



# SPHPM Annual Report

2009







# 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.

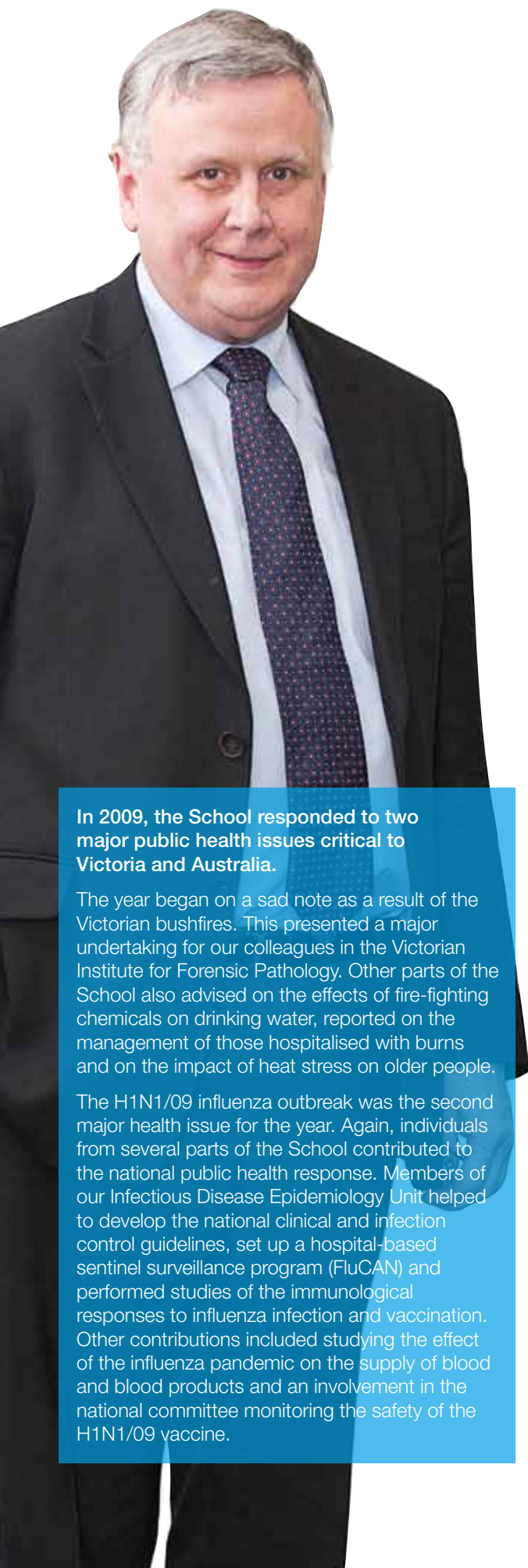


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# Head of School Report



## **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 Biostatistics 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 ASPIRIN for Reducing Events in the Elderly (ASPRE) 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

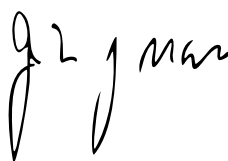
During the year several of our staff and students were recognised with a variety of individual awards. Helena Teede received the Minister's award for outstanding individual achievement at the 2009 Victorian Public Healthcare Awards ceremony. Jamie Cooper received the Dean's award for research excellence 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 Maccabiah 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

# Highlights



## 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 Goods 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.



# Research and education summary

## School of Public Health and Preventive Medicine (SPHPM), Monash University

### Research

#### Research income: \$23 million

Year	2008
NHMRC research funding	\$10,213,383
Category 1 funding	\$11,419,862
Other research funding	\$10,109,432
<b>Total:</b>	<b>\$21,529,294</b>

Total number of research projects, scholarships and fellowships funded by grants in 2009.

Continuing: 88  
Starting: 57

#### Publications

Peer reviewed articles (includes letters and editorials)	320
Book chapters	16

### 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

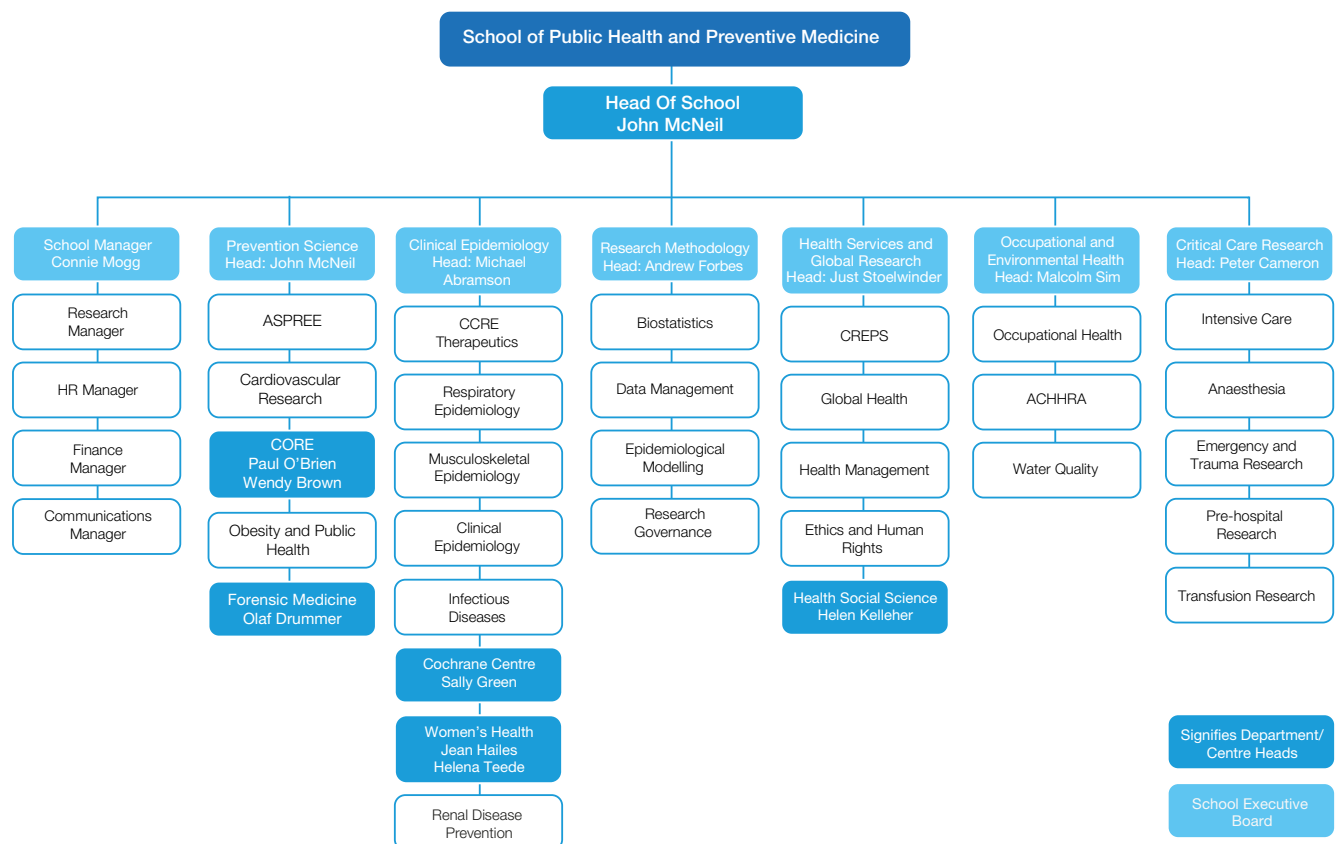
#### PhD:

36 new  
84 continuing  
12 completed and graduated

In the 2009 round of PhD scholarships, 22 students were awarded competitive scholarships.



# Organisational Chart



# Divisions

## Prevention Science

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.



## Department of Forensic Medicine (DFM)

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.



*Picture Left to right: Professor Olaf Drummer, Professor Malcolm Sim, Professor John McNeil, Professor Just Stoelwinder, Professor Sally Green, Professor Andrew Forbes, Professor Peter Cameron, Professor Helena Teede, Professor Michael Abramson, Professor Paul O'Brien Absent: Professor Helen Keleher and Associate Professor Wendy Brown.*



### 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.”<sup>1</sup>

“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.”<sup>2</sup>

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.

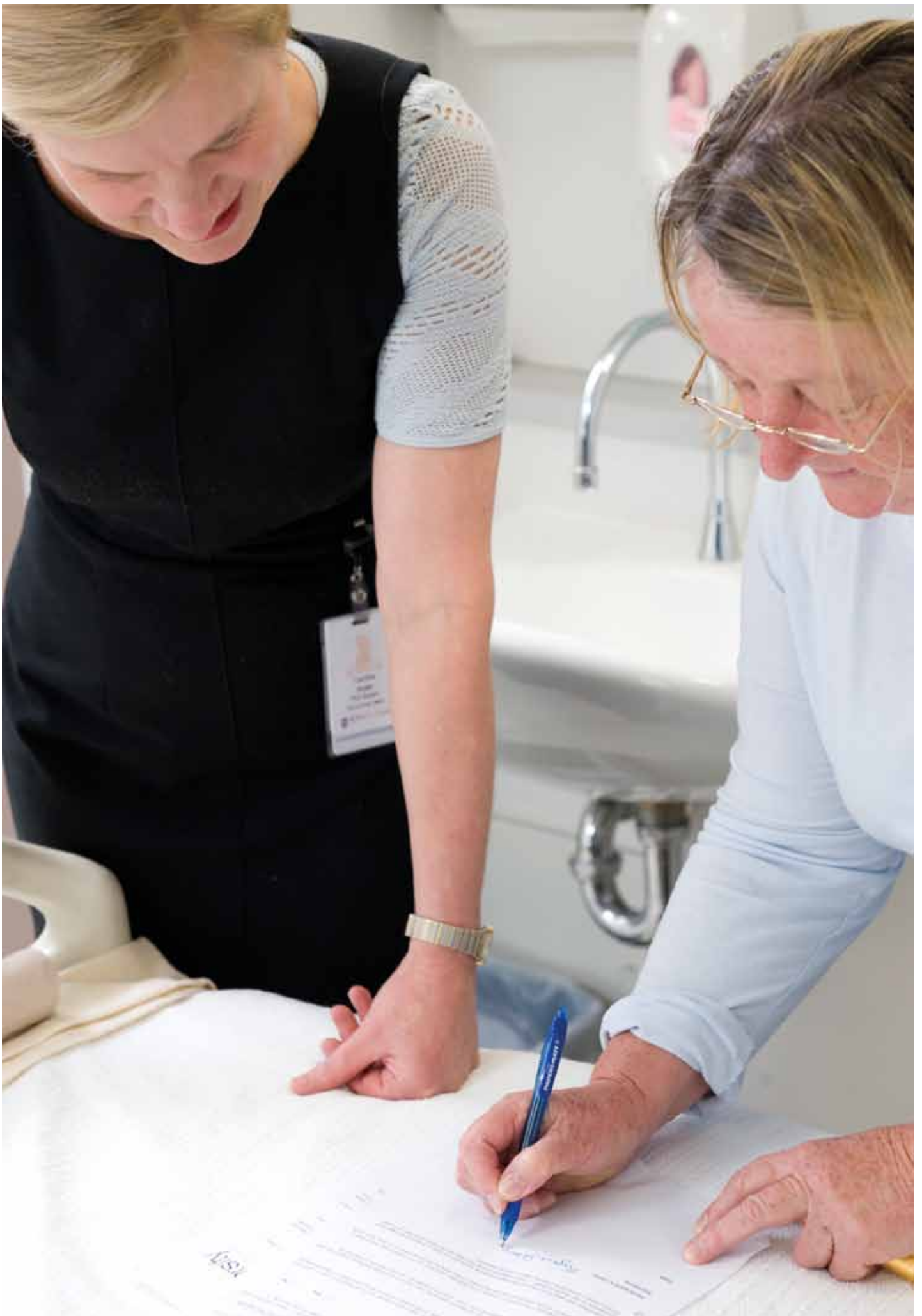
## Members of the Research Governance Committee in 2009 were:

Dr Megan Brooks, Mr Brad Crammond, Dr Elizabeth Douglas, Professor Andrew Forbes, Associate Professor Damien Jolley, Professor John McNeil and Ms Marina Skiba (Chair).

<sup>1</sup> WP Anderson, CD Cordner and KJ Breen. (2006) Strengthening Australia's framework for research oversight. MJA 184 (6): 261-263.

<sup>2</sup> SJ Poustie, D Taylor, AB Forbes, MA Skiba, MR Nelson and JJ McNeil. (2006) Implementing a research governance framework for clinical and public health research. MJA 185: 623-626.





# 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."



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



**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.



**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.



**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*.



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



**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.



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



**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.



**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 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 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 Wendy Brown**, promoted to Associate Professor.



**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.



**Dr Karin Leder**, promoted to Associate Professor.



**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.



**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.



# Registries

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

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

## Clinical Informatics and Data Management Unit

During 2009, the Clinical Informatics and Data Management Unit (CIDMU) in the Department of Preventative 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 Costolloe		
Senior Projects Manager		
Ms Angela Brennan		
Research Assistants		
Ms Molly Bond	Ms Vibhasha Chand	Ms Harriet Carruthers
Ms Philippa Loane	Ms Amy Finlay	
Ms Fanny Sampurno	Ms Lavanya Vijayasingham	
Software Developers		
Mr Waraonon Buranasiri	Mr Nino Hay	Mr Phillip Scotney
Mr Miteshkumar Chaudhari	Ms Ramya Jajanathan	Mr Douglas Wong
Mr Mahfuzal Haque	Mr Kunnapoj Pruksawongsin	Mr Igor Yeykelis
Students		
Mr James Phung (RMIT)		



## Registries and clinical trials managed by the CIDMU

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





# Visitors



Dr Jagath  
Amarasekera



Ms Mary Redmayne



Dr Emily Williams



Dr Xu Zongyu



Professor Guy Parcel



Dominik Rachon

**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 Radiofrequency 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 Julianne 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).

**18 March:** 'A practical session on workstation ergonomics'. Bernadette Hayman, Occupational Health and Safety consultant, Monash University.

**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.

**26 August:** 'Mass fatality management in Victoria'. Dr Jodi Leditschke, Victoria Institute of Forensic Medicine.

**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.

**20 May:** 'Peer and other supports for the global prevention and management of diabetes and other chronic diseases'. Professor Ed Fisher, University of North Carolina.

**5 June:** 'Global challenges in leadership and health: implications for the Australian health system'. Professor Richard Southby, The George Washington University.

**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.

**30 October:** 'The Mauritius non-communicable disease studies 1987-2009'. Dr Dianna Magliano, Monash University.

**19 November:** 'Improvement of child health care in China: a comparative study'. Mr Xu Zongyu, Ministry of Health, China.

**24 November:** 'An evaluation of the major barriers to interrupting poliovirus 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.

- 'LAP-BAND®: Basic Course in Laparoscopic Adjustable Gastric Banding Training Workshop'. Panel members: Burton, P., Burn, T., Skinner, S. Melbourne, 30–31 January.
- 'LAP-BAND®: London Course in Laparoscopic Adjustable Gastric Banding, Training Workshop'. Imperial College, Panel members: LeRoux, C., Ahmed, A. London, UK. 17–18 June.
- 'LAP-BAND®: Advanced Course in Laparoscopic Adjustable Gastric Banding Training Workshop'. Panel members: Watson, S., Woods, S., Burton, P., Hopkins, G. Melbourne, 14–15 August.
- 'LAP-BAND®: Basic Course in Laparoscopic Adjustable Gastric Banding Training Workshop'. Panel Members: Doyle, L., Skinner, S., Burn, T. Melbourne, 13–14 November.

## Department of Epidemiology and Preventive Medicine (DEPM)

Throughout 2009, Dr Elizabeth Douglas (Director) and Ms Suzy Guillian (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, 2–3 March, Melbourne.
- Cumpston, M., Pitt, V. Cochrane review completion and update program, 16–20 March, Melbourne.
- Pitt, V. Cochrane Review completion and update program, 3 April 2009, Darwin.

- Cumpston, M. Developing a protocol for a systematic review workshop and introduction to analysis workshop, 25–26 May, Brisbane.
- 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. Developing a protocol for a systematic review workshop and introduction to analysis workshop, 25–26 August 2009, Adelaide.
- 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, Aiman 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](mailto: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.

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

### Enrolment in postgraduate courses in 2009

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





## 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.**





# Doctoral



## 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](mailto:elizabeth.douglas@monash.edu)). Kaylene Hanlon ([kaylene.hanlon@monash.edu](mailto: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 Varnfield](#).

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.

[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.

[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.

## 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**

The cost-effectiveness of early resuscitation of sepsis in Australia – an economic evaluation alongside the Australasian Resuscitation in Sepsis Evaluation Randomised Control Trial (ARISE-RCT).

### **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**

Global corporate challenge evaluation: The evaluation of a low-cost, low-impact physical-activity workplace intervention.

**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**

Ethnicity, cardiovascular disease and diabetes: A comparison between South Asians and Anglo Australians in Melbourne.

**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.

**Biswadev 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 Sayakhot**

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.

**Ogilvie 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**

The Manningham study: Loneliness and self-rated health status of Chinese and Anglo-Australian seniors.

**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**

Epidemiological modelling of cardiovascular disease and prevention strategies in patients with metabolic syndrome.

# Funding sources



## 2009 Funding

Year	2009
NHMRC research funding	\$10,213,383
Category 1 Funding	\$11,419,862
Other Funding	\$10,109,432
TOTAL	\$21,529,294

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*).

Bellomo R., Nichol A., Cooper D., NHMRC Project Grant. Randomised, placebo-controlled trial of erythropoietin in ICU patients with traumatic brain injury, 2009–2013, \$1,848,475 (*\$83,076*).

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

Cheng A. NHMRC Health Professional Research Training Fellowship. Molecular, spatial and mathematical techniques in the analysis of the epidemiology of tropical infectious diseases, 2009–2010, \$54,756 (*\$13,412*).

Cooper D., Cameron P., Nichol A., Bernard S. NHMRC Project Grant, A randomised controlled trial of prophylactic hypothermia in severe traumatic brain injury, 2009–2013, \$1,958,075 (*\$234,510*).

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*).

Dietze P., Aitken C., Jolley D., Hickman M., Kerr T., Stoove M. NHMRC Project Grant, The natural history of injecting drug use among IDU in Melbourne: A prospective cohort study, 2009–2010, \$708,355 (*\$193,600*).

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



- Driscoll A., Krum H. NHMRC Public Health Fellowship. Epidemiological modelling of heart failure. 2009–2013, \$285,000 (\$35,625).
- Forbes A., Forbes C. NHMRC Project Grant. Design and analysis of interrupted time series studies in health care research: Resolution of methodological issues, 2009–2010, \$297,425 (\$132,525).
- Glass D. NHMRC Project Grant. A case-control study of environment and breast cancer, 2009–2011, \$12,375 (\$4,125).
- Higgins A. NHMRC Public Health Postgraduate Research Scholarship. 2009–2011, \$85,827 (\$28,609).
- 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).
- Krum H., Wang B., Scammells P. NHMRC Development Grant. Development of novel anti-inflammatory agents, 2009, \$200,600 (\$36,776).
- 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).
- Loff B., Glass D., Kelsall H., Zion D. NHMRC Research Grant. What do Australians think about privacy and participation in epidemiological research? 2009–2011, \$425,850 (\$94,750).
- Lowthians J. NHMRC Public Health Postgraduate Research Scholarship. 2009–2010, \$85,827 (\$28,609).
- McGrady M. Cardiovascular Lipid Pfizer – Pharmacotherapy Research Grant, Prevalence of heart failure in Aboriginal communities in central Australia, 2009, \$50,000 (\$50,000).
- McKenzie D. NHMRC Public Health Fellowship. The evolution of symptoms of common mental disorders across adolescence and young adulthood, 2009–2012, \$285,000 (\$71,250).
- McNeil J. CSIRO Flagship. ASPREE Healthy Ageing Biobank, 2009–2013, \$1,942,000 (\$500,000).
- McNeil J., Reid C., Krum H., Tonkin A., Woods R. NHMRC Equipment Grant. Mobile assessment centre and blood processing laboratory, 2009, \$134,445, (\$134,445).
- Mitra B. NHMRC Biomedical Scholarship. 2009–2011, \$97,884 (\$32,628).
- O'Brien P. NHMRC Project Grant. The control of type 2 diabetes through weight loss in indigenous Australians: The feasibility and acceptability of lagb, 2009–2011, \$577,500 (\$192,500).
- O'Neil A. National Heart Foundation Scholarship. 2009–2011, \$65,781 (\$21,927).
- Oldenburg B. NHMRC Proactive Research Grant. An implementation trial of a telephone-based care management program for patients following myocardial infarction, 2009–2011, \$1,223,463 (\$253,700).
- 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).
- Peeters A, De Courten M., Bilsborough S. A. ARC Linkage with Heart Disease and Prevention, Global Corporate Challenge Evaluation: The evaluation of a low-cost, low-impact physical-activity workplace intervention, 2009–2011, \$388,682 (\$165,682).
- 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, \$1,535,875 (\$318,650).
- Sim M., Benke G. NHMRC Project Grant. Risk of brain cancer from exposure to radiofrequency fields in childhood and adolescence, 2009–2013, \$693,550 (\$138,710).
- Teede H. NHMRC Career Development Award. The prevention and optimal treatment of Type II Diabetes, 2009–2012, \$204,500 (\$51,125).
- 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).
- Wolfe R., Forbes A. NHMRC Project Grant. Strategies for handling missing data in the development, validation and implementation of clinical risk prediction tools. 2009–2011, \$435,125 (\$186,625).

## Category 2

- Cicuttini F. Mesoblast Ltd. Post ACL prevention of osteoarthritis, 2009, \$68,400 (\$68,400).
- Green S., O'Connor D., French S., McKenzie J. Physiotherapists Registration Board of Victoria. Improving evidence-based care and outcomes in Victorian physiotherapy through better understanding of current practice: a state-wide practice audit, 2009–2010, \$100,000, (\$75,000).

Jolley D., Andrianopoulos N., Evans S. Department of Human Services. Development of a cancer clinical indicator system, 2009–2010, \$94,318 (\$94,318).

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

Misso M., Parkhill A., Cumpston M., McDonald S., Green S. Department of Health and Aging. Swimming evidence map, 2009, \$25,689 (\$25,689).

Oldenburg B., Hollingsworth B. Department of Health and Ageing. An implementation trial of a telehealth program for depression in patients following myocardial infarction (MI), 2009–2011, \$229,429 (\$160,600).

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

Sim M. Victorian WorkCover Authority (WorkSafe Victoria). Noise induced hearing loss, 2009–2010, \$210,003 (\$46,003).

Smith B. VicHealth. PICSAR APG Metro evaluation, 2009–2012, \$165,000 (\$54,150).

### 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).

Ezard N. WHO Contract. Communicable disease epidemiology Profile for Sri Lanka, 2009, \$17,020, (\$17,020).

Keleher H. Livingstone C., Thomacos N., Zazryn T., Nagorika-Tsindos T. Victorian Health Association – Population Health. Population health approaches to planning for the Victorian healthcare system, 2009–2010, \$70,000 (\$30,000).

Krum H. GlaxoSmithKline Australia Pty Ltd. A clinical outcomes study of darapladib versus placebo in subjects with chronic coronary heart disease to compare the incidence of major adverse cardiovascular events (MACE) - stability trial, 2009–2010, \$219,600 (\$62,575).

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).

McNeil J. National Institute of Health (USA), Aspirin in reducing events in the elderly (ASPREE), 2009–2015, \$24,496,577 (\$2,840,755).

Nagorika-Tsindos T. Eastern Access Community Health Centre. Evaluation report of EACH supporting accommodation for vulnerable Victorians initiative (SAVVI) 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. Kanyini 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

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

Beauchamp A. NHMRC Postgraduate Scholarship. Socioeconomic status as a determinant of cardiovascular disease in the Melbourne collaborative cohort study, 2007–2009, \$79,784 (\$31,422).

Bellomo R., Cameron P. NHMRC Project Grant. The Australasian resuscitation in sepsis evaluation – randomised controlled trial, 2008–2011, \$2,303,132 (\$102,143).

Bellomo R., Cooper D. NHMRC Enabling Grant. National centre for intensive care research (NCICR), 2005–2015, \$3,790,000 (\$258,000).

Benke G. NHMRC Career Development Fellowship. Occupational respiratory and new technology epidemiology, 2007–2011, \$452,500 (\$90,500).

Brennan S. NHMRC Postgraduate Scholarship. 2008–2009, \$44,934 (\$22,677).

Browning C. NHMRC Project Grant. Health and service pathways in older Australians, 2008–2010, \$358,850 (\$123,850).

Buchbinder R. NHMRC Practitioner Fellowship. 2005–2010, \$893,375 (\$77,700).

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

Cameron P., McNeil J., Stoelwinder J., Campbell D., Forbes A., Sprivulis P. NHMRC Health Services Program Grant. Using data to improve quality of health care, 2007–2011, \$2,629,000 (\$525,000).

Cooper J. NHMRC Practitioner Fellowship. Second 5-year appointment and promotion (PF2). 2007–2011, \$346,250 (\$69,250).

Dietze M. NHMRC Career Development Grant. Treatment and prevention of bacterial vaginosis, 2007–2010, \$274,000 (\$68,500).

Dietze P., Jolley D. NHMRC Project Grant. The risk factors for ecstasy and related drug overdose: A case-crossover study, 2007–2011, \$310,125 (\$11,936).

Elsik M. NHMRC Postgraduate Scholarship. The role of myocardial fibrosis in ventricular remodelling in heart failure – novel treatment and monitoring strategies, 2007–2009, \$79,784 (\$16,359).

Evans S. NHMRC Health Professional Research Training Fellowship. Improving warfarin management – identifying risk factors for bleeding and improving monitoring mechanisms, 2008–2011, \$279,000 (\$69,750).

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).

Fry C. NHMRC Fellowship. Local public health ethics: New theoretical and applied tools for community-based health research governance and ethics, 2008–2011, \$279,000 (\$69,750).

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

Georgeff M., Campbell D., Schmidt H., Thompson S., Webb G. ARC Linkage with British Telecommunications. Intelligent collaborative care management, 2007–2010, \$730,950 (\$223,650).

Green S., Browning C., Workman B., McKenzie J., French S., O'Connor D., Harris C., Spike N., Mortimer D. NHMRC Project Grant. Evidence-based care of people with dementia (IRIS), 2008–2010, \$1,051,265 (\$239,806).

Green S., Keating J., McKenzie J., Mortimer D. NHMRC Project Grant. Improving the care for people with acute low back pain by allied health professionals: cluster RCT, 2007–2010, \$653,689 (\$237,688).

Humphreys J. NHMRC Research Grant. Understanding the dynamics of the medical workforce to improve population health and equity of access: the Australian longitudinal survey of doctors, 2008–2011, \$416,446 (\$81,307).

Joyce C. NHMRC Public Health Fellowship. Primary health care in Australia: what is its scope and what is the role of the nurse? 2006–2010, \$269,000 (\$67,250).

Kelsall H. NHMRC Public Health Fellowship. Cancer incidence, the effect of diet and physical activity on breast cancer prognosis, disability and quality of life in ageing Australians investigated through the Melbourne Collaborative Cohort Study, 2006–2009, \$299,000 (\$74,750).

Krum H., McGrady M., Liew D., Reid C. National heart Foundation. Randomised, placebo-controlled clinical trial of pharmacological intervention in high risk subjects, 2008–2009, \$120,126 (\$63,769).

Krum H., Tonkin A., Reid C., Liew D., Itescu S. NHMRC Project Grant. Novel therapeutic strategies to reduce the burden of chronic heart failure, 2005–2009, \$4,634,965 (\$926,993).

Liew D. NHMRC Training Fellowship. Cost-effectiveness analyses of improved adherence to management plans among Australians (COMPLIANS), 2008–2011, \$274,000 (\$68,500).

Loff B., Peeters A. NHMRC Preventive Healthcare and Strengthening Australia's Social and Economic Fabric Research Grant. A comprehensive regulatory strategy for obesity prevention in Australia, 2007–2011, \$761,184 (\$153,072).

MacFarlane E. NHMRC Postgraduate Scholarship, 2008–2009, \$33,627 (\$11,370).

McGrady M. NHMRC Postgraduate Scholarship. 2008–2009, \$64,631 (\$32,628).

McNeil J., Campbell D., Stoelwinder J., Myles P., Cameron P. NHMRC and Australian Council for Safety and Quality in Health Care. Centre of research excellence in patient safety (CREPS), 2005–2009, \$2,000,000 (\$352,384).

McNeil J., Hollinsworth B., Oldenburg B., Peeters A., De Courten M. NHMRC Development Grant. Better targeting of preventive services using epidemiological modelling, 2007–2012, \$1,838,750 (\$367,750).

McNeil J., Krum H., Tonkin A., Nelson M., Reid C. NHMRC Project Grant. A randomised double-blind placebo-controlled trial of aspirin in primary prevention of CVD events or dementia in the aged. 2005–2009, \$4,138,600 (\$514,487).

McNeil J., Magniano D. NHMRC Project Grant. Risk and determinants of fatal and non-fatal coronary heart disease in the Melbourne Collaborative Cohort Study (MCCS), 2005–2009, \$422,500, (\$84,500).

McNeil J., Wolfe R. NHMRC Project Research Grant. A case control study investigating factors contributing to the risk of bleeding in patients receiving warfarin therapy, 2007–2009, \$568,550 (\$62,250).

Millar I., Williamson O., Cameron P. NHMRC Project Grant. Hyperbaric oxygen in lower limb trauma (HOLLT), 2008–2012, \$684,375 (\$96,375).

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

Myles P., Burton D., Fuchs M., Zilberg E. NHMRC Development Grant. Development and clinical evaluation of a depth of anaesthesia monitor, 2007–2009, \$413,000.

Myles P., Leslie K., Silbert B., Peyton P. NHMRC Project, Grant. Nitrous oxide anaesthesia and cardiac morbidity in major surgery, 2007–2011, \$2,782,500 (\$556,500).

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

Oldenburg B., Wootton R. NHMRC Project Grant. Using conversational computer technology telephone to improve diabetes management: A randomised controlled trial, 2007–2010, \$577,464 (\$153,625).

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

Reid C., Dart A., McGrath B. National Heart Foundation. Independent and combined effects of blood pressure lowering on arterial stiffness: A substudy of HOPE3, 2008–2009, \$120,126 (\$60,063).

Reid C., Owen A., Magliano D., Zomer E. ARC Linkage Grant with Sanofi-Aventis. Epidemiological modelling of cardiovascular disease and diabetes in Australia, 2007–2009, \$330,000 (\$110,000).

Srikanth V., Forbes J., Phan T., Munch G., Pearson S., Venn A. NHMRC Project Grant. A study of mechanisms of cognitive decline in Type 2 diabetes mellitus, 2007–2009, \$492,575 (\$82,250).

Tapp R., Shaw J., Tonkin A. NHMRC Sidney Sax Fellowship, Epidemiology of diabetes related complications, 2005–2010, \$373,397 (\$35,625).

Tonkin A. NHMRC Project Grant. The LIPID study: 16 year outcomes and predictors of risk and their interactions in CHD patients, 2008–2010, \$731,564 (\$152,188).

Wainer J., Jolley D., Allen K. Medibank Private. Evaluation framework Medibank better health program, 2006–2009, \$343,657 (\$51,041).

Walls H. NHMRC Postgraduate Scholarship. 2008–2009, \$35,021 (\$12,764).

Wang Y-Y. NHMRC Public Health Fellowship. The effect of socio-demographic and lifestyle factors on the risk of primary and revision joint replacement in the Melbourne Collaborative Cohort Study, 2007–2010, \$274,000 (\$68,500).

Wluka A. NHMRC Project Grant. Factors that affect knee structure in healthy women, 2007–2009, \$190,950 (\$92,550).

Zion D., Loff B. ARC Research Grant. Caring for asylum seekers in Australia: Bioethics and human rights, 2007–2009, \$170,000 (\$55,000).

Zoungas S. NHMRC Health Professional Research Training Fellowship, Glycaemia and cardiovascular disease outcomes in patients with diabetes and CKD: methodology, relationship and management, 2008–2011, \$139,500 (\$34,875).

## 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 (\$53,800).

Cameron P. Transport Accident Commission Health Research Grant. Victorian Orthopaedic Trauma Outcomes Registry (VOTOR): Evaluation and monitoring of treatment effectiveness across Victorian hospitals, 2005–2009, \$846,688 (\$169,688).

Cameron P., Gabbe B. Australian Commission on Safety and Quality in Health Care. Testing and validating 'Operating Principles and Technical Standards for Australian Clinical Quality Registries' - Bi national burns registry, 2008–2009, \$229,429 (\$160,600). Cameron P., Jeffcott S. Transport Accident Commission. Optimising trauma team performance in the emergency department (ED), 2008–2009, \$80,950 (\$8,100).

Cordner S. Victorian Institute of Forensic Medicine (VIFM). VIFM principle research fellow, 2008–2009, \$204,495 (\$69,822).

Gabbe B., Cameron P. Transport Accident Commission. Outcomes following major trauma in Victoria: measuring recovery post discharge, 2007–2009, \$103,500 (\$28,500).

Gabbe B., Williamson O., Cameron P. Transport Accident Commission Health Research, Research Grant. Improving the measurement of function and quality of life outcomes in paediatric trauma, 2007–2009, \$156,000 (\$31,309).

Keleher H. South Eastern Healthy Communities Partnership. Go for your life – being active eating well, 2008–2010, \$68,181 (\$22,727).



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

Reid C., Ajani A., Dinh D., Shardey G., Hannaford A., Billah B., Brennan A., Tonkin A., Krum H., McNeil J. Australian Commission on Safety and Quality in Health Care. Testing and validating draft 'Operating Principles and Technical Standards for Australian Clinical Quality Registries', 2008–2010, \$931,686 (\$745,349).

Sim M., Priestly B., Dennekamp M., Benke G. Department of Education, Employment and Work Relations. Examining the BSI guide on safe handling and disposal of manufactured nanomaterials, 2008–2009, \$40,395 (\$28,276).

Smith B. VicHealth. Evaluation of the participation in community sport and active recreation program (PICSAR), 2007–2010, \$555,770 (\$178,300).

### 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).

Cameron P., Evans S. Australian Centre for Health Research. Measuring patient safety in private hospitals, 2007–2010, \$77,050 (\$38,525).

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

Darzens P., Owada K., Wainer J., Lowndes G. State Trustees. Protecting elders' assets study (PEAS), 2008–2011, \$350,000 (\$51,000).

Gabbe B., Cameron P. Australia and New Zealand Burns Association P/L, Research Grant. National burns registry upgrade, 2008–2010, \$120,045 (\$45,455).

Glass D., Blackman J., Sim M. Australian Fire Service Authorities Council. Establishment of a cohort study of Australasian fire-fighters (Phase I), 2008–2009, \$119,000 (\$40,000).

Glass D., Schnatter A., Rushton L., Sim M. Concawe Contract Research. Pooled analysis of Petroleum case control studies, 2006–2009, \$389,999 (\$52,064).

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).

Jolley D. Genetic Technologies contract. Genetic testing of fetal cells, 2007–2009, \$33,750 (\$11,250).

Keleher H. Eastern Access Community Health. Building capacity for health promotion at Eastern Access Community Health, 2008–2010, \$50,000 (\$25,000).

Krum H. Population Health Research Institute. Hamilton Health Sciences/McMaster University (Canada). Heart outcomes prevention evaluation – 3 Study (HOPE-3), 2008–2013, \$20,510 (\$4,180).

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

McNeil J., Phillips L. Australian Red Cross Blood Service. Clinical outcomes following the use of blood products in Australia, 2008–2010, \$872,235 (\$315,032).

Millar I., Cameron P. Victorian Trauma Foundation. Does hyperbaric oxygen therapy reduce complications and improve outcomes after open tibial fractures with severe soft tissue injury? An international multi-centre randomised controlled trial, 2006–2009, \$273,000 (\$27,300).

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

Oldenburg B., De Courten M., Wolfe R., Mdzain A. American Academy of Family Physicians Foundation. A controlled evaluation of the Australasian peers for progress diabetes program (PfP-DP) and its transferability of other countries, 2009–2011, \$1,118,700 (\$402,732).

Reid C. Inverness Medical Innovations Australia, Contract Research. Clinical trial management for the THAN study, 2008–2009, \$110,800 (\$55,400).

Sim M., Glass D. Australian Institute of Petroleum Ltd. Health watch: Case control study (Maintenance), 2007–2009, \$1,510,559 (\$218,337).

Sim M., McNeil J. Alcoa Australia Ltd. Healthwise Study, 1994–2010, \$11,879,302 (\$712,916).

Sinclair M. CRC for water quality and treatment newsletter publication. Health stream newsletter. 1995–2009, (\$61,327).

Teede H., Deeks A., Micheltore J., Allan C., Lombard C., Zoungas S. International Diabetes Federation (Bridges) Grant, STOP diabetes: Health related behaviour and risk perception in women with lifestyle related metabolic diseases at a high risk of diabetes, 2008–2010, \$398,199 (\$172,309).

Content

1. Book Chapters

2. Peer-reviewed articles

Total for 2009

Book Chapters	16
Peer-reviewed articles	320

Book Chapters

Archer, M. S. and Dodd, M. J. (2009). ‘Medico-legal investigations of atrocities committed during the Solomon Islands “Ethnic Tensions”’. In: Blau, S. and Ubelaker, D. H. (Eds.) *Handbook of Forensic Anthropology and Archaeology*, Left Coast Press, Inc., Walnut Creek, California, USA, pp. 388–396.

Blau, S. (2009). ‘More Than Just Bare Bones: Ethical Considerations for Forensic Anthropologists’. In: Blau, S. and Ubelaker, D. H. (Eds.) *Handbook of Forensic Anthropology and Archaeology*, Left Coast Press, Inc., Walnut Creek, California, USA, pp. 457–467.

Chen, L. and Tonkin, A. M. (2009). ‘Absolute risk assessment in the general population’. In: Tonkin, A. M. (Ed.) *Therapeutic Strategies in Lipid Disorders*, Clinical Publishing, Oxford, UK, pp. 155–176.

Drummer, O. H. (2009). ‘Road safety effects of prescription drugs in the older driver’. In: Odell, M. (Ed.) *Older Road Users Myths and Realities, A Guide for Medical and Legal Professionals*, Lawyers and Judges Publishing Company, Arizona, USA, pp. 141–155.

Drummer, O. H. (2009). ‘Epidemiology and traffic safety: Culpability studies’. In: Verster, J. C., Pandi-Perumal, S. R., Ramaekers, J. G. and de Gier, J. J. (Eds.) *Drugs, Driving and Traffic Safety*, Birkhauser Verlag AG, Basel, Switzerland, pp. 93–106.

Fredericks, B. L. (2009). ‘How the whiteness embedded in health services impacts on the health and well-being of aboriginal peoples’. In Baird, B and Riggs, D. W. (Eds.) *The Racial Politics of Bodies, Nations and Knowledges*, 1st Edition. Cambridge Scholars Publishing, Newcastle upon Tyne, UK, pp. 11–27.

Haas, S. J., Thien, F., Tonkin, A. M., Kong, D. C., Nelson, M. R., Demos, L. L., Zimmet, H. S., Krum, H., Liew, D. Y. and McNeil, J. J. (2009). ‘Clozapine-associated myocarditis and cardiomyopathy – It’s the heart that is important, not the classification’. In Bruno, P. H. and Giordano, M. T. (Eds.) *Cardiomyopathies, Effects and Treatments*, Nova Science Publishers, New York, USA, pp. 251–283.

Leder, K. S. (2009). ‘Intestinal Helminths: Strongyloides stercoralis, Ascaris lumbricoides, Hookworm, Trichuris trichiuria, Enterobium vermicularis, Trichinella, Intestinal Tapeworms, and Liver Flukes’. In Schwartz, E. (Ed.) *Tropical Diseases in Travelers*, Wiley-Blackwell, West Sussex, UK, pp. 303–315.

Leder, K. S. (2009). ‘Intestinal protozoa: Giardia, Amebiasis, Cyclospora, Blastocystis hominis, Dientamoeba fragilis, and Cryptosporidium parvum’. In Schwartz, E. (Ed.) *Tropical Diseases in Travelers*, Wiley-Blackwell, West Sussex, UK, pp. 294–302.

Lewis, B. S. (2009). ‘Taming the Rwa Bhineda after the Bali Bombings’. In: Grenfel, D. and James, P. (Eds.) *Rethinking Violence and Insecurity: Beyond savage globalisation*, 1st Edition. Routledge, New York, USA, pp. 194–207.

Odell, M. (2009). ‘Medical Review of Older Road Users’. In: Odell, M (Ed.) *Older Road Users Myths and Realities, A Guide for Medical and Legal Professionals*, Lawyers and Judges Publishing Company, Arizona, USA, pp. 225–238.

Odell, M. and Drummer, O. H. (2009). ‘Older drivers killed on the road – Analysis of data from coroner’s files’. In: Odell, M. (Ed.) *Older Road Users Myths and Realities, A Guide for Medical and Legal Professionals*, Lawyers and Judges Publishing Company, Arizona, USA, pp. 273–280.

Ramaekers, J. G., Berghaus, G., van Laar, M. and Drummer, O. H. (2009). ‘Dose related risk of motor vehicle crashes after cannabis use: an update’. In: Verster, J. C., Pandi-Perumal, S. R., Ramaekers, J. G. and de Gier, J. J. (Eds.) *Drugs, Driving and Traffic Safety*, Birkhauser Verlag AG, Basel, Switzerland, pp. 477–499.

Shaw, J. E. and Simpson, R. (2009). ‘Prevention of type 2 diabetes’. In: Regensteinerr, J. G., Reusch, J. E. B., Stewart, K. J. and Veves, A. (Eds.) *Diabetes and Exercise*, Humana Press, New York. 55–68.

Tapp, R., Shaw, J. (2009). ‘Epidemiology of diabetic neuropathy’. In: Tesfaye, S. and Boulton, A. (Eds.) *Diabetic Neuropathy*, Oxford University Press Inc., USA, pp. 1–8.

Tonkin, A. M. (2009). ‘The enhanced evidence base and translation into improved outcomes’. In: Tonkin, A. M. (Ed.) *Therapeutic Strategies in Lipid Disorders*, Clinical Publishing, Oxford, UK, pp. 245–261.

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

Abbott, J. H., Robertson, M. C., McKenzie, J. E., Baxter, G. D., Theis, J-C. and Campbell A. J. (2009). ‘Exercise therapy, manual therapy, or both, for osteoarthritis of the hip or knee: a factorial randomised controlled trial protocol’, *Trials*, 10(11), 1–12.

Abramson, M. J., Benke, G. P., Dimitriadis, C., Inyang, I. O., Sim, M. R., Wolfe, R. S. and Croft, R. (2009). ‘Mobile telephone use is associated with changes in cognitive function in young adolescents’, *Bioelectromagnetics*, 30, 678–686.

Absetz, P., Oldenburg, B. F., Hankonen, N., Valve, R., Heinonen, H., Nissinen, A., Fogelholm, M., Talja, M. and Uutela, A. (2009). ‘Type 2 diabetes prevention in the real world: three-year results of the GOAL lifestyle implementation trial’, *Diabetes Care*, 32(8), 1418–1420.

Adamides, A. A., Cooper, D. J., Rosenfeldt, F. L., Bailey, M. J., Pratt, N. M., Tippet, N. J., Vallance, S. and Rosenfeld, J. V. (2009). ‘Focal cerebral oxygenation and neurological outcome with or without brain tissue oxygen-guided therapy in patients with traumatic brain injury’, *Acta Neurochirurgica*, 151(11), 1399–1409.

Adamides, A. A., Rosenfeldt, F. L., Winter, C. D., Pratt, N. M., Tippet, N. J., Lewis, P. M., Bailey, M. J., Cooper, D. J. and Rosenfeld, J. V. (2009). ‘Brain tissue lactate elevations predict episodes of intracranial hypertension in patients with traumatic brain injury’, *Journal of the American College of Surgeons*, 209(4), 531–539.

- Ademi, Z., Liew, D., Chew, D. P., Connor, G., Shiel, L. M., Nelson, M., Soman, A., Steg, G. P., Bhatt, D. L. and Reid, C. M. (2009). 'Drug treatment and cost of cardiovascular disease in Australia', *Cardiovascular Therapeutics*, 27, 164–172.
- Allender, S., Gleeson, E., Crammond, B. R., Sacks, G., Lawrence, M., Peeters, A., Loff, B. and Swinburn, B. A. (2009). 'Moving beyond 'rates, roads and rubbish': How do local governments make choices about healthy public policy to prevent obesity?', *Australia and New Zealand Health Policy*, 6(20), 1–8.
- Au, L., Byrnes, G., Bain, C. A., Fackrell, M., Brand, C., Campbell, D. A. and Taylor, P. G., 'Predicting overflow in an emergency department', *IMA Journal of Management Mathematics*, 20(1), 39–49.
- Barber, M. N., Staples, M., Osborne, R. H., Clerehan, R. A., Elder, C. and Buchbinder, R. (2009). 'Up to a quarter of the Australian population may have suboptimal health literacy depending upon the measurement tool: Results from a population-based survey', *Health Promotion International*, 24(3), 252–261.
- Barr, E. L., Boyko, E. J., Zimmet, P. Z., Wolfe, R. S., Tonkin, A. M. and Shaw, J. E. (2009). 'Continuous relationships between non-diabetic hyperglycaemia and both cardiovascular disease and all-cause mortality: The Australian Diabetes, Obesity, and Lifestyle (AusDiab) study', *Acta Diabetologica*, 52(3), 415–424.
- Barr, E. L., Tonkin, A. M., Welborn, T. A. and Shaw, J. (2009). 'Validity of self-reported cardiovascular disease events in comparison to medical record adjudication and a statewide hospital morbidity database: the AusDiab study', *Internal Medicine Journal*, 39, 49–53.
- Bauman, A., Bull, F., Chey, T., Craig, C. L., Ainsworth, B. E., Sallis, J. F., Bowles, H. R., Hagstromer, M., Sjostrom, M., Pratt, M., Colodrero, G. D., Bazan, N., Kunic, H., Merom, D., Smith, B. J., De Bourdeaudhuij, I., Lefevre, J., Philippaerts, R., Matsudo, S. M., Matsudo, V. R., Cameron, C., Yang, L., Hua, F., Gomez, L. F., Fromel, K., Mitas, J., Macfarlane, D., Bacon-Stone, J., Reddy, S. K., Joshi, P., Goenka, S., Prabhakaran, D., Katsumara, D., Murase, N., Volbekiene, V., Baubliene, R., McLean, G., Carr, H., Tomten, H., Anderssen, S., Sardinha, L., Mota, J., Al-Hazzaa, H. M., Serra Majem, L., Roman, B., Bergman, P., Liou, Y. M., Hung, Y.-T. and Hipp, D. (2009). 'The International Prevalence Study on Physical Activity: Results from 20 countries', *International Journal of Behavioral Nutrition and Physical Activity*, 6(21), 1–11.
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# 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 SPHPM

## Deputy Head of Divisions within SPHPM

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,  
GDipOccHyg, PhD, FAFOM, 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,  
FAAAI Research methodology

## Heads of Departments within SPHPM

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 Keleher; 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, FACCP, FJFICM

Rachelle Buchbinder; MBBS (Hons), MSc (Clin Epi),  
PhD, FRACP

Robert Burton; MBBS, BMedSci, PhD, MD, BA

Flavia Cicuttini; MBBS (Hons), MSc, PhD, DHTM,  
FRACP, FAFPHM

David (Jamie) Cooper; MBBS(Flinders), MD(Adel),  
FRACP

Joseph Ibrahim; MBBS, GradCertHigherEd, PhD,  
MRACMA, FAFPHM, FRACP

Henry Krum; MBBS, PhD, FRACP, FCSANZ

Brian Oldenburg; BSc(Hons), MPsy, 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, MRACP, 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

Karin 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, MAppSci, GDipQuanMeth, FAIOH, PhD  
Neville Betts; BA, GDipOccHazMan, MBA, CFSIA  
Angela Brennan; RN  
Beverley Copnell; RN, RSCN(UK), BAppSc, PhD  
Carl Costolloe; BSc, MEng  
Leanna Darvall; LLB, PhD  
Lisa Demos; BPharm, GDipHospPharm, PhD  
Diem Dinh; BAppSci(Hons), PhD  
Andrea Driscoll; RN, MEd, MN, PhD  
David Elder; MBChB, DGM, MRCGP, GradDipOccHlth, MPH, FAFOM  
Sue Evans; BN, GDipClinEpi, PhD  
Nadine Ezard; PhD  
David Fish; MBBS, PAFOM, FAFPHM  
Bronwyn Fredericks; DipT, BEduc, MEd, MEdStudies, PhD, JP  
Belinda Gabbe; MAppSc, BPhysio, PhD, Mbiostat  
Deborah Glass; MA, MSc, DipOccHyg, PhD, COH  
David Goddard; BMedSc, MBBS, DOH, FAFOM, 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), MPsy, PhD  
Helen Kelsall; MBBS, MPH, MHIthSci (PHP), FAFPHM  
Elizabeth Kennedy; BA, LLB(Hons), LL.M(Melb), GradDipHealthMedLaw  
Karin Leder; MBBS(Hons), FRACP, MPH  
Charles Livingstone; BA, GradDipEconHist, MEc, PhD  
Dianna Magliano; BAppSc(Hons), PhD  
Kelly Makarounas-Kirchmann; BEC, MEC  
Joanne McKenzie; BSc, DapStat, MSc  
Alistair Nichol; MBChB, BAO, DipMan, FRCARCSI  
Denise O'Connor; BAppSc(OT)(Hons), PhD  
Alice Owen; BSc(Hons), PhD  
Rhian Parker; PhD  
Anna Peeters; BSc, PhD  
Louise Phillips; BSc(Hons), MPH, PhD  
Deborah Roberts; MBA, MPH, PhD  
Kathlyn Ronaldson; BSc, MSc, Dphil  
Louise Shiel; BSc, GradDipAppSci, GradDipEd(Sec)  
Martha Sinclair; BSc(Hons), PhD  
Benjamin Smith; GCHE, BSW(Hons), MPH, PhD  
Margaret Staples; DipAppSci, BBS(Hons), MSc, PhD  
Christopher Stevenson; BSc(Hons), MSc, Dphil

Robyn Tapp; Dip(ChildStud), BA(Psych&PsychPhys), GradDip(HealthStats), PhD  
Bing Wang; BSc, MSc, PhD  
Andrew Westbrook; MB, BAO, BCh, FCARSI, JFICM  
Owen Williamson; MBBS, GDipClinEpi, FRACS  
Anita Wluka; MBBS, PhD, FRACP  
Robyn Woods; BSc(Hons), PhD  
Deborah Zion; BA(Hons), MA, PhD  
Belinda Gabbe; MAppSc, BPhysio, PhD, NHMRC CDA  
Andrew Joyce; BA(Hons), DPsych (Health), Dip Ed (primary)

## Lecturers and Research Fellows

Omar Abdulwadud BPH, DipEpiBio, PhD  
Janette Agg; BSc GradDipDP, MMgt(Tech), GCHE, MACHI  
Carolyn Allan; MBBS (Hons) DRCOG(UK) FRACP, PhD  
Nick Andrianopoulos; MBBS, Mbiostat  
Emma Ashton; BAppSc(Hum Biol), PhD  
Anna Barker; PhD  
Baki Billah; PhD, MAS  
Dominique Bird; DM, MHS  
Jo Bird; PhD, BA(Hons), LLB  
Elizabeth Bishop; LIB, BA  
Marije Bishop;  
Jill Blackman; BA(Psych), GradDipBHlth, PhD  
Catriona Bradshaw; MBBS(Hons), DipVen, FACsSHM  
Daniella Brasacchio; PhD  
Sue Brennan; BSc(Hons), GradDipEd  
Emma Bruce; BAppSc(Health Promotion) (Hons), PhD  
Brad Crammond; BA (Hons), LLB (Hons), LLM  
Belinda Crockett; BA, BAppSc(Health Promotion) (Hons), PhD  
Miranda Cumpston; BA(Hons), MPH  
Andrea Curtis; BSc(Hons), PhD  
Amanda Deeks; BEd, ARCL, GradDipPsych, MAPS, PhD  
Linda De Melis; PhD  
Martine Dennekamp; MSc, PhD  
Diem Dinh; BAppSci(Hons), PhD  
Simon French; BAppSc, MPH, Ph  
Koraly Giuliano; BBS, BSc(Computing)  
Fahad Hanna; PhD  
Andrew Hannaford; BEng, BSc(Hons), GradDipT  
Ruth Hannan BSc(Hons), PhD(Pharma)  
Melissa Hayden; BAppSc(Hons), PhD  
Lisa Higgins; BPhysio(Hon), MPH  
Ryan Hoy; MBBS, MOEH, FRACP  
Shelly Jeffcott; BSc Hons( Psych), PhD(comp sci)  
Renea Johnston; BSc(Hons), PhD

Nerida Joss: BAppSci, MPH  
 Andrew Joyce: BA(Hons), DPsych (Health),  
 Dip Ed (primary)  
 Alina Jovanovska: BN, Grad Cert Intensive Care  
 Andrew Kompa; BSc, PhD  
 Louisa Lam; RN, BHSc, GDip(Coronary Care), MPH  
 Michelle Liu;  
 Cate Lombard; BSc, GDipDiet, PhD  
 Judy Lowthian; BAppSc(SpPath), LMusA, MSPAA, MPH  
 Ewan MacFarlane; BSc, MPH  
 Haider Mannan; BStat(Hons), MStat, MEpid, PhD  
 Dean McKenzie; BA(Hons)  
 Kathy McConell; APD, AN, BSc, MND, MSc  
 Rosemary McGinnes; BSc(Hons), GradDip  
 Epi Biostat, DHSc  
 Seema Mihrshahi; PhD  
 Marie Misso; BSc(Hons), PhD  
 Lisa Moran; BSc(Hons) BND, PhD  
 Siouxzy Morrison; GDipAdvNurs, BN  
 John Oldroyd;  
 Emily Parker; PhD  
 Eldho Paul: BSc, MSc  
 Ville Pettila;  
 Loretta Piccenna; BSc(Hons), PhD  
 Michaela Riddell;  
 Emma Ridley; BND  
 Samantha Rizak; BA, BASc, MSc  
 Juliana Roos; BSc, GradDip(Clin Pharma),  
 GradDip(Mgmt), PhD  
 Philip Scotney; BA, MSc, PMP, MBSc  
 Susan Shortreed: PhD  
 Georgia Soldatos; MBBS, FRACP, PhD  
 Mehrnaz Shoustarian; BEng, MBiomedEng, PhD  
 Claudia Slegers; PhD  
 Margaret Stebbing; RN, DipAppSci, MPH  
 Gillian Syres; RN, BA, GDip(AdvNursing)  
 Nikos Thomacos: PhD (Psychology), BA(Hons)  
 (Psychology), BBus(Economics)  
 Tari Turner; BSc(Biomed), GradCerBiostats,  
 MBus(eBusandComm)  
 Donna Urquhart; BPhysio(Hons), PhD  
 John Varigos; BSc(Hons)  
 Amanda Vincent; MBBS BMedSc, FRACP, PhD  
 Colin Wood: PhD  
 Elisa Wood; GDipEpi, MAAppSc  
 Anita Wluka; MBBS, PhD, FRACP  
 Sophia Zoungas; MBBS(Hons), FRACP, PhD

## Research Staff

Anastasia Adrahtas;  
 Margaret Anderson;  
 Alison Beauchamp; BHSci, MPH, CCNCert, RN  
 Katherine Beringer; BBNSc(Hons)  
 Molly Bond; BBiotech(Hons)  
 Margaret Brand; MPH, RN, Becon  
 Vibhasha Chand; BBMed Sci (Hons)  
 Lisa Curran: RN, BhlthSci  
 Christina Dimitriadis; BappSci  
 Anthony Del Monaco; BSc(Hons), GDipComp, MPH  
 Basia Diug; BBiomedSc(Hons)  
 Karen Duve; DipGenNursing  
 Kristine Egberts: BBiomedSc(Hons)  
 Amy Finlay; BHlthSci/BA  
 Kristian Forbes; BSc  
 Rosanne Freak-Poli; BSc, BhealthSci  
 Melanie Gibson; BCA, BSc(Hons), MrepSci  
 Kathryn Hale; BEd, BSc, PhD  
 Judy Hankin; BA(Psych), RN  
 Nino Hay; BIS  
 Alison Hayes; RN  
 Pamela Hayes; BSc  
 Pei-Yu Ho:  
 Molla Huq; BSc(Hons), MSc  
 Kimberlery Irwin: GradDip(ClinEpi), RN  
 Cheryl Laurie  
 Philippa Loane; BBMedSci  
 Rosemary McGinnes; BSc(Hons), GradDip,  
 EpiBiostat, DHSc  
 Susan McLellan; RN, GradCert(Emerg)  
 Judith McInnes; BSc(Hons)  
 Susan Montgomery RN  
 Kevin Morris; MEng, FIEAust, CPEng  
 Emily Mulholland; BA, BSc  
 Bridget Murphy  
 Kerry Murphy; BA, GradDipAppSocPsych,  
 GDipIM(Librarianship), PhD  
 Vina Nguyen; BBiomedSc(Hons)  
 Jennifer O'Connor; BexcSci  
 Joanne O'Toole; BAppSci(Hons), MBA, PhD  
 Kei Owada; MPH, BappSc  
 Matthew Page; BBSc(Hons)  
 Julie Playfair  
 Kunnaj Pooksawongsin; MIT, Bcomp  
 Megan Rollo; BAppSci, MHlthSci(Nutr&Diet)(Hons)  
 Rebecca Ryan; BSc(Hons), PhD

Rosa Schattner; BEc, MPH  
 Nikita Schembri; GradDip(PHlth), BSc(Pharm)  
 Marina Skiba; BEd(Sec)  
 Anne Sutherland; RN, RM, AdCertMgmt, GdipOccEH  
 Louise Turnour: GradDip(HlthEd), RN  
 Yuanyuan Wang; MMed, MBBA  
 Kathleen White: RN  
 Douglas Wong; BappSci  
 Ella Zomer; B BIOMEDSCI (HONS)  
 Carla Renwick; BA, BSc

### Clinical Scholars and Consultants

Kelly Allen; BSci(Hons) GradDipEpid&Biostats MPH  
 MhlthSci  
 (PubHlthPract), Clinical Effectiveness Consultant  
 Claire Harris; MBBS, MSc(PubHlth)  
 GradDipChildDevelopment,  
 FAFPHM, Director, Centre for Clinical Effectiveness  
 Jo Wainer; PhD, MA, Director, Gender and Medicine  
 Research Unit

### Professional Staff

Julianne Awad  
 Graeme Dickenson  
 Finance manger  
 Marie Radegonde  
 HR Manager  
 Colin Fee: ITIL, V3, Novell  
 IT Manager  
 Waranon Buranasiri; MIT, Baccnts  
 Allison Byrnes  
 Administrative Officer  
 Rosalie Clementson  
 Haemostasis Registry  
 Sabina Davey  
 Front Office Administrator  
 Donna Duyvestyn; Cert IV (WorkTrainandAssessment)  
 Training Administrator  
 Kathryn Eadie  
 Project Coordinator  
 Elissa Farrell  
 Postgraduate Admin Officer Senior Clinician  
 Jo-Ann Giovannoni  
 Administrative Officer  
 Suzy Giuliano  
 Administrative Officer  
 Jin Leng Graham; BA  
 Desmond Gul; BSc  
 Project Coordinator, International Public Health Unit

Marie Garrubba; BAppSci (HlthSci), Clinical Effectiveness  
 Project Officer  
 Kaylene Hanlon; Undergraduate and Doctoral  
 Administrator  
 Jo Harwood; Administrative Officer CCRE Therapeutics  
 Ajitha Paldano  
 Administrative Assistant/Data Entry  
 Henry Ko; BEng(Medical)(Hons)  
 Clinical Effectiveness Senior Project Officer  
 Christine Kirkham  
 HOD Office Manager  
 David Khuu  
 IT support  
 Cindy Manukonga; BVA  
 Executive Assistant to Director  
 Vicki McAuliffe; Exec Cert Bus (Mgt)  
 Manager, Department of Forensic Medicine  
 Steven McDonald; MA, GradDipIntHealth  
 Co-director/ Project Manager  
 SEA-ORCHID  
 Peta McLaughlin  
 Project Officer CREPS  
 Jane Miosge; BA, Gdip  
 Administrator, MonCOEH  
 Mimi Morgan; BA  
 Pre-hospital, Emergency and Trauma Unit Manager  
 Vanessa Murray; BA(Hons)  
 Centre Manager, MonCOEH  
 Pauline O'Brien  
 Executive Assistant to Department Head  
 Patricia O'Brien  
 Administrative Officer, DHSS  
 Maida O'Keefe  
 Postgraduate teaching Administrator  
 Belinda O'Shea  
 Personal Assistant  
 Catherine Pound  
 Centre for Research Excellence in Patient Safety  
 Adminstrative Officer  
 Jane Predl; GradDipBusMgt, LLB (Hons), BA Research  
 Manager  
 Martine Radegonde  
 Human Resources  
 Jane Reid; RGN GradDipHlthSci(HlthProm&HlthEd),  
 GradDipAppSci(HlthStats)  
 Clinical Effectiveness Senior Project Officer

Tania Richter;  
Office Manager, Centre for Obesity  
research and Education (CORE)

Glenis Rickard  
Administrative Officer

Sally Ross; BBus(Econs&FinMgt) GradDip(AppFin  
Administrative Assistant

Nicole Shears  
Administrative Officer

Lilya Sher  
Administrative Assistant

Keith Stockman; BSc MBA  
Project Manager

Julia Veitch; BA(Hons), GDipLib&InfoMgt, MSc(ScCom)  
Marketing and Communications Officer

Catherine Voutier; BSocSci (Lib&InfoServ) MinfoMgt  
Information Retrieval Officer

Nicholas Walker; DipTeach(Prim), GradDip(SpecEd),  
DipInfoTech IT Manager

Renay Wallis; BA  
Finance and Human Resource Officer

Cara Waller; BA(DevStud)/BHlthSci(HlthProm)  
Clinical Effectiveness Project Officer

Rebecca Watson  
Project Coordinator, International  
Public Health Unit

Susan Wilson; BSc(Hons)MedEng, MRes(BiomechEng)  
Engineer

Visiting Students and Academics  
Dominik Rachon

## Adjunct staff 2009

### Adjunct Professors

John Catford Prof John Catford MA, MSc, MBBChir, DCH, MHSM, FFPHM, FRCP, DM, FAFPHM

Lyndsay Grayson MBBS, MD, MSc, FRACP, FAFPHM

Nicholas Crofts; MBBS, MPH, FAFPHM

Kit Fairley; MBBS, FRACP, FAFPHM, Ph D, FACHSHM

Graham Giles; CertEd, BS, MS, PhD

David Hill; AM, PhD

Steve Hudey FRSC, MSc, PhD, DSc(Eng), Peng

George Jelinek: MBBS, FACEM, DIP HYD MED, MD, Advance Card Life Supp, Advanced Trauma Life Supp

Allan McLean: BMEDSc(Med), MBBS, PhD, Grad Cert(Techn Mgmt), Grad Dip(Techn Mgmt), Grad Cert(MBA), Grad Dip(MBA), MBA(executive),

Rob Moodie; MBBS, MPH, F(FPHM)RACP, FRACGP, FAIM

Edmund Mulholland

John Reeder: PhD, MSc,

Bin Nordin Rusli: MBBS, MPH, PhD, OHD, FFOM

Richard Southby; PhD, MPA, FCHSE, FCLM (Hon), FFPH, FRSM, FRIPH

Simon Stewart; BA, RN, BN, GradDipEd, PhD

Michael Grayson;

Robert Power; BSc(Econ), PhD, PGCE

Vernon Plueckhahn;

Meg Morris; BAppSci(Phty), MAppSc, GradDip(Geron), PhD FACP

Lawrence Beilin; MD, FRACP, FRCP

### Adjunct Associate Professors

Terri Allen; BSc, PhD

Stephen Bernard; MBBS, FACEM, FJFICM

John Clements; MBBS, MSc, DCH, DObst, LRCP, MRCS, FAFPH, MFPH, MCCM

Simon Fisher; MBBS, MBA

Robyn Guymer; MBBS, PhD, FRANZCO

Graeme Hart; MBBS, FANZCA, FJFICM

Margaret Hellard; MBBS FRACP PhD, FAFPHM

Kim Hill; PhD

Peter Hodsman; MBChB, MD, MRCP(UK), FRCP, FRACP, MAICD

Jeremy Millar: BMedSci, MBChB, FRANZCR, CertBiostats, CertHlthEcon

Harry Mond; MBBS MD FRACP FACC FCSANZ FHRS

John Myburgh; MBBCh, PhD, DA(SA), FANZCA, FJFICM

Julie Pasco; BSc(Hons), PhD

Jonathan Shaw; MD, MRCP(UK), FRACP

Philip Stokoe; MBBS, DPH, MSc, MPH

Merlin Thomas; MBChB, PhD, FRACP

Theo Vos; MD, MSc, PhD

Stephen Bolsin; BSc, MBBS, FRCAL, RACMA, ANZCA

Elton Edwards; PhD, FRACS, RACS

Frances Fisher

Robert Salamonsen; MBChB, MD, FJFICM, Cert Hyp, Med

Alan Wolff; MBBS, Dip RACOG, FRACGP, AFCHSE, MBA, MRACMA, MD

Cecily Freemantle

David Ranson



### **Adjunct Professorial Fellows**

Mark Wahlquist: MD, FRACP, FAFPHM

Michael Wooldridge: MBA, MBBS, BSc, RACP, RACMA

### **Adjunct Associates**

Michael Ackland MBBS (Melb), MPH(Monash),  
FAFPHM Anne Bruce: RN

Heather Buchan: MSc, Dip(Comm Hlth), MB, ChB,  
BSc(Human Bio)

Shelley Cox; BA, BAppSci(Hons), PhD

Alex Currell; BE, MEngSc, BA

Caroline Finch; BSc(Hons I), MSc, PhD, FASMF, ASTAT

Masha Fridman BSc(Hons), GradDip, MSc, PhD

Suzanne Garland MBBS, FRCPA, MASM

Rosie Gehrig-Mills: RN, Grad Cert(CritCare), ADA(AppPhot

Guy Haller; PhD

Kim Hill; MBBS, MHP, FRACMA

Jan Hoving; PhD

Errol Katz: MBBS, LLB, MPP(Public Policy)

Bruce Levy; BEc, LLB

Ian Millar: MBBS, FAFOM, Cert DHM

Susan Montgomery: RN

Mark Nelson: MBBS(Honours), GradDip Fam Med, MFM,  
PhD, FRACPG, FAFPHM

Alex Proudfoot: BSc(Hons), MEng, BM, BCh

Amanda Thrift; BSc(Hons), PhD

### **Adjunct Senior Research Fellows and Research Fellows**

Melanie Archer

Melissa Atchison

Melissa Baker

Lynda Berends

Jochen Beyer

Michael Blake

Soran Blau

Peter Campbell

Leslie Cannold; Phd, M.Bio, BSc(Psychology)

Fabrizio Carinci

Andrew Davies: MBBS, FRACP, FJFICM,

Janice Davies; MBA, GradDip(HRM), PhD, BSc(Honours)

Malcolm Dodd; MBBS, DipMLT AAIMLT, FACBS,  
FRCPA, MACLM

Terence Donald; MB, BS, FRACP

Rodger Drew; D.A.B.T

Stephen Duffy; MBBS(Hons), PhD, FRACP, MRCP,  
FCSANZ

Julian Elliott;

Marsha Fridman; B.Sc (Hons. Physiology),  
GradDip(Biostatistics), MSc(Biochemistry), PhD

Carol George; BSc, MBus(IT), GradDipEpiBiostat

Dimitri Gerostamoulos

Natalie Gray MBBS(Hons), BSc, LLB(Hons), FAFPHM

Deepak Haikerwal; BSc, MBBS, FRACP, PhD

Dadna Hartman; BSc(Hons), PhD, Grad Cert Pub

Marisa Herson; MD, PhD

Peter Higgs; BSW, MA, PhD

Anthony Hill

Frances Huxham; PhD, GDip(HealthResMeth), DipPhysio

Daryl Jones: MBBS, BSc(Hons), FRACP, FJFICM

Erol Katz; MBBS, LLB, MPP(Public Policy)

Michael Keane;

Narges Khanjani; MD, PhD

Stuart Kinner; BA(Hons), PhD

Deepak Kotecha; MBBS

Vicki Kotsirilos; MBBS(MON), FACNEM

Jodie Leditschke; PhD

Michael Levy

David Low: BA(SocSci), GradDip(Info Studies),  
MEnvSc, PhD

Mathew Lynch

Anna Murphy; BHIthSci(Hons), BAppSci(HM), PhD

Deirdre Murphy; PhD

Morris Odell; BE, MBBS

Christopher O'Donell

Robert Oelrichs; BMSc, MBBS, PhD, MPH, MD

Vanita Parekh

Helen Parker

Sarah Parsons

Ian Patrick: BA(Paramedic)

David Pilcher MBBS, MRCP(UK), FRACP, FJFICM

Mark Polizzotto: B Med Sci, MBBS, RACP, RCPAE

Stephanie Poustie MPH, BN, CritCareCert.

Samia Radi MD, GradDipSportsMed, GradDipOHS,  
MSc, PhD

Samantha Rizak: BA, BAppSc, MSC

Shelley Robertson; MBBS, LLB, FRCPA, DMJ, FACLM,  
DAvMed

Linda Schachter; MBBS, FRACP

Mehrnaz Shoushtarian; MBiomedEng, PhD

Harley StantonMark Stooove: BApp Sci (Hons),  
Grad Dip(ED), PhD

Phillip Swann

Kathy Traianedes

Allison van Lint

Margaret Ward Curran; MBChB, MPH, FRCPATH FFPM

Andrew Westbrook; MB, BAO, BCh, FCARSI, JFICM

Angela Williams  
Bethia Wilson; BA, LLB  
Noel Woodford;  
JulieYallop; NZRN, PhD

#### **Adjunct Senior Lecturers**

Campbell Aitken; PhD, BSc(Hons)  
Peter Allen  
John Amarena; FRACP  
Kathryn Antioch; BA(Hons), MSc, AFCHSE, CHE, PhD  
Emilio Badoer; BSc(Hons), PhD  
Ronald Borland; BSc(Hons), MSc, PhDDr  
Pauline Branley; MBBS, PhD, FRACP  
Nicolas Clark; MBBS, GradDipClinEpi, FACHAM  
Ben Coghlan; MBBS, MPH&TM, MAppEpid  
Mick Creati; MBBS, FRACP  
Barbora; De Courten MD, PhD  
Peter Deutschmann; MBBS, FRACS, MPrimCare  
Sherene Devaneson; MBBS, Dip (Obs) RACOG, FRACMA,  
FCHSE, FAIM, FHKCCM  
Tim Driscoll; BSc(Med) MBBS MOHS PhD  
FAFOM FAFPHM  
David Eccleston MBBS, FRACP, MMedSci(Clin Epi)  
Andrew Haydon; MBBS, PhD, FRACP  
Bruce Hocking; MBBS, FRACGP, FAFOM  
Wendy Holmes; MBBS, MSc  
Karen Jandeleit-Dahm; MD, PhD  
Don Kay; SBHA, MHA, MSc  
Helen Kemp; BA, MBA  
Peter Kruger; MBBS, BSc (hons), FANZCA, FJFICM  
Trish Livingston; BA(H), PhD  
Kevin MacDonald; BMedSc, MBBS, FAFOM  
Caroline Marshall; MBBS, PhD, FRACP  
Roderick McRae; BMedSc (Hons), MBBS(Hons), FANZCA,  
FJFICM, MBioeth, JD, GDLP, PGDipEcho  
Peter New; MBBS, MClinEpi, FAFRM (RACP)  
David Newman; MBBS, DipAvMed, PhD  
Richard Osborne; DipApplBiol, BSc, PhD  
Ian Patrick BA(Paramedic Studies)  
Anne-Marie Pellizzer; MBBS, FRACP, PhD  
Lisa Renkin BA, MPH  
Anne Reutens; MBBS, AMus, FRACP, PhD

Karen Smith; BSc(Hons), GDipEpi&Biostats,  
GradCertExec BA, PhD  
Beverley Snell; MappSc  
Anthony Stewart; MBBS, MAE  
Peter Stow; MBBS FRCA FJFICM  
Paul Talman; BSc, MBBS, FRACP, PhD  
Sara Watson; MBChB, BSc, MHA, FRACMA  
Joanne Williams; BSc(Hons), MAppEpi, PhD  
Owen Williamson; MBBS, GradDipClinEpi,  
FRACP, FAOrthA  
Alan Wolff; MBBS DipRACOG FRACGP  
MBA AFCHSE MRACMA, MD  
Michael Wright; BEc(Hons), MSc Econ, Dip, AICD  
Cheng-hon Yap; MBBS, MS  
Adjunct Lecturers  
Tai-Juan Aw; MBBS, FRACP  
Malcolm Brown; MBBS, DipOccHyg, FAFOM  
Shin Choo; BPharm, GradDipHosPharm, CertHlthEco  
Noel Cranswick; MBBS, B Med Sc, FRACP  
Margaret Curran; MBChB, MPH, FRCPath, FFPM  
David Dunstan; PhD  
Simon Fisher; MBBS, MBA  
Robyn Horsley; MBBS FAMAS FAFOM (RACP)  
MPH GDip MSM  
Peter Kamen; MBBS  
Martyn Kirk; BAppSc, MAppEpi  
David Kotzman; BMedSc(Hons), MBBS, MPH,  
FAFOM, FAFPHM  
Robert Lew; MBBS PhD FCSANZ FRACP  
Clement Malau; MBBS, DTM&H and MPH  
Jacqueline Martin; BAppSci (Med Lab Sci) Hons, PhD  
Chris Morgan; MBBS (Sydney) DTCH (Liverpool) FRACP  
Clare Murphy; BEd studies, MPH,  
MHSc Practicum, MPHAA  
Lisa Natoli; MPH, Dip App Sci Nursing  
Gerard O'Reilly  
Raj Perera; MBBS, MSc, MD  
Priscilla Robinson; RN, BNurs, MPH, PhD  
David Weissman; MBBS, MPM, FRANZCP  
Mary Wyatt; MBBS (Hons) MPH, Grad Cert MSM, FAFOM

#### **Adjunct Assistant Lecturers**

Juliet Gale BA(Hons), MLib

#### **Adjunct Clinical Teacher**

Andrew Pranckunas; MBBS



