych, PhD
Helen Kelsall; MBBS, MPH, MHlthSci (PHP), FAAPFM
Elizabeth Kennedy; BA, LLB(Hons), LL.M(Melb), GradDipHealthMedLaw
Karin Leder; MBBS(Hons), FRACP, MPH
Charles Livingston; BA, GradDipEconHist, MEC, PhD
Dianna Magliano; BAppSci(Hons), PhD
Kelly Makarounas-Kirchmann; BEC, MEC
Joanne McKenzie; BSc, DapStat, MSc
Alistair Nichol; MBChB, BAO, BCh, FCArcSI
Denise O’Connor; BAppSci(OT)(Hons), PhD
Alice Owen; BSc(Hons), PhD
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