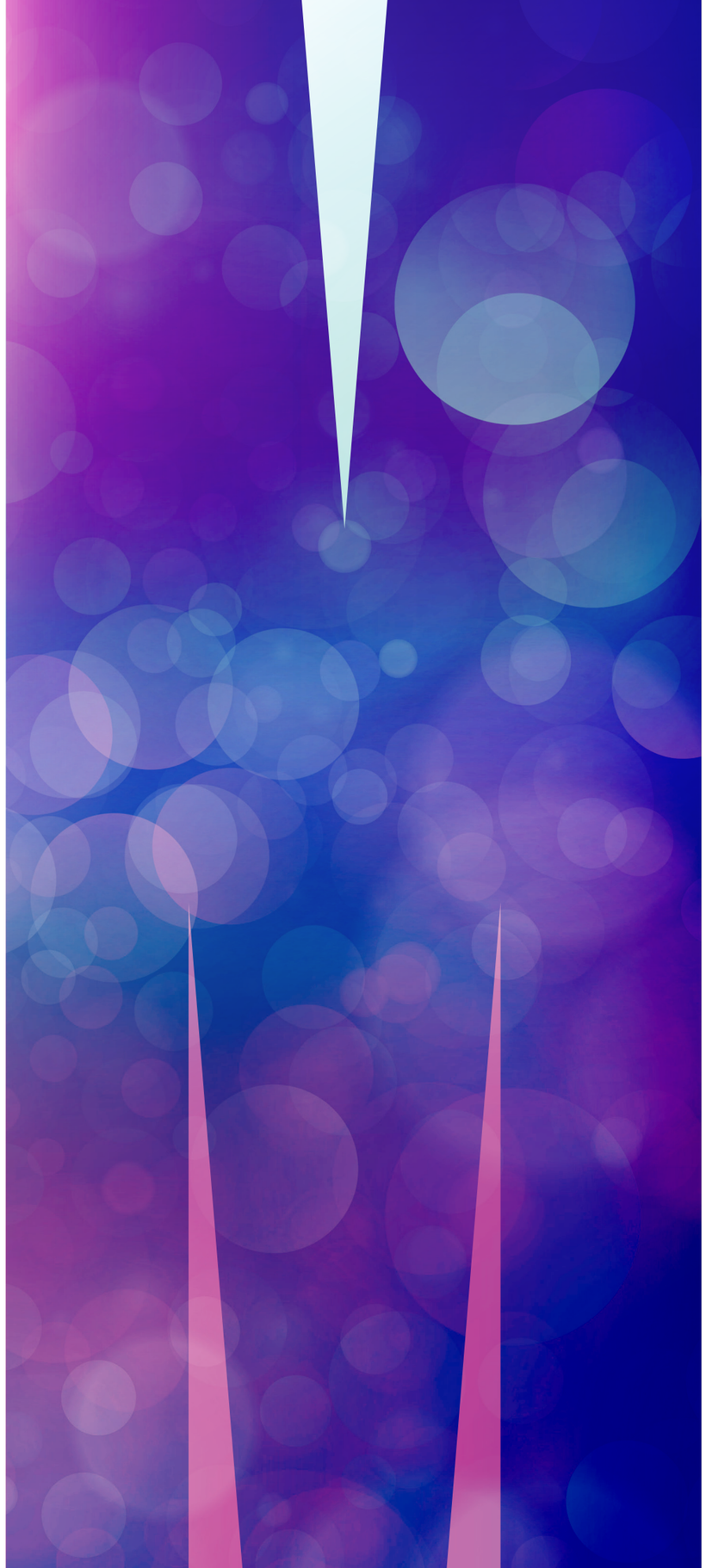
MONASH University

EASTERN HEALTH CLINICAL SCHOOL

2025
ANNUAL REPORT



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HEAD OF SCHOOL REPORT

It is a privilege for me once again to provide the Annual Report for Eastern Health Clinical School (EHCS) for 2025.

EHCS is an outstanding example of how universities and health services can work together to produce something greater than the sum of its parts. EHCS is a collaboration between Eastern Health and Monash University, and also partners with Deakin University for EHCS Medical Student Programs. We bring together a community of clinicians, academics, students, and professional staff, all with the shared purpose of providing consistent excellence in education, training, and research. EHCS also provides opportunities and systems to enable goals to be achieved for all stakeholders that would not otherwise be possible.

Eastern Health is a highly valued partner for the universities. It is one of Victoria's largest health services, and is now part of the East Metro and Murrindindi Local Health Service Network, greatly increasing its geographic catchment area and population for which it provides services. The LHSN forms an excellent framework to consider changes in clinical service design that will benefit everyone within it, including those without easy or convenient access to major metropolitan public hospitals. This also allows us to consider how we can collectively improve opportunities and quality of health professional education, vocational training, and research, and better ways to allow the wider community to participate.

Similarly, the relationship of Eastern Health with Monash University and Deakin University provides substantial benefit for the health service. Pre-registration health professional students from Monash and Deakin (and La Trobe, and other universities) undertake clinical placements at Eastern Health sites, where they gain invaluable experience in almost all areas of clinical care from neonates through to geriatrics. EHCS Medical Student Programs offers unique experiences for medical students from Monash and Deakin, and is the only metropolitan clinical school for Deakin University medical students. EHCS provides support for researchers right across Eastern Health; whether they be higher degree research students, established researchers with university links, or others within the health service pursuing Eastern Health's goal of incorporating education and research into everyday activities. EHCS aims to be inclusive, providing university appointments for key Eastern Health staff involved in academic activities. EHCS also provides and ensures access to systems needed to support education and research such as simulation resources, ethics support, project management, statistics and data analysis, underpinned by deeply effective engagement and mentorship.

This mutually beneficial model is supported by robust governance, ensuring transparency of processes, strong financial performance, and confidence for all the organisations involved. It enables and supports systems that ensure alignment with the strategic priorities of Eastern Health, and of both Monash and Deakin universities. Together we provide outstanding clinical service, literally world-leading in some instances; education and training that is proven to prepare our students for entry into their professions, and trainees into specialist practice; and research that is focussed on the communities we serve and is transformative in its outcomes. You will find many examples of these points throughout this report.

The nature of our work is relevant and impactful. We educate and train health professionals to very high standards, preparedness for practice, and levels of competency. Our research is based on the needs of our local and broader community, based on a deep understanding of the clinical needs and the underlying science; development of research questions and strategies that are able to address these key needs; performance of high-quality work; and achievement of outcomes that will be able to be implemented in order to improve life for those we serve. We work with the broader community, including other health services and academic groups, as well as community-based healthcare providers and advocacy groups. This also provides a strong framework for education and training of the next generations of clinicians and researchers, who will be essential as healthcare and societal needs evolve rapidly over coming years.

Impact can be measured in many ways. A simple metric is volume of outputs, usually academic publications. You will see figures for these later in this report. EHCS is responsible for over 90% of the academic publications from Eastern Health. However, the volume of output is insufficient; it is more important the quality of the work be very high, and that it has substantial influence on others and on healthcare policy and practice. This can be reflected in metrics like field-weighted citation index (FWCI), which is the ratio of the actual number of citations received by an output to date and the expected number for an output with similar characteristics. A FWCI of 1 is considered "world average impact." Our FWCI overall for 2020-2025 is 1.88 (Figure 1). This places us amongst the best in the world by such metrics. In the period 2019-2024, 41.6% of EHCS outputs were international, with this subgroup leading to 33,435 citations with a mean 28.2 citations per publication and FWCI of 3.33[1].

Other relevant metrics of impact that are not necessarily well captured in bibliographic databases include advice given to and used by government regarding practice and policy, or engagement in national or international research endeavours (reflected in the proportion of papers with international authorship, or leadership roles in national or international collaborations, or invitations to present at conferences). EHCS is prominent in all these areas as well.

1 SciVal; data as at 9 January 2026

Figure 1: Scholarly metrics for EHCS

	Overall 2020-2025	2020	2021	2022	2023	2024	2025*
Scholarly output	2931	471	539	474	461	468	(518)
Citations**	63,623	23,888	15,727	9968	7395	4585	(2060)
Mean citations per publication**	21.7	50.7	29.2	21.0	16.0	9.8	(4.0)
Field-weighted citation impact**	1.97	2.22	1.91	2.08	1.80	1.93	(1.88)
% outputs in top 10% of citations worldwide (field-weighted)	17.6	20.2	16.9	15.8	18.0	19.0	(18.4)
% outputs in top 1% of citations worldwide (field-weighted)	3.7	5.7	3.3	3.6	4.6	3.6	(2.6)
% publications in top 10% of journals (CiteScore)	40.5	42.7	39.0	37.7	35.3	45.1	(43.2)
% publications in top quartile of journals (Q1) (CiteScore)	68.3	62.8	65.5	63.9	61.0	71.2	(72.0)

Data per SciVal for “Eastern Health Clinical School: as at 8 June 2026.
*Data are incomplete for 2025
**Citations accumulate over time and will usually be higher for older time frames

Medical students continued to thrive in 2025. Academic outcomes were outstanding, due to the efforts of the dedicated Medical Student Programs team, and the very large number of clinical teachers who so generously provide their time and expertise to train our future doctors and leaders. Feedback from our students showed that 88% agree or strongly agree with “I would recommend EHCS to others”; 95% were satisfied or very satisfied with EHCS; and 96% agreed or strongly agreed that they had a positive learning experience. 98% felt well prepared for internship. These figures underscore the quality of medical education through EHCS, and also highlight that our students complete their time here with high levels of wellbeing. Further details are found in the Medical Student Programs section in this Annual Report.

2025 allowed us to capitalise on previous progress in terms of development of programs and recruitment of key people. Existing activities have continued to thrive and we have complemented them with new groups and new research directions. We have engaged effectively with our partners and stakeholders, and we enter 2026 well positioned to continue this forward momentum. We are very grateful to all who have contributed in so many ways. This Annual Report contains detailed descriptions of our activities, including highlights and vignettes of specific projects, and outlines our future directions.

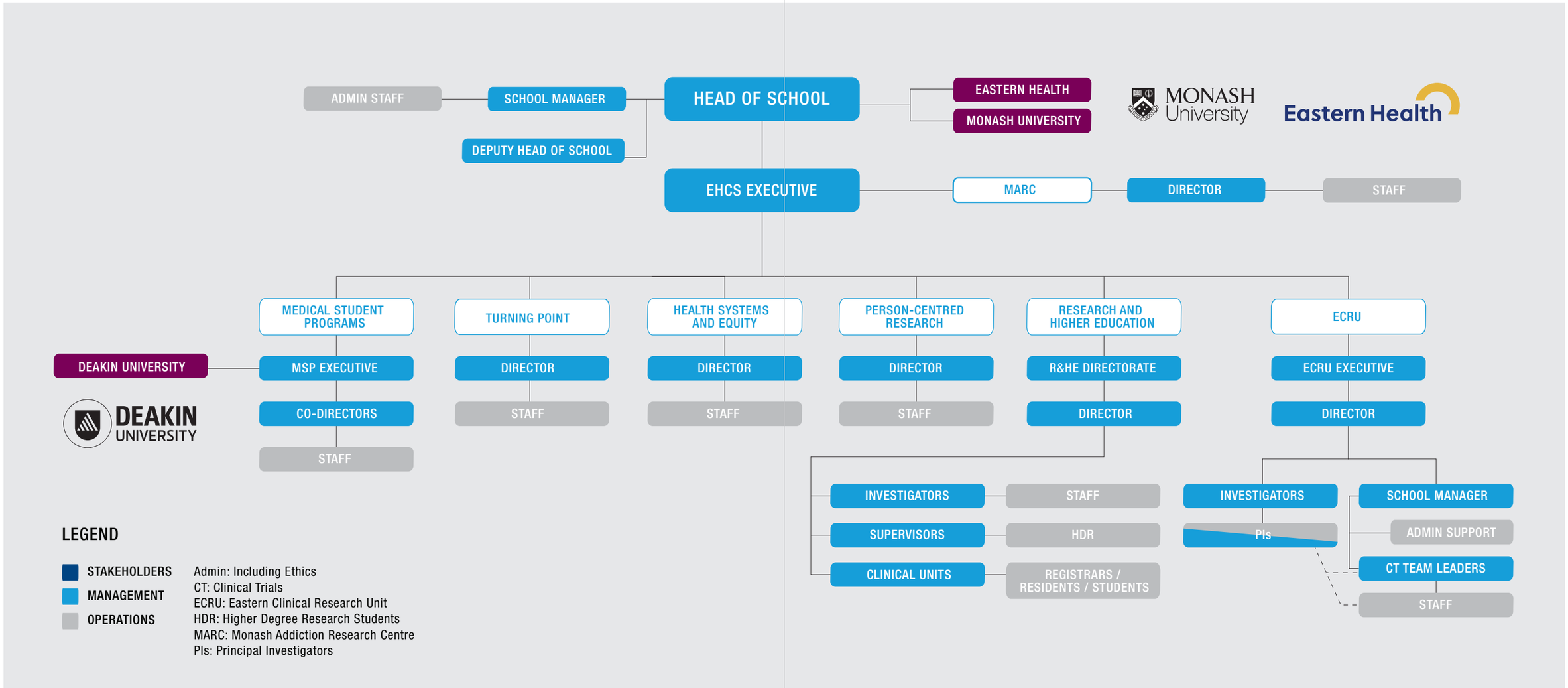
MSP students with Bunjil the Eagle, Box Hill Hospital

EASTERN HEALTH CLINICAL SCHOOL: GOVERNANCE AND OVERSIGHT

The activities of EHCS are overseen by the EHCS Executive. This comprises the Head of School, School Manager, directors of each directorate, the Professor of Surgery (Deputy Head of School), and two other Monash academics (currently Prof Lawrence McMahon and A/Prof Judy Hope).

The EHCS Executive formally meets five times per year and informally as needed. EHCS minutes are tabled at the Faculty Executive of Monash University's Faculty of Medicine, Nursing & Health Sciences. Reporting to Eastern Health takes place through the Eastern Health Institute. Medical Student Programs reports to Monash and Deakin universities, and to Eastern Health through the EHCS MSP Executive. The directorates meet regularly to ensure effective engagement of stakeholders, including staff, students, and collaborators linked to the function of each directorate. EHCS also provides central administrative support for functions such as finance, ethics, human resources, university relations; and engagement with, and reporting to, various groups within Eastern Health, other collaborators, funders, and government. Provision of these central functions simplifies or removes administrative burdens from educators and researchers, and ensures consistency in processes, documentation, and reporting.

Figure 2: EHCS organisational chart



EHCS comprises six directorates (Medical Student Programs, Turning Point, Health Systems and Equity, Person-Centred Research, Research and Higher Education, Eastern Clinical Research Unit [ECRU]); and one Centre (Monash Addiction Research Centre, located at Peninsula campus), as illustrated in Figure 2. Reports from each of these are found later in this Annual Report.

Actual full-time equivalent (FTE) staff in 2025 were: 112.26 FTE, with an overall growth of 4.5%; 6.77% Academic staff (reduction of 0.68 FTE, -9.1%); 27.9 FTE research academic staff (growth of 2.24 FTE; 8.7%); 64.8 FTE research professional staff (growth of 4.37 FTE; 7.2%); and 12.77 FTE professional and technical staff (reduction of 1 FTE, -7.7%), most of whom provide support for EHCS Medical Student Programs, the ECRU program, the laboratory group based at Box Hill, Turning Point, and MARC. Almost all staff are employed through Monash University, with some having joint appointments with Eastern Health and/or Deakin University.

The EHCS Strategic Plan 2021-2025 is illustrated in Figure 3. Review and refreshment of the plan was deferred in 2025, as Eastern Health was undertaking a review of its own strategic plan (2023-2025) and this has not yet been completed. The current EHCS plan remains well aligned with the current strategic plans for Monash, Deakin, and Eastern Health, and has provided an excellent framework to support the Eastern Health Institute structure established in 2023. EHCS has also contributed to the development of the 2025–2030 Eastern Health Education and Research Action Plan, and will be a key component of the success of this initiative.

Figure 3: EHCS Strategic Plan 2021-2025 – Strategic Themes and Goals

Strategic Theme	1. Excellence for the community	2. Excellence for the health service	3. Excellence for the university	4. Excellence for our people
Strategic Goals	1.1 Best quality clinical outcomes 1.2 Best quality clinical trials 1.3 Understanding and meeting needs 1.4 Bringing networks together	2.1 Highest quality care 2.2 Leading an integrated, community-focussed research agenda 2.3 Adding value to education and vocational training 2.4 Leveraging value from health data	3.1 Outstanding student outcomes 3.2 High quality research outcomes 3.3 Community of clinical educators 3.4 Leadership in university functions	4.1 Promoting staff and student wellbeing 4.2 Provision of support systems 4.3 Opportunities for professional growth

EHCS Executive monitors EHCS activity against each of these themes and goals. Progress against the EHCS Strategic Plan 2021-2025 during 2025 can be illustrated as follows.

EXCELLENCE FOR THE COMMUNITY

1.1 Best quality clinical outcomes. EHCS comprises individuals who are world-leading experts in their fields. The purpose of research is to improve the human condition. EHCS performs research that is directly relevant to our local community, aims to implement research findings into practice wherever possible, and tries to measure the impact of such changes. Clinical research represents best clinical practice. Top quality education leads to high-performing and high-quality health professionals. All of these aspects are critical for optimisation of health outcomes.

1.2 Best quality clinical trials. Details of EHCS clinical trial activity are found in the Eastern Clinical Research Unit (ECRU) section of this report. Eastern Health, in partnership with Monash EHCS/ECRU, undertakes clinical trials in a wide variety of specialties, and does so to a very high standard, having won awards previously for its work. This activity ensures that Eastern Health patients receive the best possible clinical care, have options for participation in research, and can do so within the region where they live. Our model also ensures that both industry-sponsored and investigator-initiated clinical trials are available through Eastern Health, recognising that industry-sponsored clinical trials may not always be focussed on the needs of the local community. Eastern Health and ECRU are therefore major contributors to clinical research in Australia, with a mix of studies that moves the field ahead in response to recognition of clinical need.

1.3 Understanding and meeting needs. A health service like Eastern Health is required to meet certain metrics and performance indicators. Its relationship with EHCS helps it to meet many of these that would otherwise be difficult to achieve. Additionally, meeting the promise of “Healthier Together” means not only improving disease-specific outcomes, but understanding the impact of disease and involvement in the health system on the overall wellbeing of individuals and the broader community; development of novel and fit-for-purpose approaches to care that take into account cultural sensitivities and social needs; and building links with other healthcare providers in the public and private sector. Another area of need is to ensure top quality training, recruitment, retention, and opportunities for world class clinicians, educators, and researchers; all core activities for EHCS.

1.4 Bringing networks together. None of us exist in a vacuum. Eastern Health has participated in significant structural change in the Victorian health system over 2025, with the formation of the East Metro and Murrindindi Local Health Service Network, and establishment of stronger links, for example with Alexandra District Health. This has led to increased and more effective services for patients in the region, such as an oncology clinic and treatment facility at Alexandra Hospital, and continued growth of the First Nations Clinic in Healesville (nangnak warr bagora). EHCS and Eastern Health are part of the Monash Partners Health Translation Network, which provides opportunities to link with other health services, research institutes, primary health, platform technologies, and grant and other funding opportunities.
The Health Systems and Equity team has a rapidly growing international program, particularly in the Asian and Western Pacific regions, aimed at women’s health, which will not only help improve outcomes in those regions but will provide opportunities for mutual benefit.

EXCELLENCE FOR THE HEALTH SERVICE

2.1 Highest quality care. 1.1 above refers to clinical outcomes. This aspect (2.1) refers to processes of health care delivery and outcomes for the health service. Highest quality care involves clear understanding, critical review, and rigorous application of governance. Engagement of EHCS in these Eastern Health processes brings academic excellence to them and facilitates creative and novel solutions that involve research methodology: understanding the current and desired states; formulating relevant and answerable questions; collection and curation of data; analysis and interpretation, including co-opting of additional expertise where necessary (e.g. health economics, statistical support); and dissemination, application, and implementation of findings.

2.2 Leading an integrated, community-focussed research agenda. Our community comprises those in our immediate geographic catchment but also extends much more widely, as our patients are often referred or travel from other areas within Melbourne, Victoria, or even interstate or internationally. Even within the local community there is substantial diversity in terms of population demographics, cultural and linguistic backgrounds, health literacy, socioeconomic status, and geographic distance from health facilities. The work we do is, and must be, relevant to those we serve. The various directorates of EHCS are actively engaged in understanding these needs and devising effective strategies to meet them. Examples include the work of the Health Systems and Equity directorate, the Person-Centred Research directorate, Turning Point, MARC, and ECRU; and Medical Student Programs and the Research and Higher Education directorate include specific initiatives to raise awareness of community needs in these areas.

2.3 Adding value to education and vocational training. Eastern Health is well known to be an excellent place to learn and to work. EHCS may be smaller, relative to other Monash clinical schools, but is characterised by highly competent educators who genuinely care for students and trainees, and are dedicated to providing an outstanding learning experience. These principles have been carried over, for example, to the Eastern Health Medical Education Committee, which frequently looks to EHCS Medical Student Programs for advice and inspiration. Senior academic clinicians are involved in teaching and supervision, and can provide a bespoke experience for students and trainees where necessary. Our robust research environment enables trainees to undertake research projects that are mandatory for advanced specialist training. The ethos is one of seamless integration of teaching and research into clinical practice, which aligns strongly with the goals of Eastern Health and the universities.

2.4 Leveraging value from health data. Data is not information. Collection of data is not research and of itself cannot improve processes or outcomes. Eastern Health is rich in data and recognises that this information comprises invaluable opportunities to learn and to improve. EHCS works closely with Eastern Health and other sources of data to identify areas of strength and areas for improvement, by formulating and answering relevant questions in ways that can be used to improve practice and outcomes. The ADaPt-EH project was an example where EHCS partnered with Eastern Health and the Digital Health CRC to turn data into interpretable and actionable information in real time. This has already helped Eastern Health meet reporting and accreditation requirements across the various National Safety and Quality Health Service (NSQHS) standards. The successor project, ADaPt 2, has now been funded and will scale up the model to demonstrate applicability in other health services and data systems.

EXCELLENCE FOR THE UNIVERSITY

3.1 Outstanding student outcomes. Various metrics over recent years show that EHCS performs very strongly in medical student education, with outstanding academic outcomes and wellbeing metrics for our students. EHCS offers a range of activities unique to our School, such as the Medical Student Programs Patient Teaching Associates (PTA) program that is very positively received by both students and patients. Similarly, MSP has instituted the Finding Meaning in Medicine program, and the Healers Art course. The Scholarly Intensive Placement (SIP) program offers a very diverse range of opportunities for Monash medical students to engage in research in the final year of their course, with many of these students continuing their engagement with Eastern Health units and supervisors well after the completion of their course; or returning to undertake research higher degrees. Many of these students are highly competitive for scholarship support, and produce work of very high quality.

3.2 High quality research outcomes. Some metrics relevant to this point are mentioned earlier in this introduction. EHCS is notable even on the international scale for the volume and very high quality of its outputs, and the impact of its research in terms of influencing other researchers and input into health policy and practice. Systems and analytic techniques developed by our researchers are available to others as resources, improving that work as well, and leading to growing opportunities for local and international collaboration. Our work frequently contributes to community discussion and development and implementation of government policy; this type of impact is not necessarily measurable by numbers of publications, citation counts, or journal impact factors (although EHCS is highly competitive by all these metrics), but can be transformative and enabling for the field as a whole. Some of the academic activities of Turning Point in particular are excellent examples, and have contributed in part to its designation in 2025 as an Eastern Health Centre of Excellence.

3.3 Community of clinical educators. EHCS education staff are highly skilled and capable. This work and its outstanding outcomes would not be possible without the generous contributions of the wider Eastern Health community and other partners, such as Epworth Healthcare and general practices. EHCS has an outstanding community of affiliates, adjuncts, sessional tutors, and other partners who provide teaching, assessment, and pastoral care support. The partnership between Monash and Deakin universities for medical students means that the best of all the institutions is available to all our students. EHCS works closely with Eastern Health simulation services, and a medical lead for simulation will commence through EHCS in early 2026, further enhancing and strengthening this community. EHCS recognises and celebrates all who contribute to these processes, including specific awards, and funding provided to the Division of Medicine, Division of General Surgery, EH Medical Staff Association, and EH Library services.

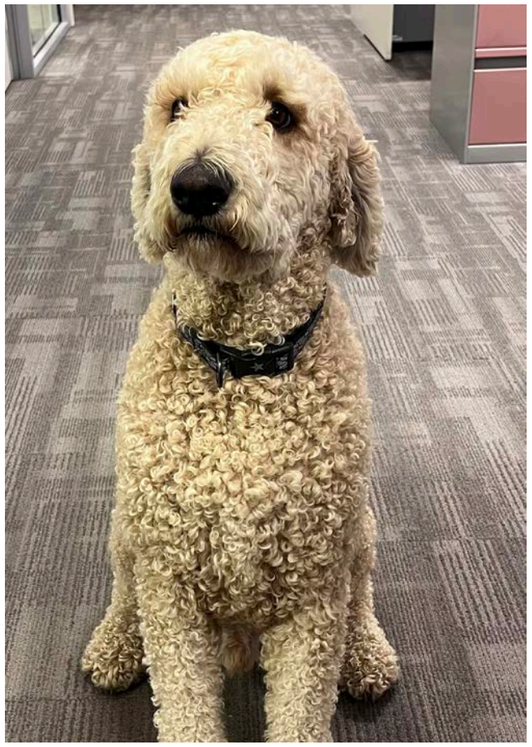
3.4 Leadership in university functions. Various EHCS staff have broader roles on committees and other functions within Monash and Deakin universities. These include leadership roles, operational activities beyond those of EHCS itself, curriculum development, assessment, support for shared functions and resources such as Monash Partners Health Translation Network, and links to collaborators and to other academic organisations and networks.

EXCELLENCE FOR OUR PEOPLE

4.1 Promoting staff and student wellbeing. The safety and wellbeing of our people continues to be a top priority for EHCS. We want EHCS to be a place where people are not only engaged in productive and fulfilling work, but is a place where people enjoy coming to work, and that can even enhance their lives, with confidence that the workplace is safe and supportive. EHCS offers many wellbeing initiatives, such as mindfulness, lunchtime pilates, yoga, and a dog wellness program. The Health Safety and Wellbeing Committee oversees all the issues inherent in its name, and we are proud that EHCS is recognised as one of the highest performers within both the Monash Faculty of Medicine, Nursing and Health Sciences, and indeed the wider university. The Eastern Health Waste Warriors won yet another Platinum Award for Monash University's Green Impact Program in 2025, while our laboratory was the first in Australia and New Zealand to receive Green Impact Lab Accreditation. We support an extensive recycling program including masks, soft plastics, drug blister packs, batteries, medical kits, and pens; an ongoing "Swap don't Shop" program; and EHCS provides reusable coffee cups to reduce disposable cup waste. We also have an active team promoting equity, diversity and inclusion. EHCS established an "EHCS Listens" system in response to the 2024 staff survey, providing a place where people can provide comments, complaints, compliments, concerns, or any other input, in a safe and anonymous way (unless they choose to identify themselves for specific feedback). This has been well received.

4.2 Provision of support systems. "Behind the scenes" activities that are not necessarily obvious include provision of centralised and consistent systems for financial management; purchase and maintenance of equipment; access to Monash resources such as IT, and human resources; dedicated statistical support that is available to anyone within Eastern Health; and ethics pre- and post-submission support for clinical trials. The partnership allows resources to be folded back into Eastern Health to support initiatives that would otherwise not be able to be supported, such as underfunded or investigator-initiated research, and provision of quarantined time for clinician-researchers. This mutually beneficial model is unique to Eastern Health and EHCS.

4.3 Opportunities for professional growth. EHCS sees itself as having a responsibility to support and grow its people. Supervisors and staff continually review needs and opportunities, including consideration of how best to obtain and develop new skills and expertise that might lead to further professional and career development. This helps to enrich people in their current work setting while also giving them tools and resources to grow into other opportunities in the future if they so desire. Many staff who have come through EHCS have eventually gone on to senior leadership roles in Monash University or other organisations.



SELECTED HIGHLIGHTS FOR 2025

2025 saw excellent outcomes for existing people and groups, and was highlighted by new recruits to EHCS who have already made their presence felt in very positive ways. We have met all our strategic goals and continue to explore and develop new opportunities for even more success.

Some other selected highlights from throughout 2025 in addition to those mentioned above are as follows:

- Multiple awards and other recognition, including the following (list is likely to be incomplete):
  - Ife Adesina: EHCS Three Minute Thesis (3MT) winner.
  - Shalini Arunogiri: Distinguished Fellow, International Society of Addiction Medicine.
  - Anuj Bohra: inaugural Dean's Commendation for Doctoral Thesis Excellence.
  - Sarah Catchlove: Margaret Hamilton Travelling Scholarship.
  - Tony Dear: 25 Year Service Award, Monash University.
  - Ed Kwan: Finalist, Clinical Research Award, 2024-25 Premier's Awards for Health and Medical Research; Monash Partners EMCR Award; Monash BDI Outstanding Achievement for Clinical Engagement and Translation Award.
  - Rose Laing: EHCS Three Minute Thesis (3MT) people's choice winner.
  - Dan Lubman: elected Fellow of Australian Academy of Health and Medical Sciences.
  - MARC team: Victorian Premier's Award Best in Category - Service Design 2025 (Prescription Opioid Safety Toolkit); Gold Good Design Award, Public Sector Services, 2025 (Prescription Opioid Safety Toolkit).
  - Suzi Nielsen: APSAD President.
  - Sandra Nolte: ISOQOL President.
  - Louisa Picco: winner Public Health Researcher Award, 2024-25 Premier's Awards for Health and Medical Research; Australasian Professional Society on Alcohol and other Drugs (APSAD) ECR award.
  - Turning Point designation as Eastern Health Centre of Excellence.
  - Aaron Wong: Cynthia Goh Fellow.
- NHMRC, MRFF, and other grant and fellowship successes.
- Highly impactful publications and conference presentations.
- Successful completion and conferment of higher research degrees.
- Continued growth in PhD student numbers.
- Academic promotions for multiple staff and adjuncts.
- Ongoing responsible financial management and meeting of budgetary targets.

FUTURE DIRECTIONS

Past success brings future opportunities, and so do new challenges as they occur.

Changes in health service governance at local and state levels will require significant work, and also raise the possibility of new initiatives to grow research and education with a unique Eastern Health and EHCS flavour. Funding constraints, particularly with respect to competitive grant processes, force us to think creatively about how resources can best be used, and what other sources of funding we can identify for these activities. Ongoing space constraints have led to fruitful discussions with Eastern Health about how available (and future) space might best be used, and this in turn has highlighted the importance of EHCS activities for Eastern Health. Global political instability has brought to light potential new international recruits, and Monash University has developed funding programs specifically to entice such people to come to Monash; EHCS will bring in at least two people under these schemes in 2026. EHCS is very grateful to the Eastern Health Executive and Board, and in particular to outgoing chair Tass Mousaferiadis for his robust support; the new chair, Eugene Arocca, indicated in his first public words at Eastern Health that he considers research and education to be high priorities for the health service.

EHCS will continue to look for areas in need of support in order to enhance research and education activities across Eastern Health, and will continue to provide this support. Examples include the administrative and other support services we provide to researchers across Eastern Health; access to platforms and technologies, including those through Monash Partners; statistical support; simulation education support; and resources to ensure people and units are able to undertake the academic activities so necessary for a high performing health service in the 21st century. EHCS and the collaborations it represents are a unique and highly successful model to which others look with envy. We look forward to even more success in 2026 and beyond.

I commend to you the EHCS Annual Report for 2025.

Ian Davis
Head, Eastern Health Clinical School
Professor of Medicine, Monash University and Eastern Health
Affiliate Professor, Deakin University
NHMRC Leadership Fellow L3

Dr Edmond Kwan, Dr Asha Bonney (EH clinician), Dr Louisa Picco and Prof Paul Buntine

DIRECTORATE REPORTS

MEDICAL STUDENT PROGRAMS

CO-DIRECTORS: A/PROF CAROLINE DOWLING AND A/PROF EMMA KU

STUDENTS

Medical Student Programs at Eastern Health is a leading provider of clinical years medical education. Uniquely it serves both Monash and Deakin universities, and consistently secures excellent outcomes for students in all clinical years.

In 2025 we further pursued our strategic goals of supporting and promoting student growth, investing in our staff, committing to excellence in our teaching, developing our educators, and engaging deeply with hospital units. Our current students are different in many ways, and learn differently than cohorts past; they are more technologically connected, seek out individualised learning, and may be even more driven than their academic forebears. They face an increasingly complex health environment with specific risks for its employees.

Despite these changes much remains the same. Students learn best from a considered and relevant curriculum that responds to the demanding and varied competencies a doctor requires, and flourish when the environment it is provided in supports their wellbeing and developing independence.

In 2025 we educated 391 medical students and are welcoming 387 students into 2026. All of our final year students (104 in both universities) graduated and in 2026 will join the medical workforce as junior doctors. Many choose to stay at Eastern Health, consolidating the very positive experience they have had as medical students.

Year	Year 3 Monash students	Year 4 Monash students	Year 5 Monash students	Year 3 Deakin students	Year 4 Deakin students
2020	54	180	77	17	20
2021	56	153	70	16	20
2022	55	147	80	16	20
2023	56	152	84	16	18
2024	61	160	98	16	16
2025	62	187	107	16	19
2026	60	187	108	17	15

We maintain our excellent record as a clinical school: 100% of final year students surveyed reported a positive learning experience with MSP (strongly agreed or agreed), an increase from last year's figures of 89%; more than 98% would recommend us to their colleagues, an increase from 83% last year; 88% of all students surveyed felt an overall sense of wellbeing with MSP, and 84% felt valued by our organisation, comparable to last year's 87% and 84%, respectively. Overall, 96% of all students reported a positive learning experience with Eastern Health Clinical School (EHCS).

This sense of wellbeing is not by accident. We are committed to supporting all of our students to thrive, recognising they face profession-specific challenges. Community building is key; our Trivia Night (pictured opposite) and end of year celebrations are a wonderful stimulus for this. We continue to provide effective remediation where required, bring our resources and support to bear for all student issues, and foster capability, motivation and inclusion.

REMEDIATION/SUPPORT/CULTURE VIGNETTE

Remediation is more than just addressing a student's academic needs. Situations have arisen where a student might not succeed in an examination, and become distressed as a result. The Medical Student Programs team works with the student in such situations to provide support and to link them with other supports, including external practitioners. This has allowed students to reflect and re-set, and to undertake future assessments successfully. Many of the near-misses in assessments are performative rather than knowledge-based. The school invests considerable time in remediating and coaching students to achieve their goals.

STUDENT AWARDS

We were delighted this year that two of the three Sophie Davis Memorial Prize winners - the prize for the top performing final year medical student at Monash University - were graduates of our clinical school: Daniel Ameen and Amara Vivekanantham. Daniel Ameen was also one of the two winners of the highly regarded Monash University Christine McMenamin Professionalism award.

Daniel Ameen (left) and Amara Vivekanantham (middle)

MSP STUDENT AWARD - for demonstrating the MSP values of respect, innovation, kindness, excellence, accountability	
Deakin Year 3	Kirsty Stephens
Deakin Year 4	Alexandra Malanina
Monash Year 3B	Nathan Gentis and Sinthu Senthilmohan
Monash Year 5D	Ben O'Gorman and Jeremy Bolton

MSP PEER AWARD - for demonstrating collegiality, support and respect, for their colleagues	
Deakin Year 3	Yianni Droungas
Monash 3B	Mahdiar Shegefti

SPECIAL MENTION AWARDS - for outstanding feedback from their clinical unit or MSP staff members	
Monash 5Ds	Ben O'Gorman, Bernard Tso, Elissa Ong, Grace Chung, Hannah Davey, Jeremy Bolton, and Pamali Hewage

PTA STUDENT RECOGNITION AWARD - for exceptional patient-centred care	
Deakin Year 3	Molly Horan
Monash 3B	Xavier Dooley and Jaffer Al-Haidary

FACULTY AWARDS/SCHOLARLY INTENSIVE PROGRAM (SIP) AWARDS	
EHCS Pre-Intern Prize	Ben O'Gorman
EHCS Student Award	Fleur Williams
EHCS SIP Awards	Angelyn Neoh
2024 Y5 WAM Commendations letter from EHCS	Qi Cheng, Timothy Hung, Magnus Liew, Samantha Lugowski, Monica Rezkalla, Jia Ying Tan, Pei Ying Tan, Fleur Williams, Caitlin Zhou, Isabelle Brugliera, Zhi Chai, Xin Chen
The Jo Wainer Prize - awarded to an EHCS student who has demonstrated a sustained commitment to research, education, or engagement in the area of Women's Health, Gender in Health or Rural Health	Kartik Iyer
EHCS Monash Year 3B Prize	Nathan Gentis and Sinthu Senthilmohan
Eastern Health Clinical School's Dean's List Commendations	Year 4 Kirsty Stephens, Molly Horan, Kyla Pinxt, Elisha Johns, Tyson Kedgley, Sewmie Wanigasundera, William Gibcus, Mudher Alsafi, Emmerson Murphy, Peishan Cai, Joyce Wu Year 3 Lily Jackson-Martin, Zackary Bell

DRABC TRAINING IN ACTION

One of our Deakin final year students was crossing a busy road in Heidelberg and noticed a car in the lane closest to the curb had stopped and the driver appeared slumped over the wheel. He enacted his DRABC training and with the assistance of a nurse bystander, they placed the patient on the curb and commenced CPR until Ambulance Victoria arrived. A doctor from the Austin Hospital also stopped to help and commended the student's action, writing to the school after the event. This was a remarkable example of the values that are exemplified by MSP students.

We are proud of all of our students; their competence and contribution to hospital life is outstanding, their character and compassion heartening.

STAFF

Our team has had some significant transitions. Dr Erica Schmidt has retired after 19 years of highly valued service to our unit and students. She has provided remediation and support for countless students, whilst also being instrumental in the development of a number of our key programs.

Erica Schmidt and Caroline Dowling

Karina Nicholson is now our Senior Planning Officer and brings creativity and purpose to the role. We are also delighted to have a new Clinical Skills Educator, Clara Fernandez, join us to cover Madelene Kiremitciyan's maternity leave. Dr Alex Leaney, one of our academic staff, has been recognised for her educational excellence with an appointment as Box Hill's Deputy Director of Physician Training.

We invested in our staff with two well-received development days, promoting team cohesiveness and exploring the dovetailing of personal and professional purpose, as well as our culture-building social functions.

We are ever grateful for the invaluable contributions of our academic and administrative staff, who are absolutely essential to everything we do. They create and sustain the culture of support and kindness for which we are known, and enable the growth and continual improvement of all our programs.

The MSP Academic and Administrative Team

PROGRAMS

Our education programs are under ongoing review, with the focus in 2025 being the curriculum for our first-year clinical students. The Curriculum Review Report generated from this focus will be a foundational document for us in 2026, ensuring MSP remains at the forefront of medical education, balancing innovation with highly effective educational practice. Our students have responded enthusiastically to a suite of new self-sign-up programs. including in Dermatology, Pathology, Ophthalmology and Radiology, allowing students more extensive and formal exposure to otherwise hard to access disciplines.

EDUCATORS

It was a joy to celebrate and share with our educators from Eastern Health at our Educator Thank You Evening in late November (pictures below). It is an incredible privilege to work alongside clinical staff as they partner in our student education. We received over 221 individual nominations from our students for excellent educators, citing their outstanding education skills, professional example, generosity and kindness to our students. We could not value their input more highly; it is absolutely essential to the development of our students into well-rounded clinicians. In 2026 we will begin a Medical Educator training course to further build capacity in and develop this critical community of practice.

MSP is strategically focused on graduating capable, adaptable, and well-rounded doctors, while fostering the development of medical students as lifelong learners. A key enabler of this objective is the structured engagement of recent graduates in the delivery of the program, creating a sustainable pipeline of clinician-educators.

Recent graduates contribute across multiple domains of the Medical Student Program, including mentoring, teaching, and program support. At an early postgraduate level, this is operationalised through near-peer teaching models, where junior medical staff participate in mentoring programs, contribute to panels on internship applications and workforce pathways, and provide contextual insights that enhance students' transition into clinical practice.

As graduates progress clinically, their role evolves into more formal educational contributions, including bedside teaching and longitudinal supervision. This supports continuity of learning, enhances observational assessment of student progress, and strengthens the integration between clinical service and education.

This model not only enhances the student learning experience, but also contributes to workforce development by embedding teaching capability early in medical careers, and reinforcing a culture of education within the health service.

UNITS

In 2025 we embarked on an ongoing project to engage more deeply with the hospital units which host all of our student activity. Our Co-Directors have visited many unit meetings in order to explain the role of MSP, provide some education and insight into the changing face of medical education, and most importantly, express our deep gratitude for their support and training of our students.

RESEARCH

MSP undertakes research in medical education. Our academic staff have papers in preparation for publication and we are contributing to the Eastern Health Institute's newly formed Health Education Research Special Interest Group (HERSIG).

A/Prof Jenepher Martin continues to be involved in national regulation, medical education program evaluation and AMC assessment (service to profession – National). Her current sabbatical project is focussed on the standards for specialist medical education.

We have had three SIP students complete these projects:

- **Nathan Kouris**: A scoping review of the interventions promoting clinical medical students professional identity formation
- **Jonathan Zheng**: Attributes of an excellent clinical teacher in medical school and methods for evaluating them: a scoping review
- **Jonas Parsons**: What is the scope and practice of coaching in undergraduate (postgraduate) medical education in Australia

ABSTRACTS

Ben O'Gorman, Jenepher Martin, Emily Schembri, Shomik Sengupta, Caroline Dowling. 'A broken system': unaccredited surgical registrars' perceptions and experiences of RACS training selection. Royal Australasian College of Surgeons Annual Scientific Congress 2025, Sydney.

Christine Cuthbertson, Jenepher Martin, Debra Nestel. Exploration of how surgeons manage emotions and employ empathy in clinical settings: a constructivist grounded theory study of Australian general surgeons. 10th International Clinical Skills Conference. May 18-21 2025, Prato.

Christine Cuthbertson, Jenepher Martin, Debra Nestel. Surgeons' roles and tasks and their effect on empathy: a constructivist grounded theory study of general surgeons in Australia. 10th International Clinical Skills Conference. May 18-21 2025, Prato

Luisa Fernadez-Gonzales, Emma Gilbert, Jenepher Martin. Use of cinemeducation (film clips) in investigating attitudes towards psychiatry in 4th year medical students. ANZHAPE 2025. June 30 - July 3, Perth.

Alexandra Leaney, Jason Tjahadi, Colin Luu, Samuel Hong, Arunaz Kumar, Deborah Leach, Jenepher Martin. Clinical Maturity and professional development in a Near Peer Program. ANZHAPE 2025. June 30 - July 3, Perth.

Dr Julie Gustavs, Ms Theanne Walters AM, Dr Kim Ashwin, Ms Jen Desrosiers, A/Prof Jenepher Martin, Dr Vijay Roach. Navigating the path: using journey mapping and storytelling to improve assessment for international medical graduates in the Australian health system. ANZHAPE 2025. June 30 - July 3, Perth.

Jenepher Martin, Tash Miles. (presenting authors) Medical Board of Australia (MBA) professionalism and regulation education resources: applicability for the IMG learning context. (All co-authors: Barr, J; Martin, J; Biggar, S; White, M; Wylie, J; Heredia, D; O'Shannessy, M, Miles T.) International Medical Graduate Conference 2025. September 17 – 19, Melbourne.

Kim Ashwin (presenting author). Coming to Australia: the IMGs view of the factors affecting journey satisfaction. (all co-authors: Kim Ashwin, Julie Gustavs, Theanne Walters, Jen Desrosiers, Jenepher Martin, Vijay Roach.) International Medical Graduate Conference 2025. September 17 – 19, Melbourne.

Julie Gustavs, (presenting author) Navigating the path: using journey mapping and storytelling to improve assessment for international medical graduates in the Australian health system. (All co-authors: Julie Gustavs, Ms Theanne Walters, Kim Ashwin, Jen Desrosiers, Jenepher Martin, Vijay Roach.) International Medical Graduate Conference 2025. September 17 – 19, Melbourne.

Jen Desrosiers (presenting author). Systemic discrimination in the medical profession: A study of International Medical Graduates' experiences in Australia. (All co-authors: Jen Desrosiers, Julie Gustavs, Ms Theanne Walters, Kim Ashwin, Jenepher Martin, Vijay Roach.) International Medical Graduate Conference 2025. September 17 – 19, Melbourne.

Our team takes great delight and pride in our work helping to transform medical students into wonderful clinicians. We look forward to serving again in 2026.

TURNING POINT

DIRECTOR: PROF DAN LUBMAN AM

Turning Point is Australia's leading addiction treatment, education and research centre, operating through a longstanding partnership between Eastern Health and Monash University. This integrated model brings together specialist clinical care, academic leadership, and research translation to deliver high-quality, evidence-based services for people adversely affected by alcohol, drugs and gambling.

As a Centre of Excellence within Eastern Health, Turning Point combines frontline service delivery with world-class research and postgraduate education. In addition to delivering specialist addiction treatment services across Melbourne's Eastern region, Turning Point operates more than 20 national helplines, and leads a comprehensive workforce development and higher degree training program, strengthening capability across the health sector.

Drawing on its unique integration of clinical expertise, research excellence and policy engagement, Turning Point provides independent, evidence-informed advice to governments and health services. This partnership between Eastern Health and Monash University enables innovation to be embedded directly into care, driving systemic reform and improving timely access to effective treatment and support for individuals, families and communities.

Significant research activity continued in 2025 across a broad range of areas, including several NHMRC and philanthropic funded studies, testing novel interventions with both treatment and community-based populations. This included a multi-centre trial of Lisdexamfetamine for methamphetamine withdrawal; a pilot trial of virtual-reality-delivered cognitive bias modification during alcohol withdrawal treatment; and a lived experience peer-delivered intervention to build recovery capital in patients exiting withdrawal treatment for alcohol and other drugs. Exploring new scalable digital interventions outside of treatment settings, the team commenced a study testing a heart rate variability feedback and resonant breathing app to reduce alcohol craving and consumption, and initiated a trial testing a smartphone-delivered approach bias modification app for people wanting to quit smoking.

The team also successfully completed a major qualitative study engaging over 100 people detected for minor drug offences, to analyse their experiences of current responses and perspectives on better responses. As part of collaborative work with the Hamilton Centre, the team also commenced projects to co-design initiatives to enhance integrated care and address stigma for consumers with co-occurring mental health and alcohol and other drug needs.

Turning Point's National Addiction and Mental Health Surveillance Unit (NAHMSU) team aims to reduce the impact of addiction, self-harm and mental ill health through the provision of timely, policy-relevant surveillance data that informs practice, service planning and policy. This work continues to be funded through the Australian Institute of Health and Welfare (AIHW) and the Victorian Government, providing critical state and national indicators on alcohol and other drug-related harms, as well as suicide and self-harm, and underpins key AIHW collections, including the Suicide and Self-Harm Monitoring System and the Alcohol, Tobacco and Other Drug Compendium. In the past year alone, the NAMHSU team coded more than 900,000 ambulance attendances across Australia.

These data were translated into high-impact technical reports and tailored analyses for local governments and community organisations, state and territory health departments, and national agencies. NAMHSU researchers published several influential papers, including findings showing that school holidays no longer provide a protective buffer against suicidal and self-harm behaviours among Victorian adolescents in the post-pandemic era, and evidence of continued increases in GHB-related harms concentrated within specific geographic 'hotspots'. Both studies attracted substantial community and media interest, with NAMHSU researchers featured in more than 80 print, television and radio stories over the year.

Turning Point also hosted visitors from Indonesia's Ministry of Health, its main mental health hospital, and the drug dependency clinic in Jakarta. The visiting team wanted to learn more about Turning Point's clinical services and explore the potential for research and training collaborations that could innovate their practice.

Indonesian visiting party with Turning Point staff

In total, Turning Point researchers were involved in 42 active projects, submitted 52 grants or tenders, published 48 journal articles with a further 10 accepted, and had 34 presentations delivered across 13 conferences including six international conferences.

CONFERENCES

In 2025, our team continued to share its work on a global scale, delivering 34 presentations across 13 conferences, including six internationally. Our researchers presented at prominent global forums such as the Contemporary Drug Problems Conference in Manchester (UK), the CPDD Annual Scientific Meeting in New Orleans (USA), the 4th Annual Conference of the Association for Cognitive Bias Modification in Munich (Germany), and the ISPOR Real-World Evidence Summit in Tokyo (Japan). Domestically, Turning Point had a strong presence at the Australasian Professional Society on Alcohol and other Drugs (APSAD) conference, held at the Sydney International Convention Centre, where 12 of our researchers attended and showcased their work across the four days (our team is pictured below). Through these global and national engagements, we continue to strengthen collaborations and translate research into meaningful impact across the AOD sector.

TURNING POINT 30TH ANNIVERSARY CELEBRATION

Turning Point marked its 30th anniversary in 2025, celebrating three decades of leadership in health reform, delivering high-quality services and shaping the conversation on addiction.

With over 100 attendees, the milestone event brought together the Victorian Minister for Mental Health, Ingrid Stitt; former clinicians, ministers and directors; representatives from partner organisations; and founding Director Professor Margaret Hamilton AO. The celebration also included the launch of Turning Point's strategic directions for the next three years and the announcement of Turning Point as the first Eastern Health Centre of Excellence.

"We are proud to be part of Eastern Health and supported by Monash University," said A/Prof Shalini Arunogiri, Clinical Director, Statewide Centre for Addiction and Mental Health. "When you reflect on our stories from the past 30 years, and you think about our impact and those incremental changes that we and our partners have made across the sector, you start to see that change really is possible," she said.

L-R: Dan Lubman, Toni Gutschlag, Ingrid Stitt (Minister for Mental Health), Shalini Arunogiri, and Tass Mousaferiadis (Chair of EH Board)

TURNING POINT NAMED AS EASTERN HEALTH'S FIRST CENTRE OF EXCELLENCE

Turning Point has been formally recognised as Eastern Health's first Centre of Excellence, marking a significant milestone arising from the EH 2023–2025 Strategic Plan. To achieve Centre of Excellence status, a service must demonstrate excellence across five core criteria, evidencing the reach, depth and quality of care delivered. These criteria encompass outstanding clinical outcomes and patient experience, integration of research and innovation into practice, workforce capability and leadership, strong partnerships and system influence, and measurable impact at a regional and statewide level. This designation acknowledges Turning Point's unique model, integrating specialist clinical services, translational research and workforce development, and its sustained contribution to improving addiction care across Eastern Health and beyond.

10 YEARS OF AODSTATS

AODstats provides information on the harms related to alcohol, illicit and pharmaceutical drug use in Victoria. Data are obtained from numerous sources, ranging from government departments to drug and alcohol treatment agencies. For 10 years, AODstats has delivered up-to-date evidence across 12 unique datasets that have informed key policy and planning decisions in the alcohol and other drug space. This includes key evidence informing a landmark Victorian Administrative and Civil Tribunal (VCAT) knockback of a large liquor store in the regional town of Daylesford, following a community submission using data from the site. AODstats allows users to filter results relevant to local communities, as well as providing state-based and metro/regional aggregations of alcohol and drug harms.

PROF LUBMAN ELECTED AS A FELLOW OF THE AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES

Turning Point's Executive Clinical Director, Professor Dan Lubman AM FAHMS, was elected in 2025 as one of three researchers from Monash University as a new Fellow of the Australian Academy of Health and Medical Sciences (AAHMS), the nation's learned academy for the most influential experts in health and medicine.

One of the highest honours in Australian health and medical sciences, election to the AAHMS recognises Prof Lubman as one of the nation's most outstanding minds in health and medical research, innovation and leadership. As Director of Turning Point and the Monash Addiction Research Centre, Prof Lubman has led pioneering studies on the impact of alcohol, drugs, and gambling on brain function and mental health; developed and trialled innovative clinical and early intervention responses; and established a world-first national health surveillance system. His work directly informs public health policy, clinical innovation and health system reform, and supports national advocacy campaigns to address stigma and the adoption of evidence-based policies and practices.

FUNDING

Professor Victoria Manning, Head of Research and Workforce Development, secured $1.9 million through an NHMRC Partnership Project Grant, and a Ramsay Hospital Research Foundation Collaboration Research Grant, to lead the first national implementation trial of Cognitive Bias Modification (CBM) during alcohol withdrawal treatment. CBM is a computer- and smartphone-delivered neurocognitive training program that reduces automatic responses to alcohol cues, and has demonstrated relapse-prevention effects in multiple randomised controlled trials. The project will implement a clinician- and consumer-co-designed CBM program across 14 public and private inpatient withdrawal services, using a hybrid implementation-effectiveness trial design. The partnership includes multidisciplinary university collaborators, clinical services, philanthropic foundations, peak bodies and the Victorian Department of Health. Findings will inform a national scale-up strategy and implementation toolkit to optimise outcomes across Australian services.

Dr Bosco Rowland has been awarded $1.97 million through an MRFF Alcohol and Other Drugs Grant to examine how expanding alcohol availability contributes to mental and physical ill-health among young people. The project responds to substantial growth in online sales and home delivery over the past decade, coinciding with rising indicators of adolescent distress. Using a 25-year retrospective cohort of 2,000 Victorians, and repeated cross-sectional data from 50,000 adolescents across 260 local government areas, the study will link survey data with MBS, PBS, hospital and ambulance records. This comprehensive data linkage will map long-term health trajectories and service use. Funding also supports two waves of a new prospective cohort to strengthen the evidence base for prevention and policy reform.

Prof Dan Lubman has been awarded $255,000 from the Helen and David Hains Foundation to pilot a peer-delivered, phone-based intervention through DirectLine, Victoria's statewide AOD helpline. The program aims to strengthen recovery capital at first contact, by connecting callers with trained peer workers who bring lived experience, trust and hope to early engagement. A new dedicated peer-led recovery group will provide a seamless pathway to ongoing support and continuity of care. The intervention actively facilitates connection to mutual aid groups such as AA, NA and SMART Recovery, addressing stigma and access barriers. Evaluation will assess improvements in recovery capital and successful linkage to ongoing community supports.

POLICY AND KNOWLEDGE TRANSLATION

Turning Point made major submissions including to the Productivity Commission's review of the Mental Health and Suicide Prevention Agreement, which recommended the addition of a dedicated alcohol and other drugs schedule, and linkage to the National Health Reform Agreement.

Since 2024, Turning Point has coordinated Alcohol Change Victoria (ACV), a coalition of 18 partner organisations collaborating to drive evidence-based alcohol policy. In 2025, ACV published five position statements, developed its first ever Theory of Change and accompanying workplan, launched a new website, held a roundtable on alcohol-related violence with the domestic, family and sexual violence sector, and made several policy submissions.

EDUCATION PROGRAMS

In partnership with Monash University, Turning Point delivers the Graduate Certificate, Graduate Diploma, and the Master of Addictive Behaviours to more students than ever, with another year of excellent student feedback and testimonials. In 2025, a total of 89 students completed the entire academic year: 72 finished Year 1 (the Graduate Certificate year), nine completed Year 2 (the Graduate Diploma year), and eight graduated with a Master's in Addictive Behaviours. Notably, one of the two research stream students received the highest achievement award for their thesis.

PHD STUDENTS COMMENCED IN 2025

Autumn Beau
Benjamin Davey
Tooba Fatima
Patrick Huang
Liam Kay
Aricia Kostouros Eleuterio
Olivia Wang

STUDENT OPEN NIGHT

More than 70 attendees joined Turning Point's annual Student Open Night and Expo, now in its third year. The event featured fireside chats (photo below) with HDR candidates and postgraduate students in addictive behaviours, who shared their academic and career journeys. Site tours, informal conversations and networking opportunities provided valuable insights into the student experience and research environment. The evening showcased professional development pathways, internships, postgraduate coursework and PhD opportunities, highlighting Turning Point's commitment to building the future addiction workforce.

HIGHLIGHTS FROM COMPLETED PROJECTS

The Turning Point team published several high-quality papers in field-leading journals illustrating successful multi-centre clinical trial collaborations testing new pharmacological, psychological or neurocognitive interventions with a diverse range of treatment providers; qualitative research unveiling novel insights into care in residential rehabilitation settings; and innovative analysis of ambulance data to identify vulnerable groups experiencing alcohol harm during COVID-19.

LANCET PUBLIC HEALTH – Q1 – IMPACT FACTOR 24.2

Bonevski, B., Rich, J., Lubman, D. I., ….., Manning, V. 'Nicotine e-cigarettes for smoking cessation following discharge from smoke-free inpatient alcohol and other drug withdrawal services: a pragmatic two-arm, single-blinded, parallel-group, randomised controlled trial Lancet Public Health 2025, 10:E568-E577. In this NHMRC-funded trial, among people discharged from inpatient alcohol and other drug withdrawal services, both nicotine e-cigarettes and combination nicotine replacement therapy produced similar and modest smoking abstinence rates of around 10% at 9-month follow-up, with no significant difference in effectiveness or adverse events between the two treatments. The findings illustrate the benefits of removing barriers to evidence-based care in a population with disproportionate tobacco-related morbidity and mortality.

J AFFECT DISORD – Q1 – IMPACT FACTOR 4.9

Ogeil RP, McGrath M, Grigg J, Peart A, ….., Lubman DI. Diverging trends in alcohol-related harms: the role of comorbid mental health, suicide and self-harm behaviours in ambulance attendances for alcohol intoxication during the COVID-19 pandemic in Victoria, Australia. J Affect Disord. 2025, 371:170-176. Although overall alcohol-related ambulance attendances declined during COVID-19 lockdowns in Victoria, attendances involving co-morbid mental health symptoms increased by up to 40%, and those involving suicidal behaviour increased by up to 21%, suggesting that while population-level alcohol harms reduced, the most vulnerable groups experienced disproportionately worse outcomes during the pandemic.

ADDICTION – Q1 – IMPACT FACTOR 5.3

Garfield JBB, Rowland B, ….., Manning V. Efficacy of a personalised alcohol approach bias modification smartphone app in people accessing outpatient alcohol use disorder treatment: a randomised controlled trial. Addiction 2026, 121:82-93. The findings indicated that among a sample of outpatients with alcohol use disorder, whilst a smartphone-delivered approach bias modification program showed no significant reduction in alcohol use compared to sham trained controls at the primary 4-week endpoint, it led to a significantly greater reduction at the final 16-week follow-up.

SLEEP – Q1 – IMPACT FACTOR 4.9

Catchlove, S.J., ….., Arunogiri, S. Sleep patterns and sleep quality in women with methamphetamine use disorder. Sleep. 2025 Oct 48:zsaf199. In a small sample of women with methamphetamine use disorder, there was a link between later chronotypes (e.g. a greater tendency towards 'eveningness') and greater illness severity. These findings support previous research associating altered sleep, circadian rhythms and chronicity with methamphetamine and substance use, demonstrated for the first time in a female-only, methamphetamine-specific cohort.

INT J DRUG POLICY – Q1 – IMPACT FACTOR 4.4

Bathish R, Duff C, Savic M. Choreographing, tailoring and dialoguing care in residential rehabilitation. Int J Drug Policy. 2025, 145:104970. This ethnographic study examined how to care well for people in residential rehabilitation, while countering the potentially totalising nature of institutional care. It proposes participatory and inclusive mechanisms of care that tailor to people's uniqueness, autonomy and relationality, while addressing the diverse needs and preferences of others involved in caring relations.

DRUG ALCOHOL DEPEND – Q1 – IMPACT FACTOR 3.6

Lorenzetti V, ….., Manning V. Brief mindfulness intervention for adults with cannabis use disorder: a randomised clinical trial. Drug Alcohol Depend. 2025 277:112909. Findings showed that a brief (2-week) online mindfulness-based intervention showed no significant reduction in cannabis use frequency, quantity, or cravings, compared to relaxation or control conditions among adults with cannabis use disorder.

MEDIA HIGHLIGHTS

Turning Point achieved 348 media appearances across television, radio, print and digital platforms - a nearly threefold increase from 118 appearances in 2024. Through 14 proactive media campaigns and expert alerts, Turning Point maintained a strong proactive media strategy, with 80% of coverage driven by targeted pitching and strategic campaign planning. Key campaigns included:

- Coroners' Court Fatal Drug Overdose Report: an expert alert featuring A/Prof Shalini Arunogiri, Dr Rowan Ogeil and Prof Suzanne Nielsen, generated 120+ media appearances across national and regional outlets, including Channel 10 national news, News.com.au, SBS Radio and 80+ regional newspapers.
- NASS GHB Research: a targeted pitch of Dr Rowan Ogeil's research on GHB harm hotspots secured front-page coverage in the Geelong Advertiser and national syndication across 50+ outlets, including the Herald Sun, Daily Telegraph, The West Australian and Yahoo News.
- CBM Partnership Grant: coverage of Prof Victoria Manning's $1.9 million NHMRC Partnership Grant achieved 25+ media appearances, including two live ABC radio interviews broadcast across eight stations, a radio news interview, and print coverage across seven mastheads including the Herald Sun.
- Festive season alcohol harms: a media release on festive season alcohol harm data was covered in 87 print and online publications, including AAP, the Canberra Times, 7News Online, and Yahoo News, and led to Dr Rowan Ogeil's radio interviews with 2SM and 2GB being broadcast across 16 radio stations nationally.

10 staff members appeared in media across the year, supported by a new bespoke media training program to build spokesperson capacity among researchers.

RESEARCH AND HIGHER EDUCATION

DIRECTOR: PROF IAN DAVIS

The Research and Higher Education (R&HE) Directorate oversees research activities involving EHCS that are not clinical trials. This includes non-trial clinical research, laboratory management and projects, and higher degree research students.

It is also a forum to bring together diverse research, not necessarily primarily involving EHCS, but where EHCS might be able to provide support, including the following:

- Support systems:
  - A full-time statistician employed by EHCS is available to provide advice to anyone in Eastern Health on request.
  - Financial management of grants.
  - Provision of resources to support quarantined investigator time.
  - Advice and assistance for ethics applications.
  - Laboratory services and access to various technologies.
  - Links to collaborators able to meet research needs not otherwise able to be met at Eastern Health.
  - Assistance with preparation of reports, presentations, and manuscripts.
  - Scholarship applications.
  - Support for early career researchers at individual and group levels.
  - Preparedness for health service accreditation.
- Expertise:
  - Higher degree supervision
  - Supervisor mentorship, training, and accreditation
  - Researcher training and oversight
  - Assistance in development of research questions
  - Formulation and implementation of research plans
  - Data analysis and interpretation
- Links:
  - Monash Partners Health Translation Network, and a community of Eastern Health people engaged in Monash Partners
  - Information about funding opportunities
  - Identification of and links to internal and external collaborators
  - Links to registries and databases

The R&HE Directorate meets four times per year and has an inclusive membership. Its agenda concentrates on strategy, systems, and operational support.

Dr Pavel Sluka continues to serve as the EHCS Graduate Research Coordinator and leads the EHCS BMedSc(Hons) program. He also represents EHCS on the Monash Faculty Graduate Research Committee. As at December 2025:

- PhD students enrolled: 30 | Awaiting enrolment: 1
- Master of Surgery students enrolled: 3 | Awaiting enrolment: 1
- MPhil students enrolled: 5
- Three BioMedSci(Hons) students expected for 2026

Student completions for 2025:

- Shananthan Balachandran (PhD)
- Abram Botros (MSurg)
- Penelope Casey (PhD)
- Monica Jung (PhD)
- Paul Rival (MSurg)

Theses under examination as at December 2025:

- Ashling Courtney (MPhil)
- Janindu Goonawardena (MSurg)
- Christopher Neason (PhD)
- Claire Samanna (PhD)
- Wubet Takele (PhD)
- Gebresilasea Ukke (PhD)

HIGHER DEGREE STUDENTS AND PROJECTS

PhD

Student	Unit / Directorate	Project Title
Ifeoluwa Adesina	Health Systems and Equity	Advancing women in healthcare leadership: exploring the intersection of race, gender and ethnicity
Dereje Assefa	MARC	Opioid prescribing and dispensing: examining the impact of policy on practice
Ramez Bathish	Turning Point	Examining the philosophies, practices and experiences of AOD residential rehabilitation
Autumn Beau	Turning Point	Developing a local alcohol risk index to inform policymakers and prevent future alcohol-related harms
Georgia Bolt	Turning Point	Personalised CBM in older adults with hazardous alcohol use: a novel cognitive intervention
Lynna Chen	Gastroenterology	Optimising assessment and communication of imaging in inflammatory bowel disease
Madeleine Cosgrave	Nephrology	Postpartum care of women with hypertensive disorders of pregnancy
Benjamin Davey	Turning Point	Examining the neurocognitive mechanisms underlying approach bias modification for alcohol use disorder
Yuqi Dou	Health Systems and Equity	Addressing equity issues in gestational diabetes and type 2 diabetes prevention: a focus on women from diverse cultural backgrounds
Krishneel Dutt	Gastroenterology	Assessment of cardiac function, liver disease, and fibrosis in inflammatory bowel disease
Tooba Fatima	Turning Point	Integrated written exposure therapy as treatment for comorbid PTSD and Alcohol Use Disorder (AUD): efficacy and implementation in an Australian context
Chuan Foo	Respiratory	Understanding mechanisms of airway and lung disease using hyperpolarised gas MRI
Myfanwy Graham	MARC	Access to unapproved psychoactive medicines: examining health outcomes for mental health and pain
Patrick Huang	Turning Point	Evaluating quality and safety in integrated care for co-occurring mental illness and substance use
Justin James	Surgery	A model to select early breast cancers where sentinel node biopsy is not necessary
Liam Kay	Turning Point	Exploring the potential for AI in enhancing helpline experiences and help-seeking trajectories in people with alcohol and/or other drug concerns
Rose Laing	MARC	Social isolation, loneliness and substance abuse in older patients
Will Lau	Endocrinology	Remote glucose monitoring and an interactive glucose management system in gestational diabetes

PhD		
Student	**Unit / Directorate**	**Project Title**
Aruni Malaweera	Nephrology	Determining the utility of uraemic toxins in peritoneal dialysis to optimise patient care
Chris Neason	Emergency Medicine	Evaluating the feasibility and efficacy of running in individuals with chronic low back pain
Hui Yi Ng	Endocrinology	Detection of circulating tumour DNA in thyroid cancer for risk stratification and prognostication
Lawrence Rivera	MARC	Out of the urban closet: examining the influence of “safe spaces” for LGBTQ+ people who inject drugs
Claire Samanna	Emergency Medicine	Can exercise improve intervertebral disc health?
Timothy Scully	Cardiology	Improving the identification and management of transthyretin cardiac amyloidosis
Wubet Takele	Health Systems and Equity	Epidemiology of maternal malnutrition and gestational weight gain in the Amhara region, Ethiopia
Gebre Ukke	Health Systems and Equity	Development of a diabetes prevention program for postpartum women with high metabolic risks in ET
Olivia Wang	Turning Point	Trauma and addiction
Jenna Yang	MARC	Research on exploring the best practice for management of concurrent chronic pain and opioid use disorder
Henry Yao	Urology	Genitourinary cancer survivorship – management of adverse effects of cancer treatment and improvement of quality of life during cancer survivorship
Jiancheng Zeng	Health Systems and Equity	Cultural integration in type 2 diabetes prevention for Chinese women with GDM history

Master of Surgery		
Student	**Unit / Directorate**	**Project Title**
David Toro Tole	Urology	Enhancing the diagnosis and management of non-neurogenic dysfunctional voiding in adult women: a prospective analysis of urodynamic studies and patient-reported outcome measures to inform clinical pathway development
Janindu Goonawardena	Surgery	Predicting patients who would benefit from oesophagectomy following neoadjuvant chemoradiotherapy
Snigdha Gurrala	Urology	Comparison of robotic assisted surgery vs. traditional open techniques in mesh removal in patient reported outcomes

Master of Philosophy		
Student	**Unit / Directorate**	**Project Title**
Ashling Courtney	Dermatology	Identifying risk factors relating to social disadvantage that influence atopic dermatitis
James Gaston	Dermatology	Atopic dermatitis in outer regional and remote Australians: an exploration of the epidemiology, management and outcomes
Aaron Tran	ECRU-TRD	The large animal model evaluation of Lumi-Solve: a novel photo-angioplasty device
Dumindu Weerakkody	Dermatology	Mental health in patients with atopic dermatitis
Edmond Wong	Cardiology	Novel investigations for preclinical atrial fibrillation and atrial myopathy

WINTER AND SUMMER STUDENT SCHOLARSHIPS

Winter		
Student	**Unit / Directorate**	**Project Title**
Student	Unit / Directorate	Project Title
Chloe Driver	Turning Point	Evaluation of an integrated mental health and addiction health service
Madeleine Dawood	Health Systems and Equity	Improving preconception health literacy of women from culturally & linguistically diverse background
Naveen Lakshmanan	Rheumatology	Audit of large vessel vasculitis involving the aorta
Justin Lee	Rheumatology	Audit of the utility of perioperative screening tools
Tia Miragliotta	Mental Health	A comparison of two routine PROM measures in a tertiary mental health setting
Alisha Nair	Mental Health	Literature review of routine PROM feedback in tertiary mental health settings
Feyza Narli	MARC	Detecting high-risk medication-related Emergency Department presentations
Keiko Rice	MARC	Harm reduction services, practice, knowledge and attitudes among community pharmacists in Australia
Angus Skeen	MARC	Detecting high-risk medication-related Emergency Department presentations
Kathy Xing	Respiratory	Eastern Health patient data in Australasian Interstitial Lung Disease Registry

Summer		
Student	**Unit / Directorate**	**Project Title**
Mitchell Cann	Gastroenterology	Clot or not: evaluating VTE prophylaxis in patients with liver cirrhosis
Yanan Chai	Nephrology	Living better with CKD: insights into lifestyle needs and challenges
Angela Cremona	Spectrum	Borderline personality disorder and complex PTSD
Isabelle Fortey	Spectrum	Mildura capacity building model for borderline personality disorder (BPD)
Pushkar Kute	Mental Health	A review of acceptability of patient-reported outcome measures in mental health services
Ngoc Le	Mental Health	Mapping parent, child and family journeys through Eastern Health FaPMI peer support programs
Noel Leon	Turning Point	PANDA: psilocybin-assisted therapy for major depression and alcohol use disorder
Zehwa Memon	Spectrum	Borderline personality disorder and complex PTSD
Sepehr Miranzadeh	Oncology	Treatment outcomes for metastatic hormone-sensitive prostate cancer in the modern era
Jessica Stein	Turning Point	EARS Ecological Momentary Assessment Study of alcohol use disorder patients post-detoxification
Anisha Suriar	Anaesthetics	Peripartum fibrinogen levels and the risk of postpartum haemorrhage - a pilot study
Holly Whitfield	Anaesthetics	Peripartum fibrinogen levels and the risk of postpartum haemorrhage - a pilot study
Alyssa Yap	Palliative Care	Optimising nutrition screening in a palliative care unit

EASTERN CLINICAL RESEARCH UNIT (ECRU)

DIRECTOR: PROF IAN DAVIS

ECRU, part of Monash University EHCS, has been an historical model for the conduct of clinical trials at Eastern Health for many decades. This was formalised in 2014 with a Memorandum of Agreement (MoA), whereby ECRU is the vehicle by which most clinical trials are performed at Eastern Health.

Most clinical trials staff are employed through Monash University. ECRU liaises with sponsors, Eastern Health departments, and other providers; develops trial budgets; facilitates agreements; oversees trial conduct and Good Clinical Research Practice (GCP) compliance; ensures consistency and quality in systems, documentation, and Standard Operating Procedures; enables data management and quality assurance; monitors financial milestones and invoicing; prepares reports; and trains and upskills personnel. This model is highly successful and mutually beneficial: Eastern Health has a strong reputation for successful and high-quality engagement in clinical trials; while Monash University benefits by supporting academic clinician-investigators and their research. Key processes are centralised within ECRU, meaning that Eastern Health units and investigators do not need to establish or re-invent them. This ensures consistency, quality, efficiency, and economies of scale.

The results of this mutually beneficial relationship are striking:

- High quality and impactful research. ECRU has been the recipient of industry awards for its work and continues to score >95% for GCP metrics (source: IQVIA), placing it at the highest levels of GCP quality in Australia. ECRU has achieved this outcome consistently over many years, and is designated a “Super Partner” by the contract research organisation IQVIA.
- Improved opportunities for patient care. A vigorous clinical trials program is a hallmark of a high-performing health system, and availability of clinical trials should be part of excellent clinical care. The clinical trials programs supported by ECRU allow Eastern Health patients to access novel treatments, while having confidence they are receiving the best possible clinical care.
- Financial transparency. The true costs of, and revenue from, research are clearly visible to both Eastern Health and Monash. The MoA ensures that Eastern Health, at the very least, is able to recover costs of research, and the additional volume of work from clinical trials is a significant component of revenue, particularly for diagnostic services.
- Improved efficiency. ECRU tracks the progress of clinical trials and advises Eastern Health Finance regarding timely invoicing and cost recovery.
- Financial flexibility. Surplus revenue is used at the discretion of the head of each Eastern Health unit to support underfunded areas of research, such as investigator-initiated, grant funded, or cooperative group clinical trials. These types of trials accounted for 41% of Eastern Health clinical trials in 2025, and accounted for 77% of trial participants.
- Attraction and retention of clinician-researchers. The model supported by the ECRU MoA allows Eastern Health units to provide protected research time for key clinician-researchers, and to support other research costs that otherwise might not be able to be covered.
- Improved GCP compliance. ECRU monitors GCP accreditation of its researchers and staff, and has a system of SOPs and related documents to support GCP compliance and reporting.
- Training opportunities. The clinical trials program at Eastern Health requires and supports clinical fellow roles, allowing opportunities for trainees to participate in research and learn the skills they will need to be the clinical research leaders of the future. ECRU also supports students from other health professions, and is a mechanism to support clinical trials undertaken by higher degree research students as part of their degree.
- Support services. In addition to financial management, ECRU provides centralised systems for research infrastructure that otherwise would need to be provided and supported by Eastern Health.

- Continuity and contingency management. Peaks and troughs of activity inevitably occur in any field of clinical research. A collection of siloed units would find it difficult to manage these, and may have to shed experienced staff at times of low trial activity and revenue. The ECRU model brings multiple units together and allows load to be shared and smoothed at times of increased or decreased activity. This means that previous investment in training experienced and specialist research staff does not need to be lost.
- University partnerships. The strong relationship with Monash University allows access to platform technologies and other resources, such as those provided by Monash Partners, including fellow and postdoctoral scientist salary support, data linkage systems, access to registries, and access to systems not available at Eastern Health, such as health economics.

56 new clinical trials were approved at Eastern Health through ECRU in 2025, and 328 trials were either open or in the process of starting up (Figure 4). Once again and consistent with patterns elsewhere in Australia and around the world, most clinical trials were in the fields of oncology and haematology (Figure 5). The types of trials are shown in Figure 6. Growth in trial activity has plateaued in recent years (Figure 7), due to a lack of space to house research staff. Discussions are in progress with Eastern Health to identify additional space to allow necessary future growth in clinical trials.

Figure 4: ECRU trials in 2025 by sponsor type. Source data: ECRU REDCap Clinical Trials Database, 11 Dec 2025.

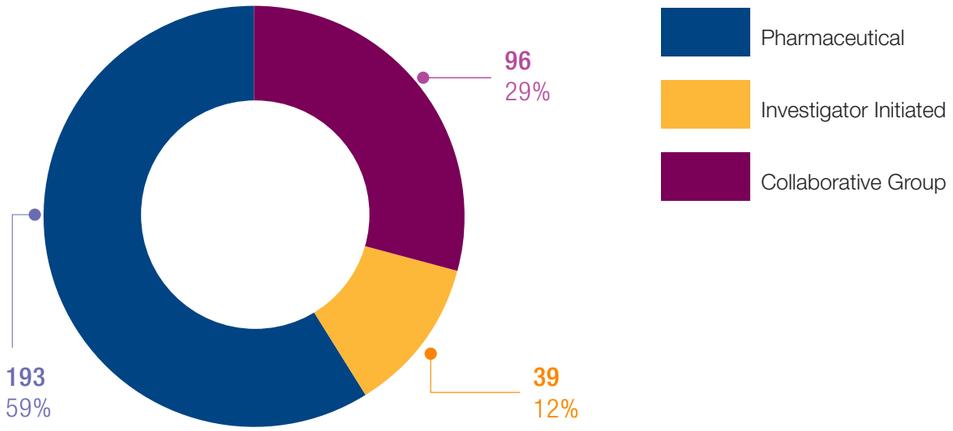


Figure 5: Breakdown of ECRU trials in 2025 by Unit. Source data: ECRU REDCap Clinical Trials Database, 11 Dec 2025.

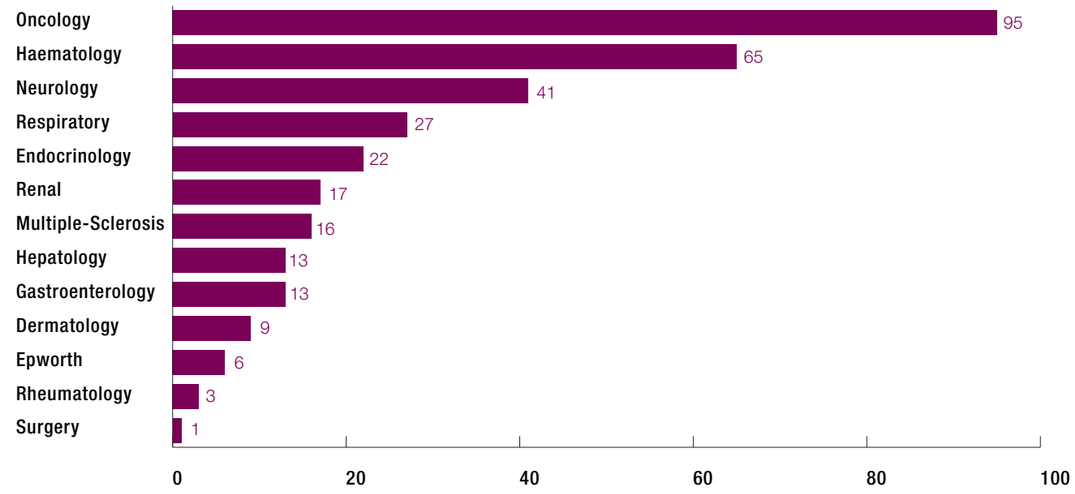


Figure 6: Breakdown of ECRU trials in 2025 by trial type. Source data: ECRU REDCap Clinical Trials Database, 11 Dec 2025.

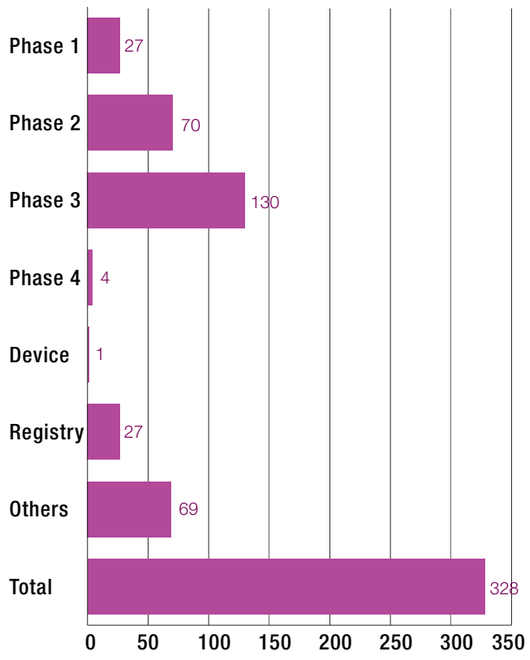
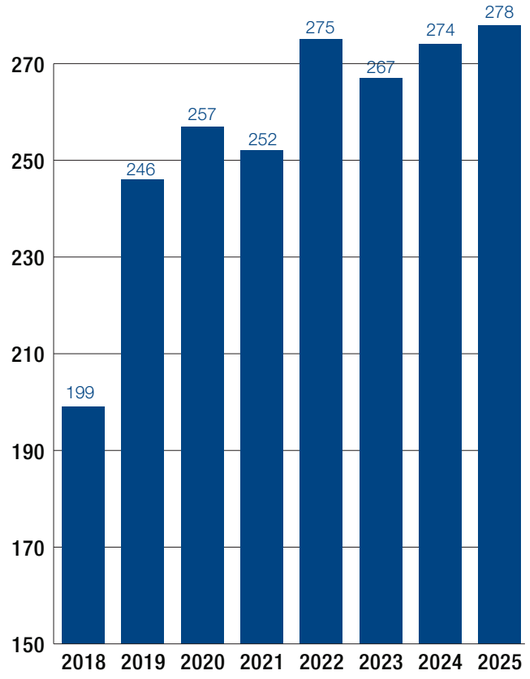


Figure 7: Number of open studies by year.



HEALTH SYSTEMS AND EQUITY

DIRECTOR: A/PROF JACQUELINE BOYLE

The mission of the Health Systems and Equity directorate is to deliver excellence in health equity research, centred on people and community, and strengthening integrated health systems. As part of this, we provide leadership and education on equity, consumer and community involvement in research. Our research themes include: women's health, non-communicable disease prevention, and social and emotional wellbeing.

In 2025, our team contributed to 36 peer reviewed publications. We were chief investigators on research funding grants that included: menopause, perinatal genomics, a digital application to provide Aboriginal women in Darwin and the Tiwi Islands information on pregnancy, integrated and culturally appropriate care in diabetes in pregnancy, a health services directory for service navigation and social prescribing in mental health, and co-designing an inclusive framework for consumer and community involvement in precision diabetes medicine. The team presented at five national and nine international conferences, ran two international workshops and organised the inaugural Western Pacific Preconception Health Conference.

Investigators held leadership, advisory and committee roles in: ADA/EASD Precision Medicine in diabetes; Translating Research Outcomes into the Primary Health Interface (TROPHI); the Migrant and Refugee Health Partnership Council; the Royal Australian and New Zealand College of Obstetricians and Gynaecologists First Nations Women's Health committee; the Australian Health Research Alliance Women's Health Research and Translation Network; Children by Choice; and the World Stroke organisation – Lancet Neurology Commission Stroke Collaboration Group.

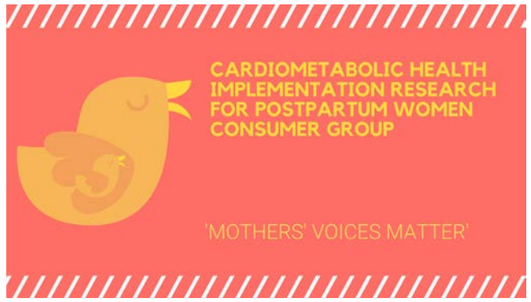
NETWORKS

We convene one national and two international networks.

Preconception Health Network Au

Under the auspices of CRE HiPP, we run the National Preconception Network which was formed to link clinicians, community members, NGOs and researchers keen to improve preconception health. The Network shares information through newsletters and webinars, and has contributed to government enquiries. The Network has also developed key research priorities and core indicators to monitor preconception health. However, Health Systems and Equity has led work identifying that these data to assess core indicators are not reported, and this is an area for future focus.

https://hipp.org.au/networks/preconception-health-network/



CHiRP (Cardiometabolic Health Implementation Research for Postpartum individuals) is a team of international researchers interested in improving the health and wellbeing of women with young children. This work is informed by a consumer group with over 100 individuals born in more than 20 countries.

https://hipp.org.au/networks/chirp/

Western Pacific Preconception Health Network

The Western Pacific Preconception Health Network was established in 2024, to bring together broad stakeholders to identify what are the key priorities in preconception health in the region; what is currently being done, and how can we learn from each other and work together to improve preconception health in our region. Current members of the committee include representatives from Malaysia, Singapore, Japan, the Pacific and Australia.

In November, we held the first Western Pacific Preconception Health Conference in Kuala Lumpur, Malaysia titled "Exploring Challenges, Opportunities, and Partnerships to Advance Preconception Health and Care in the Western Pacific". The organising committee was co-led by A/Prof Jacqueline Boyle and Dr. Nisha Angela Dominic (Monash University Malaysia), and managed by Dr Asvini Subasinghe and Dr Vithya Velaithan (Monash University Malaysia). Presentations addressed the life-course approach to preconception health for all individuals across basic science, health promotion, clinical trials and digital health. Many early and mid-career researchers were given the opportunity to co-chair sessions, including our PhD student in preconception health, Peng Xue. This network will join forces with the Australian Preconception Health Network from 2026, to run webinars and distribute newsletters across the region on preconception research, care and policy. The next conference will be held in Japan in 2027.

https://www.monash.edu/medicine/ehcs/health-systems-and-equity/partnerships-and-networks/western-pacific-preconception-health-network

Jacqui Boyle and colleagues at the Western Pacific Preconception Health Conference, Kuala Lumpur

EARLY- TO MID-CAREER RESEARCHER SUCCESS

Three of our PhD students presented at international conferences on their work in gestational diabetes (GDM) in 2025.

Dr Wubet Takele had two papers published on trends in gestational diabetes and spatial mapping in gestational diabetes, highlighting "hotspots" which identified areas and populations which could benefit from increased support in prevention and management of GDM, and subsequent increased risk of type 2 diabetes. There was a lot of interest nationwide, where the work was shared in over 190 media outlets with an estimated reach of >11M people, and findings were highlighted in an article on MJA Insight.

https://bmjopen.bmj.com/content/15/10/e101272

HIGHLIGHTED PROJECTS

In 2025, our partnership with Diabetes Victoria focused on strengthening equity-focused prevention work through the Life! program, including progressing the Heart Foundation Vanguard projects (in Chinese and South Asian communities); completing an equity audit; and evaluating the Life! GDM pilot developed within our partnership. The year featured active grant activities (e.g. VicHealth), renewal of the Memorandum of Understanding, and growing emphasis on preconception health, menopause, stigma, and culturally tailored resources. Building on this partnership, we have also expanded our collaborations with other health services and community partners, including Whitehorse Council, Migrant Information Centre and Neighbourhood Houses.

BUILDING PARTNERSHIPS IN OUR REGION

We are building international partnerships and networks, particularly focused in our region, through a range of activities across Malaysia, Indonesia, Thailand and Nepal.

A number of projects have been undertaken in close partnership with our colleagues at Monash University Malaysia. Additionally, A/Prof Boyle and Dr Siew Lim co-supervise PhD students through the GEM scholarships at Monash University Malaysia. This has led to A/Prof Boyle and Dr Lim being appointed to adjunct positions at Monash University Malaysia.

Siew Lim and colleague at the MUM Retro Night

WOMEN'S HEALTH INCUBATOR (WHINC): A COLLABORATION WITH ACTION LAB AND SEACO (MONASH UNIVERSITY MALAYSIA)

Investigators. Siew Lim, Jacqueline Boyle

The Women's Health INCubator (WHinc) project was a collaborative project with investigators at Action Lab Monash and Monash Malaysia, and is based at four health demographic surveillance systems (HDSS) in Malaysia (SEACO), Indonesia (Sleman), and Thailand (Kanchanaburi).

We built a prototype on community participatory processes in developing data platforms for the HDSSs, using women's reproductive health as an exemplar. We have successfully mapped services and processes across the HDSS, and undertaken a pilot reproductive health survey across the HDSS to assess feasibility of shared data collection processes and analysis.

WOMEN'S HEALTH RESEARCH NETWORK MALAYSIA

Investigators: Jacqueline Boyle and Siew Lim

A Women's Health Research Network in Malaysia has been established with A/Prof Boyle and Dr Lim contributing international members of the network.

PERINATAL MENTAL HEALTH

Investigators: Areni Altun and Jacqueline Boyle

Funders: Australian Health Research Alliance Women's Health Research, Translation and Impact Network (AHRA WHRTN)

In 2024, we began work focused on improving access to perinatal mental health support for migrant and refugee women. This program of research included a qualitative co-design study of digital perinatal mental health resources, and resulted in two peer-reviewed publications examining the quality, accessibility, and cultural inclusivity of digital mental health tools. As part of this work, Dr Altun and A/Prof Boyle facilitated a multidisciplinary perinatal mental health workshop in February, involving researchers, clinicians, and policy stakeholders to identify system-level barriers and opportunities for improving care delivery.

Findings from this research were disseminated at national conferences, including the Perinatal Society of Australia and New Zealand (PSANZ) and the Public Health Association of Australia (PHAA). Building on these outputs, Dr Altun has established ongoing collaboration with Eastern Melbourne Primary Health Network (EMPHN), to develop a digital service directory to support navigation and social prescribing for perinatal mental health care. This work aligns with the unit's focus on health equity and integrated care, with a particular emphasis on culturally responsive, accessible, and system-informed digital health solutions.

EMPHN GP DEMONSTRATION PROGRAM (GP DEMO)

Investigators: Areni Altun and Jacqueline Boyle

Funders: EMPHN

The GP Demonstration Model (GP Demo) is an initiative designed to integrate mental health support within general practice, to improve access, coordination, and continuity of care. This model focuses on embedding evidence-based, person-centred mental health support into routine primary care; strengthening the role of GPs in early identification, referral, and ongoing management, with a particular focus on meeting the needs of marginalised communities, including people from migrant backgrounds, and those experiencing insecure housing. The project is being undertaken in collaboration with Action Lab at Monash University, supporting a co-designed, systems-based approach that brings together researchers, clinicians, and implementation experts. This partnership enables the development and testing of a scalable service directory of integrated care options, including both community and clinical services that are responsive to community needs and aligned with broader health system priorities.

https://doi.org/10.26180/30702803

HRIDAYA: CO-DESIGNING MULTI-LEVEL INTERVENTION TO IMPROVE CONTINUUM OF CARE FOR HYPERTENSION AND DIABETES IN NEPAL

Investigators: Rajshree Thapa and Jacqueline Boyle

Funders: Global Alliance of Chronic Disease, NHMRC

In 2024 we began the HRIDAYA project, designed to increase identification of adults in the community with diabetes and hypertension in three municipalities across Nepal. This project aims to improve ongoing care and management after diagnosis, through understanding how to connect community and services, and utilise primary healthcare workers and female community health volunteers. We are working closely in-country with the Nepal Development Society (NeDS).

In 2025, we undertook extensive stakeholder engagement, and with our partners at Action Lab Monash University, we co-designed and pilot tested an app to support both study data collection and clinical follow-up. We have had the opportunity to share learnings with other international GACD projects in the Healthy Cities Stream; and with other GACD funded projects in chronic disease in other streams in Nepal; and ran workshops at the GACD meeting in Rwanda in June.

A/Prof Boyle is co-chair of the Healthy Cities Stream and both she and Dr Thapa are members of the Equity EnMesh working group of the GACD.

Roundtable discussion facilitated by the HRIDAYA team in Kigali, Rwanda

PERSON-CENTRED RESEARCH

DIRECTOR: A/PROF SANDRA NOLTE

The Person-Centred Research Directorate is dedicated to strengthening the voice of patients – and consumers more broadly – by advancing the measurement of person-reported outcomes (PROs). Our work centres on the development, evaluation, translation and cultural adaptation, and implementation of PRO measures for use in both clinical practice and research.

THE TEAM

Since its launch in August 2024, the Directorate has grown to include five researchers (pictured below):

Director A/Prof Sandra Nolte

Sandra brings more than 20 years of experience in PRO research across academia, the not-for-profit sector, and consulting. She has published extensively, consistently secured competitive research funding, and held leadership roles across major international PRO organisations. She is the current President of the International Society for Quality of Life Research (ISOQOL), Deputy Chair of ANZUP's Quality of Life Subcommittee, and a member of the Australian Pan Cancer Advisory Board, a national initiative led by Movember and Cancer Australia. Her previous roles include serving on the ISOQOL Board, co-chairing PROMIS International, and serving on the Executive Committee of the European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Group.

Dr Tamara Jones

Tamara is an exercise physiologist and early-career researcher. Her research focuses on improving the wellbeing and quality of life of people with cancer, with a particular focus on PRO measures of treatment-related side effect burden. She has experience in the design and delivery of supportive care and exercise oncology trials, including the application of behaviour change theory within intervention development and implementation. She is currently involved in the EORTC Q168 project, which aims to advance the measurement of treatment-related side effect burden in cancer research. She also serves on the EHCS Wellbeing Committee and is Co-Chair of the EHCS Early Career Researcher Committee.

Dr Lucy Busija

Lucy is an experienced biostatistician, proficient in a wide range of statistical methods. Her major areas of expertise are modelling the impact of chronic illness on public and individual health, and design and analysis of randomised controlled trials, with a particular focus on the use of PROs. Lucy also has a special interest in the development and psychometric evaluation of PRO measures. Lucy joined the team to lead the development of the PRO-specific Statistical Analysis Plan for an international clinical trial in melanoma.

Dr Jonathon Little

Jonathon is a dual-qualified professional, accredited as a statistician with the Statistical Society of Australia and registered as a psychologist with the Australian Health Practitioner Regulation Agency. He is also a member of the Australian Association of Psychologists and the Psychometric Society. Jonathon specialises in advanced statistical modelling and psychometric test development, bringing more than two decades of experience across academic, clinical, and applied research settings. Jonathon works across PRO projects of the Directorate.

Claire Samanna

Claire is an exercise physiologist and early-career researcher within the Directorate. She is currently leading an EORTC-funded multi-national validation study of the ELderly Functional Index (ELFI) as an indicator of frailty in cancer patients. Her prior research has centred on PROs and magnetic imaging-based methods in the assessment of chronic conditions, with experience in exercise-based interventions, randomised control trials, and meta-analysis methods. She is now bringing this expertise into the oncology and frailty space, with the ELFI project marking the foundation of her work in advancing functional and person-centred outcomes in cancer populations.

Kheng Soo, Tamara Jones, Sandra Nolte, Lucy Busija, Jonathon Little and Claire Samanna

OVERVIEW OF ACTIVITIES

In 2025, we launched two projects funded by the EORTC Quality of Life Group and participated in 12 grant opportunities as lead or co-investigator. Four of these were successful, including one led by the Directorate. We were highly active across learned societies and both national and international PRO initiatives, taking on leadership roles within ISOQOL, the ANZUP Quality of Life Subcommittee, and Movember Pan Cancer Initiative, which is focused on developing a Core Outcomes Set of Cancer Patient-Reported Measures. We also contributed to the PRO Working Group of the Clinical Oncology Society of Australia (COSA) and the ISOQOL Australia and New Zealand Special Interest Group.

In May 2025, we were delighted to welcome Dr Sunil Shrestha (pictured right) from Kathmandu, Nepal, who joined the Directorate as an Honorary Research Fellow and visited our team in Box Hill.

PROJECT HIGHLIGHTS

EVIDENCE GENERATION FOR EORTC SIDE EFFECT BURDEN ITEM Q168

Investigators: Tamara Jones; Sandra Nolte (Principal Investigator together with Claire Piccinin, EORTC Headquarters)

Funding sources: EORTC Quality of Life Group

EORTC item Q168 and FACIT item GP5 are highlighted by the US Food and Drug Administration (FDA), as examples of single-item measures for assessing patient-reported side effect burden in cancer treatment. However, evidence supporting the use of single items to capture overall side effect burden remains limited. This project aims to address this gap by evaluating the psychometric properties of single-item measures of side effect burden. Using both qualitative and quantitative methods, this project aims to generate evidence to support (or refute) the use of single-item measures in clinical trials and cancer research. To date, three manuscripts have been drafted: a narrative review outlining guidance for the use of single-item measures; a systematic scoping review examining their use and validation in cancer research; and initial psychometric analyses based on cross-sectional data. In addition, a protocol has been prepared for the prospective collection of longitudinal patient-reported side-effect burden data. Preliminary findings have been disseminated at national and international conferences, with further outputs planned as data collection and analyses progress.

THE ELFI PROJECT: ELDERLY FUNCTIONAL INDEX AS AN INDICATOR OF FRAILTY IN CANCER PATIENTS

Investigators: Claire Samanna, Jonathon Little; Kheng Soo & Sandra Nolte (Principal Investigators)

Funding sources: EORTC Quality of Life Group

Awarded in 2025, this project will undertake an international, quantitative validation of the ELderly Functional Index (ELFI), a person-reported composite derived from EORTC items to assess functional status and support frailty-risk screening, developed by Drs Kheng Soo and Madeleine King. The ELFI is a composite score built from existing EORTC items already used in routine practice, offering a practical and efficient way to assess functional status as an indicator of frailty. Because full frailty assessments can be time-consuming and difficult to implement consistently, ELFI provides a low-burden alternative suitable for both clinical and research settings. The study will evaluate measurement performance across languages and settings, with participating sites across Europe and Australia, generating new evidence of its psychometric properties and supporting its use in cancer populations. Work to date has focused on protocol development, governance preparation, and international site engagement, with upcoming steps including ethics submission and the commencement of data collection.

MELANOMA MARGINS TRIAL (MELMART): A PHASE III, MULTI-CENTRE, MULTI-NATIONAL RANDOMISED CONTROL TRIAL INVESTIGATING 1CM V 2CM WIDE EXCISION MARGINS FOR PRIMARY CUTANEOUS MELANOMA

Investigators: Lucy Busija, Sandra Nolte

Funding: Melanoma and Skin Cancer Trials Ltd

The MelMarT-II trial is aimed at exploring non-inferiority of a 1cm- versus a 2cm-excision margin as part of melanoma surgery, in view of disease-free survival (primary outcome), with quality of life and neuropathic pain among the secondary outcomes. Our contribution to the trial is the development of a PRO-specific statistical analysis plan and the creation of Stata-based code for scoring and analysis of the PRO data (https://clinicaltrials.gov/study/NCT03860883).

EXPLORATION OF STRENGTHS-BASED TRANSLATION OF EQ-5D-Y

Investigators: Lead-Investigator Prof Kim Dalziel (The University of Melbourne), Sandra Nolte (collaborator/Steering Committee member)

Funding: EuroQol Group

Few PRO instruments for children use ‘strengths-based’ language, but instead rely on reporting concerns and problems, as is the case with the EQ-5D-Y; i.e., the youth version of the popular EQ-5D instrument. This can be problematic for inclusion of some children and families such as those with children with life limiting conditions and/or serious disability. A deficits focus can threaten a child participant’s self-esteem, produce ethical concerns, and may inaccurately conflate ill-health with poor quality of life, despite research showing these are distinct concepts. This project aims to explore the views and experiences of parents and young people regarding positive versus problem-based item wording aligned to the EQ-5D-Y, and explore potential for developing an EQ-5D version that utilises positively worded language.

IN-KIND CONTRIBUTIONS TO NATIONAL AND INTERNATIONAL PRO PROJECTS

In addition to above projects, we contributed in-kind to various international (ongoing) PRO projects, including:

- methodological contribution to (and future data collection for) the EORTC QLQ-ELD14 module update, a module for elderly cancer patients.
- methodological contribution to the “Update of the EORTC QLQ Reference Values Manual (RefVal)”.
- contribution of a chapter on general population normative data to the “Development of an EORTC Interpretation Guideline for the EORTC PRO measures”.
- facilitation of data collection at the Royal Children’s Hospital for two EORTC-funded projects in CAYA (children, adolescents, and young adults), i.e., “Development of EORTC Quality of Life Assessment Tools for Children with Cancer Younger than 8 Years: phase I and II” and “Health-Related Quality of life of Young Survivors of Cancer”.
- methodological contribution to the “phase I-II study exploring the feasibility of developing a cancer screening health-related quality of life questionnaire”.

CONFERENCES

Our engagement in international conferences and scientific meetings included the Spring Meeting of the EORTC Quality of Life Group in Rotterdam, the Netherlands, in March 2025; Tamara and Sandra kicked off the EORTC Q168 project, and Sandra presented a new project idea for funding in 2026. This was followed by the Autumn meeting of the EORTC Quality of Life Group in Copenhagen, Denmark, in September 2025 where Tamara delivered an update on the EORTC Q168 project.

In October 2025, Sandra travelled to the ISOQOL annual conference in Milwaukee, USA, to present our EORTC work and engage in Board activities. As part of the meeting, she was inaugurated as new President of the Society. In November 2025, Tamara travelled to the joint COSA-IPOS conference in Adelaide, to present on our EORTC Q168 work.

Lastly, the year ended with Sandra's attendance of the inaugural "Advancing Patient-Centred Research Down Under Conference" in Sydney where she spoke on behalf of ISOQOL at the opening ceremony of the conference and presented EORTC work. The meeting was co-organised by the ISOQOL Australia- New Zealand Special Interest Group and the ISPOR Australia and New Zealand Chapters.

This year was highly productive in terms of publishing peer-reviewed articles. A special highlight was the publication of a systematic investigation of state-of-the-art methods and recommendations by payers and regulatory authorities on the interpretation of PRO-derived change scores, together with volunteer members of the Drug Information Association (DIA), a global multidisciplinary life science membership association.

A second highlight was a publication on the EORTC measurement strategy. Both publications had been in the works for several years. Peer-reviewed publications with involvement from the Person-Centred Research team can be found in the Publications section of the Annual Report.

Sandra Nolte engaging with colleagues at conferences in 2025

MONASH ADDICTION RESEARCH CENTRE

DIRECTOR: PROF DAN LUBMAN AM
DEPUTY DIRECTOR: PROF SUZANNE NIELSEN

The Monash Addiction Research Centre (MARC) consists of a small hub of staff at the Monash Peninsula Campus, and a larger virtual network of over 160 academics across seven faculties and five institutes at Monash University, making it one of the largest addiction research centres in the world.

MARC hub staff 2025 (pictured above)
Top L-R: Prof Suzanne Nielsen, Dr Louisa Picco, Fred Fox, Dr Kirsty Scholes Balog, Dr Tina Lam, Prof Dan Lubman.
Bottom L-R: Rose Laing, Leanne Vosper, Dr Ting Xia, Dr Bosco Rowland
Absent Dr Ali Cheetham

MARC's mission is to provide research excellence, national thought leadership, and education to develop, deliver, and evaluate effective policy and practice approaches for addiction.

In 2025, MARC members across Monash University were Chief Investigators on addiction-related grants totalling over $47M, and published over 260 peer-reviewed articles (this includes over $6.5M in grant funding and 42 peer-reviewed publications from MARC hub staff). This exponential growth in grant income over the past year demonstrates the enormous impact of MARC members within the field, and the critical importance of interdisciplinary collaboration in finding solutions to the challenges of addiction.

2025 MARC RESEARCH SYMPOSIUM

In May, MARC held its inaugural Research Symposium, bringing together leading voices from across Monash University and the broader sector, for a dynamic day of discussion and knowledge exchange focused on harms relating to alcohol, other drugs, and gambling. Highlights included an inspiring panel discussion where high-level policymakers and sector leaders reflected on how to embed evidence into everyday policy and systems, and an invited address by A/Prof Shalini Arunogiri on clinical trials at MARC, illustrating the full research pipeline from innovation to implementation.

At the conclusion of the event, Dr Monica Jung (pictured below) was presented with the 2025 MARC PhD Publication award for her paper titled Opioid characteristics and nonopioid interventions associated with successful opioid taper in patients with chronic noncancer pain.

Dr Ryan Baldwin (pictured below) was the recipient of the 2025 MARC EMCR Publication award for his paper titled Differences in ambulance attendances between children with and without an identified history of out-of-home care. Ryan was also the recipient of the Best Poster award, for his poster titled 'Does less drinking mean less harm? Examining alcohol-related ambulance attendances in young people'. This award was voted on by symposium attendees.

Richard Armour (pictured below) was the winner of the Best Presentation from an Emerging Researcher award, for his presentation titled 'Initiation of opioid agonist therapy using buprenorphine in the emergency department or emergency out of hospital setting: a mixed-methods systematic review', again voted on by the symposium attendees.

PHD AND EMCR NETWORKS

The MARC PhD network comprises 32 students, while the EMCR network comprises 53 early- and mid-career researchers engaged in addiction-related research across Monash University. In November, the MARC PhD network, together with the MARC EMCR network, hosted tours of the newly opened permanent pill testing facility in Fitzroy, Melbourne (pictured below). The visits offered unique insight into how the service empowers individuals by providing accurate information to support safer choices.

POLICY AND ADVOCACY

In 2025, MARC continued its policy and advocacy work by actively engaging with state and federal government inquiries, including a submission to the Therapeutic Goods Administration's review of the safety and regulatory oversight of unapproved medicinal cannabis products and a submission to the Productivity Commission's interim report on the National Mental Health and Suicide Prevention Agreement.

AWARDS AND ACHIEVEMENTS

Many MARC members were recognised for their outstanding achievements in 2025. Highlights include:

The Prescription Opioid Safety Toolkit received a prestigious Australian Good Design Award Gold accolade and won the Victorian Premier's Design award for Service Design. The team involved in this project included MARC Deputy Director Prof Suzanne Nielsen, MARC Research Fellow Dr Louisa Picco, and Dr Alex Waddell and Dr Dhruv Basur from Monash's Action Lab.

Dr Louisa Picco, NHMRC Emerging Leader Research Fellow and MARC Program Lead for Drug Policy and Harm Reduction, was awarded the Public Health Researcher Award in the 2024-25 Premier's Awards for Health and Medical Research, for her work in addressing and reducing opioid-related harm.

Dr Louisa Picco was the recipient of the Kyp Kypri Early Career Award at the APSAD conference and Prof Suzanne Nielsen was inducted as the APSAD President.

Prof Dan Lubman was elected as a fellow to the Australian Academy of Health and Medical Sciences (AAHMS), one of the highest honours in Australian health and medical sciences.

Rose Laing (MARC PhD student) won the People's Choice Award at the EHCS Three Minute Thesis (3MT) competition.

THOUGHT LEADERSHIP

MARC, together with University of Sydney colleagues, hosted a workshop in September bringing together experts in the field and consumer representatives to discuss key learnings from opioid stewardship approaches, and broader principles for managing high-risk medicines. The Beyond Opioids workshop aimed to identify important evidence gaps that could inform future research and approaches to improve the quality use of high-risk medicines. Collectively, the information gathered during the workshop will be used to develop a set of evidence gaps and recommendations to guide future policy, practice, and research.

RESEARCH FUNDING HIGHLIGHTS

RELIEVE - RESEARCH INTO EFFECTIVE TREATMENTS FOR PAIN AND OPIOID DEPENDENCE INCORPORATING LIVED EXPERIENCE VOICES AND EVIDENCE

Investigators: Prof Suzanne Nielsen, ….., Prof Dan Lubman et al

Funder: Medical Research Futures Fund (MRFF)

Almost one in two people in opioid dependence treatment (i.e. prescribed buprenorphine or methadone) have current chronic non-cancer pain. Yet, despite the high prevalence, chronic pain is often severe and undertreated in people with opioid dependence. A critical gap exists in the management of co-occurring pain and opioid dependence in Australia, and multidisciplinary pain treatment approaches are needed for people with opioid dependence.

In this study, the research team will employ a two-stage research approach to firstly co-design and then test a non-pharmacological pain management program with consumers (i.e. individuals with chronic pain and opioid dependence) and service providers (i.e. drug treatment or pain management clinicians).

By developing and testing a complimentary suite of feasible, accessible, and effective non-pharmacological pain management approaches, this project aims to design an innovative pain management program for people with concurrent chronic pain and opioid dependence, which will translate into health benefits through improved pain treatment.

This project is a collaboration between Monash University, the Self Help Addiction Resource Centre, University of Sydney, Burnet Institute, Harm Reduction Victoria, cohealth, Turning Point, and South Eastern Sydney Local Health District Drug and Alcohol Services.

TRANSFORMING OPIOID DEPENDENCE THROUGH DATA-DRIVEN CO-DESIGN

Investigators: Prof Suzanne Nielsen, ….., Dr Ali Cheetham

Funder: NHMRC

Opioid agonist treatments, including methadone and buprenorphine, are the gold standard for opioid dependence, with strong evidence supporting their clinical and cost-effectiveness. Despite this, treatment availability in Australia remains inadequate, with current capacity needing to double to meet demand. Challenges such as geographic disparities, prescriber shortages, and system inefficiencies limit access, particularly for key populations like those prescribed opioids for chronic pain. The healthcare burden of opioid dependence is significant, with high service utilisation and substantial costs exacerbated by an ageing cohort of people receiving opioid dependence treatment, and regional disparities in treatment availability.

Recent policy changes, including the listing of methadone and buprenorphine on the PBS, offer an opportunity to make treatment more accessible, and provide an important opportunity to use treatment data to better understand how different approaches to treatment delivery impact health outcomes. In parallel, prescriber numbers are declining, and innovative models of care—such as telehealth, expanded pharmacist and nurse practitioner roles, and integrated service hubs—are developing, but lack rigorous evaluation to inform upscaling. This project will leverage national administrative data and emerging care models to inform more effective and sustainable treatment strategies.

Using a mixed-methods approach, we will convene three expert panels (a consumer, stakeholder, and Indigenous panel) to identify key research priorities, analyse national datasets to assess treatment accessibility and healthcare utilisation, and integrate findings from innovative pilot programs. Through stakeholder engagement and co-design, we will develop and refine evidence-based models of care, ensuring optimal resource utilisation and improved patient outcomes.

This project is a collaboration between Monash University, The University of NSW, Poche Centre for Indigenous Health and Medical School (The University of QLD), Burnet Institute, and Harm Reduction Victoria.

HIGHLIGHTS FROM COMPLETED RESEARCH PROJECTS

PRESCRIPTION OPIOID SAFETY TOOLKIT

Investigators: Prof Suzanne Nielsen, Prof Paul Dietze, Ms Monika Boogs, Mr Jarrod McMaugh, and Dr Louisa Picco

Funder: Department of Health and Aged Care

In Australia, opioid use is a leading cause of preventable injury, chronic disease, and death, causing over 1,000 deaths and costing AUD$15.7 billion annually. Harms extend beyond deaths, to include non-fatal overdoses and dependence. Prescription opioids have driven most of this harm over recent decades. Despite this, people who are prescribed opioids have rarely been the focus of overdose prevention efforts. Evidence has also shown that healthcare providers are often reluctant to have conversations around opioid related risks. Knowing this, there is a need to improve health literacy about the role of opioids in chronic pain management, and to empower consumers to discuss their use of opioids, including any concerns about safety with their prescribers and pharmacists. To address these gaps, this project aimed to:

- Co-design and pilot test a consumer resource, ‘Opioid Safety Toolkit’; and
- Develop and implement a national communication and dissemination plan and evaluate the Opioid Safety Toolkit.

The Opioid Safety Toolkit was designed and developed over nine months using co-design processes. A total of seven two-hour workshops were conducted, three with healthcare professionals and four with consumers. Following this, user testing interviews were conducted with consumers who had not yet interacted with the Toolkit to test its usability.

The dissemination phase was undertaken in partnership with the national peak organisation representing consumers with pain (Painaustralia), and the national pharmacist peak body, the Pharmaceutical Society of Australia, to implement a national dissemination plan with national reach.

This project has addressed a considerable gap, creating a digital resource with tailored information for people prescribed opioids for pain. The Toolkit was created in consultation with consumers, ensuring the content, messaging, feel and flow are appropriate and meet the needs of this population. This is further highlighted by the Opioid Safety Toolkit being awarded a 2025 Good Design Award Gold Winner for public sector services (https://good-design.org/projects/prescription-opioid-safety-toolkit/), and was the winner of the 2025 Victorian Premier's Design Award, for service design (https://premiersdesignawards.vic.gov.au/entries/2025/service-design/prescription-opioid-safety-toolkit).

Extensive uptake among consumers (accessed over 100,000 times) demonstrates the need for such a resource, in addition to high satisfaction with the Toolkit. With approximately one-third of Australian pharmacies agreeing to promote the Toolkit, this further demonstrates widespread support for this resource. A broad range of other organisations have now embedded the Toolkit into their websites, including Healthdirect, Harm Reduction Australia, Pharmaceutical Society of Australia, Painaustralia and several Primary Health Networks (PHNs), providing additional evidence of the utility, need and acceptability of this consumer resource. Since the launch of the Toolkit in August 2024, there continues to be an increase in the supply and number of service providers providing naloxone.

This project was a collaboration between Monash Addiction Research Centre (MARC), the Burnet Institute, the Pharmaceutical Society of Australia, and Painaustralia.

LABORATORY PROGRAM

The EHCS laboratory is on the ground floor (level 1) of 5 Arnold Street, Box Hill and is staffed by Dr Pavel Sluka and Mr Hady Wardan. The laboratory offers a range of services on site, including tissue culture, flow cytometry, cell sorting, ELISA, microscopy, qPCR, droplet digital PCR, and reverse phase liquid chromatography. We are also part of the Victorian Cancer Biobank consortium, comprising Eastern Health, Austin Health, Melbourne Health, Monash Health, and Peter MacCallum Cancer Centre.

The EHCS laboratory team works closely with other groups within Monash including the Biomedicine Discovery Institute, and has collaborations with other groups such as WEHI, Peter MacCallum, Austin, Olivia Newton-John Cancer Centre, and others. This broad network enables access to a broad range of technology platforms for researchers based at Eastern Health.

The laboratory facilities are provided through Monash University EHCS to support local researchers. The laboratory includes an area for processing and storage of blood samples by clinical trial study coordinators. These activities are enabled by equipment including refrigerated centrifuges, fume hood, refrigerators, -20°C and -80°C freezers, and liquid nitrogen dewars in a room with dedicated air handling.

Basic and translational research work is key to many research projects. The laboratory team is available for advice and to provide practical support for anyone requiring these technologies and systems for their research. This may include induction into the laboratory environment, instruction in laboratory techniques, supervision and oversight, advice on experimental design and interpretation of results, and (depending on the nature of the request), assistance with specific laboratory work and assays.

Laboratory safety requires careful procedures, adequate facilities, and comprehensive documentation. The team develops and maintains risk assessments and risk mitigation strategies, reporting regularly to the EHCS Health Safety and Wellbeing Committee and to relevant Faculty and university committees. The laboratory underwent a spot audit in 2025 and passed with no significant findings: “a very good example of laboratory order and management.” The EHCS laboratory was also recognised in 2025 for its sustainability initiatives, being the first laboratory in Australia and New Zealand to receive Green Impact Labs Accreditation under the GILA-ANZ initiative (https://greenimpact.acts.asn.au/accreditations/).

The main activities of the laboratory in 2025 continued to be in support of the uro-oncology translational research program, headed by Prof Ian Davis and Prof Shomik Sengupta, and now with additional leadership through Dr Edmond Kwan. Work supported by an NHMRC Investigator Grant L3 held by Prof Davis concentrated on development and validation of a novel method for the detection of tumour-derived DNA in blood or urine for patients with urothelial cancers, with several manuscripts now at various stages of development or submission. Dr Kwan’s program will increasingly see work swing back to investigation of circulating tumour DNA in prostate cancer and changes in prostate cancer genomics over time. This will be part of the novel PROXIMITY platform initiative led by Dr Kwan, linking various hospitals and research centres across Australia and the Asia-Pacific region. Several other groups also use the laboratory facilities, including Nephrology, Gastroenterology, Endocrinology, Haematology, and the ECRU Translational Research Division led by A/Prof Tony Dear.

RESEARCH VIGNETTES

DR EDMOND KWAN – TRANSLATIONAL PROSTATE CANCER RESEARCH

In 2025, Dr Edmond Kwan established a translational prostate cancer research program spanning Eastern Health Clinical School (EHCS) and the Monash Biomedicine Discovery Institute (BDI). This shared appointment reflects a new partnership between EHCS and the BDI, designed to strengthen the interface between clinical oncology and translational laboratory science. Focused on advanced prostate cancer, the program combines liquid biopsy, metastatic tissue sampling, and biomarker discovery to better understand tumour biology and support the development of more personalised treatment approaches for patients. In doing so, it is helping build Monash and Eastern Health’s capacity for clinically embedded translational cancer research in genitourinary oncology.

A major milestone during the year was publication of a world-first circulating tumour DNA study from the TheraP clinical trial, an international collaboration between the Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP) and the Vancouver Prostate Centre. Published in Nature Medicine, this work showed that analysing tumour-derived DNA fragments in blood could help distinguish which patients with advanced prostate cancer were more likely to benefit from Lutetium-PSMA radioligand therapy, rather than chemotherapy, illustrating how liquid biopsy may support more individualised treatment selection. This work was further recognised through Dr Kwan’s selection as a finalist in the Victorian Premier’s Award for Health and Medical Research. In parallel, Dr Kwan has begun establishing the Eastern Health Prostate Cancer metastatic biopsy program, creating new opportunities to integrate tissue-based sampling with blood-based profiling, to build closer collaborations across oncology, interventional radiology, pathology, and translational research. Together, these efforts reflect a broader strategy: to build a clinically embedded research program that uses blood-and tissue-based profiling to understand what is biologically distinct about each patient’s cancer, and to support more tailored treatment approaches.

This momentum was further strengthened through involvement in the successful Prostate Cancer Foundation of Australia $5 million Ignite Synergy funding bid. The funded, multi-institutional initiative focuses on theranostics, an emerging treatment approach that pairs molecular PET scan imaging with targeted radiation therapy to better select and treat patients with advanced prostate cancer.

As part of the successful grant team, Dr Kwan’s laboratory will lead the blood-based translational analyses, contributing biomarker expertise to a national effort to improve how these novel therapies are developed and applied. This work sits alongside broader collaborations with other leading Australian centres in prostate cancer theranostics, including St Vincent’s Hospital in Sydney. Together, these partnerships help connect Monash University and Eastern Health to major national centres of excellence in prostate cancer clinical care and patient-centred research.

Looking ahead, a defining feature of this program will be its focus on broadening community access to genomic testing. Through a planned collaboration with researchers at the Walter and Eliza Hall Institute, the next phase of this work will aim to build more inclusive research pathways for culturally and linguistically diverse (CALD) communities, as well as patients treated in outer-metropolitan and regional settings. This includes practical strategies such as virtual consent, translated study materials, and blood collection workflows that can support participation, even when specialist on-site processing is not available. Support through the Monash Partners STAR Fellowship will help enable this next phase of translational development. Together, these priorities position Monash University and Eastern Health to help shape a model of translational prostate cancer research that is scientifically ambitious, while remaining responsive to the needs of the diverse populations they serve.

NAVAIDD STUDY: ADVANCING ACCESSIBLE AND INNOVATIVE DEMENTIA DIAGNOSIS

The Neurofilament Light Chain and Voice Acoustics in Dementia Diagnosis (NAVAIDD) study is a research initiative investigating the clinical utility of neurofilament light chain (NfL) and digital biomarkers, to improve the accuracy and timeliness of dementia diagnosis. A key strength of NAVAIDD is its commitment to inclusivity, with recruitment conducted across Eastern Health sites, and a strong focus on engaging a diverse cohort, including participants from non-English speaking backgrounds.

Since its commencement in 2021, the study has continued to expand with 670 participants recruited out of an expected 1,000 participants. We secured six major funding sources from the NHMRC, Victorian Medical Research Acceleration Fund, Redenlab Inc, Invitae, Dementia Australia and Monash University. In 2025, the study received additional funding support from the Eastern Health Research Foundation to undertake an economic evaluation of NfL, assessing its cost-effectiveness and savings potential.

In 2025 we engaged in a new partnership with Labcorp, which has enabled early genetic testing for participants at high risk of genetic dementia syndromes, with a streamlined turnaround time of approximately four weeks. Genetic testing is not offered in a streamlined way and this initiative represents an opportunity to develop these systems.

Research publications for NAVAIDD have already commenced. In 2025, collaboration with senior research fellow, Dr Pratishtha Chatterjee, led to the analysis of NfL and p-tau217 levels in a young-onset dementia cohort. Findings from this work have been published in the Journal of Alzheimer's Disease. Further analyses by Dr Chatterjee exploring clinically relevant cut-off values for NfL are currently under peer review. Finally, we published our protocol in December in the Journal of Alzheimer's Disease Reports.

A study cohort of our size presents an opportunity to capture a large, diverse Australian population, and the NAVAIDD study incorporates an optional consent for storage of whole blood DNA and data sharing.

We are pleased to have over 90% of our cohort consented for this, which will allow us to contribute to global initiatives in dementia research. This positions the study as a valuable resource for the broader research community, and supports continued innovation in the field of dementia diagnostics.

As recruitment approaches completion at the end of 2026, the study is on track for final visits at the end of 2027. Looking ahead, the team plans to convene a multidisciplinary panel of experts to develop clinical guidelines and policy recommendations for the appropriate use of NfL in practice. These efforts will be critical in translating research findings into meaningful improvements in dementia care.

ELFI VALIDATION PROJECT

A major research highlight in 2025 was the award of funding from the European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Group for the ELFI Project: ELderly Functional Index as an indicator of frailty in cancer patients. Led by Principal Investigators A/Prof Sandra Nolte and Dr Kheng Soo, this project is coordinated through the Person-Centred Research directorate at Eastern Health Clinical School, with Claire Samanna and Dr Jonathon Little leading operational delivery of the study.

Commencing in 2026, this international validation study will evaluate ELFI, a person-reported composite derived from EORTC quality of life items, to assess functional status and support frailty risk screening. Originally developed by Kheng Soo and Madeleine King, and supported by Eastern Health Cancer Services and Aged Medicine teams, ELFI will now be evaluated across age groups, languages, and settings, with participating sites across Europe and Australia.

The project reflects a shared commitment to integrating geriatric oncology and person-reported outcomes. The study aims to improve the assessment of vulnerability, and support better care for people living with cancer, by developing a scalable, person-centred tool to assess frailty risk.

RICHARD CADE PRIZE FOR SURGICAL RESEARCH

The Richard Cade Prize was established in 2025 through the Eastern Health Upper GI unit, to recognise the best submission to the Eastern Health Research Forum, in the field of surgical research. The award is open to all applicants, however, in the tradition instilled in the unit by Richard Cade as a great teacher and mentor of junior surgical staff, priority will be given to doctors in training, medical students and early career surgeons.

The aim of the prize is to expand surgical research across Eastern Health, promote career development in young aspiring surgeons, and honour the legacy of Richard Cade, a previous Clinical Director of the unit.

The prize consists of a monetary award given to the best surgical presentation at the Eastern Health Research Forum; with half paid up-front, and the remainder paid to support the presentation of the project at a national or international conference.

Richard Cade graduated from medical school in 1972, and received the Michael Ryan Prize for Surgery. He went on to complete surgical training, obtaining FRACS and FRCS in 1980. He then obtained fellowship experience at various centres in the UK over the subsequent three years.

Richard's career, spanning more than 30 years, started as a VMO at the Box Hill Hospital in 1983. He was also affiliated with St Vincent's Hospital from 1983 to 2013, and provided outreach surgical services at Healesville & District Hospital for many years, starting in 1985.

Richard quickly established himself as an esteemed oesophagogastric surgeon. Amongst other accolades, his published results of oesophageal surgery are widely accepted as some of the finest results in the literature, worldwide. He became Head of Hepatopancreaticobiliary/Upper GI Surgery at Box Hill Hospital in 2000, and subsequently, Clinical Director of the Upper Gastrointestinal and Hepatobiliary unit from 2012.

Richard remained actively involved in surgical research throughout his career, resulting in numerous conference presentations and publications. Importantly, he helped to foster and support a strong academic culture among surgical colleagues and juniors. He was also productively involved in clinical governance and academic committees within Eastern Health, at the Royal Australasian College of Surgeons, and the Department of Health.

Richard now enjoys retirement with grandchildren, swimming and cycling, with a strong emphasis on physical fitness. Keeping up his interest and support for academic surgery, Richard continues to attend, and actively contribute to, the surgical research meeting each Tuesday morning.

Dr Richard Cade

UNIT HIGHLIGHTS

AGED MEDICINE RESEARCH AND TEACHING

PROF PĒTERIS DĀRZIŅŠ

The emphasis of academic work in the Aged Care Research Unit continues to be on the translation of knowledge into practice.

This has been in the areas of delirium prevention, delirium recognition and delirium management; optimisation of medication use, optimisation of discharge processes; use of existing hospital data to create dashboards that show care quality indicators; and implementation of evidence-based patterns of inpatient care. With respect to new knowledge creation, there is ongoing work in the fields of biomarkers and speech analysis for the early detection of Alzheimer's dementia; the use of driving simulators for assessing older drivers' fitness to drive; and establishing health-care practitioners' education needs regarding the legal assessment of decision-making capacity. This work has been done in partnership with Eastern Health staff, researchers from the Eastern Health Clinical School, researchers from other Monash entities, including the Monash University Accident Research Centre; researchers from Deakin University, Australian Catholic University, the University of Western Australia, the NHMRC Digital Health Collaborative Research Centre, and the NHMRC Centre for Research Excellence in Enhanced Dementia Diagnosis. This extensive linking with other academic partners reflects the nature of translational research.

To achieve desired change, the hearts and minds of many people, including senior health service managers, must be won, so that they make the commitments needed to implement updated approaches. Incremental change that gradually becomes accepted as business-as-usual can be achieved with demonstration projects, such as those in the area of delirium management. Elements of the work that Dr Penelope Casey did at Eastern Health as part of her Monash University doctoral studies on the recognition and documentation of delirium by nurses, are now business-as-usual. Dr Casey, currently a member of Professor Julie Considine's Deakin University research team at Eastern Health, continues to work in this area; her most recent project is a study of the effect of patients' delirium on their family members and their perceptions about how Eastern Health staff were involved in care.

Over the years, projects regarding delirium have been supported directly by Eastern Health and also by the Eastern Health Foundation; improved care at Eastern Health is a return on this investment.

Change can be particularly challenging, as it often requires reallocation of existing resources and disruption of existing workplace dynamics. Implementation of Acute Care of Older People units in Box Hill and Maroondah hospitals are examples of major change built on best available evidence that has been presented in various ways over a number of years. This is a translation of knowledge into practice.

The Hospital Elder Life Program (HELP) being implemented at the Peter James Centre, as a demonstration project, is the most obvious example of translation of research into practice. The collaboration between Eastern Health and its academic partners to implement the HELP has been made possible by a generous bequest from the estate of Marilyn Maloney. The HELP is an internationally recognised program that aims to improve inpatients' wellbeing and reduce the incidence of delirium. Previous Eastern Health-wide point-prevalence surveys of delirium in inpatients, partly sponsored by the Eastern Health Foundation, showed that approximately one in every six adult patients in medical and surgical units has delirium. Studies elsewhere have shown that the HELP can reduce the incidence of delirium by up to a half. Hence, the potential benefit from the implementation of the HELP to the people served by Eastern Health could be enormous, with a reduction in death, suffering and cost. This HELP demonstration project aims to show it can be implemented at Eastern Health, to provide local evidence of benefit, and provide decision-makers with the opportunity to accept the HELP as business-as-usual, and commit to its implementation across Eastern Health.

ACTIONABLE DASHBOARDS ACCREDITATION PROJECT (ADAPT) NEXT STEPS

In July 2025, the next steps in the actionable dashboard project began. The successful delivery of the first stages (ADAPt EH) exceeded required deliverables, on time and on budget, which has seen the consortium of partners provide funding for next stages. The initial project was a proof-of-concept activity to translate the National Safety and Quality Health Service (NSQHS) Standards into a suite of dashboards to reflect the standards, providing near real-time measurement and monitoring of organisational status. The next steps reflected in the further funding are to test implementation into other settings. Firstly, testing implementation into a hospital environment with a similar digital framework and maturity (i.e. Cerner Oracle EMR), as proof that it can work elsewhere. Then it will be tested in an environment that relies on a different EMR provider (e.g. EPIC), to explore what is required for wider use and commercialisation as a potential solution to address complex and resource intensive NSQHS assessment activity experienced by over 1,300 public and private hospital, and health facilities across Australia.

As a brief reminder of the purpose and function of the ADAPt Dashboards, all health consumers have the right to expect and receive safe and high-quality care that meet expected standards of safety and quality. The ADAPt platform is a complete suite of dashboards that reflect the eight NSQHS Standards, unifies disparate data sources, and automates the calculation and information required for each NSQHS Standard quality measure and its supporting metrics. The platform provides information across the entire health service's patient population, enabling accurate and near real-time insights for continuous quality and safety assurance.

The continued ADAPt collaboration is being funded through the Digital Health Collaborative Research Centre (DHCRC-0310), led and managed by Monash University's Faculty of Medicine, Nursing and Health Sciences, through Eastern Health Clinical School (EHCS), and the Faculty of Information Technology. The collaborating partners are Eastern Health, the Australian Council on Healthcare Standards (ACHS), and the Victorian Department of Health.

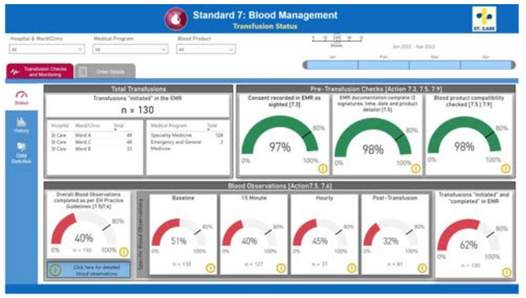
EHCS will continue to provide significant clinical and research expertise into this project. Greg Duncan is the project manager and Cathy Ngo is the clinical and quality Research Fellow. Ian Davis and Pēteris Dārziņš continue to contribute as Chief Investigators. The Monash University team (ECRU and Faculty of IT) continues to provide project management and academic expertise to coordinate all elements of the project, contribute critical skills in complex data management and analytics, and frame the implementation science context for project evaluation. Dr Maame Esi Woode, a health economist from the Monash Centre for Health Economics, has joined the team. Maame has developed an economic analysis framework to facilitate a cost-benefit analysis of both the initial work and prospectively moving forward, with new implementation sites to further enhance the evaluations of these projects and inform potential commercialisation efforts.

Other outputs have included a review in Research Australia's magazine, Inspire (https://researchaustralia.org/inspire-magazine/ pp62-3) titled "FROM DATA TO ACTION: Turning performance monitoring into actionable dashboards". Led by our Faculty of IT colleagues, the team had an accepted publication "Managing schema and metric evolution in a clinical performance monitoring system", that has been withheld to protect the IP of the project before commercialisation. We expect it will be released towards the end of the year. The project team has also completed a detailed scoping review, "The role and impact of hospital dashboards aligned to externally-driven quality care frameworks" which is being submitted to a major journal for review.

To get a sense of this work, here are some examples of the high-level dashboards generated using dummy data.

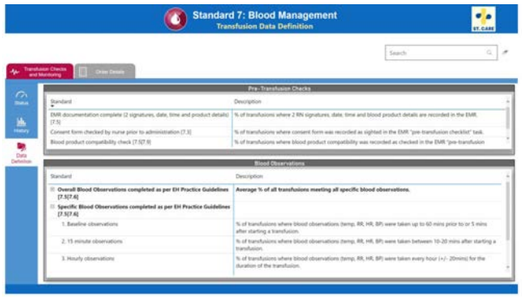
Dummy data dashboard screenshots for **Standard 7**: Blood Management showing:

1. Point in time summary



2. Trend over time

3. Dashboard data definitions

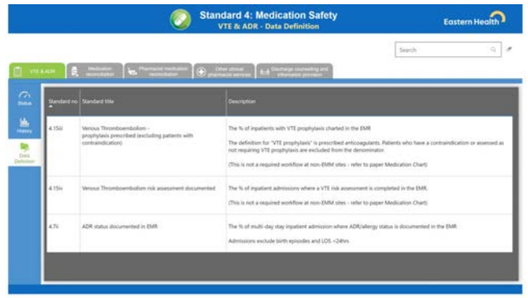


Dashboard screenshots for **Standard 4**: Medication Safety showing:

1. Point in time summary

2. Trend over time

3. Dashboard data definitions



If you would like to discuss the project or explore potential applications, please contact the project manager Greg Duncan (gregory.duncan@monash.edu).

PHARMACOTHERAPY AND WOUND CARE

The Aged Medicine group has always had significant interest in wound care from several perspectives, including clinical practice, research and education. Complex chronic wounds are relatively common in our ageing population and are challenging to address and manage. One of the many factors affecting wound healing, both positively and negatively, is the impact of medications; this is further complicated by the large numbers of medicines commonly prescribed for older people.

This year has seen the group work with the faculty's Graduate Studies in Wound Care group to develop a new unit or "micro-credential" for professional development, that addresses this complex and challenging issue for doctors, nurses, pharmacists, podiatrists and other health professionals. The course is a mix of self-directed and interactive learning with a suite of carefully curated and prepared resources and has been delivered by the aged medicine group twice. Participants were enthusiastic about the course content and structure, and saw significant value added to their clinical practice and patient care, and have come from all key professionals in the area with significant ongoing interest.

For more information go to:

https://www.monash.edu/study/courses/find-a-course/pharmacotherapy-and-wound-care-pdm1222#overview-1

CARDIOLOGY

DR JENNIFER COOKE

Clinical research is an important focus of the Cardiology department, and we are involved in a range of interventional and non-interventional studies. We continue to undertake departmental projects with our advanced trainees, HMOs and students.

OUR TEAM

- Dr Jennifer Cooke, Head of Cardiology
- A/Prof Jaya Chandrasekhar, Clinical Lead, Research
- Dr Jason Nogic, Clinical Lead, Cardiac Intervention
- A/Prof Andrew Teh
- Dr Melanie Freeman
- Dr Jithin Sajeev
- Dr Kah Peck

Under the leadership of Dr Jennifer Cooke as the local Principal Investigator, EH has partnered with researchers at Deakin University and three other Victorian health services in the SAFE HF trial. This innovative trial provides heart failure patients with ongoing support with a Nurse Practitioner in their own General Practice after hospital discharge.

A/Prof Jaya Chandrasekhar is the primary investigator for three international randomized controlled trials and two registries:

1. **RESTORE-MI RCT** aims to assess the role of intracoronary Tenecteplase versus placebo to improve microcirculatory resistance in ST-segment elevation myocardial infarction patients successfully treated with primary percutaneous coronary intervention.
2. **ASPIRE-AF RCT** is an open label trial that aims to examine the role of direct oral anticoagulants in managing patients with provoked atrial fibrillation peri-operatively, during or following an acute non-cardiac medical illness.
3. **COMPLETE-2 RCT** will examine the safety and efficacy of complete revascularisation in acute myocardial infarction patients guided by fractional flow reserve testing versus standard of care using angiography alone. Box Hill Hospital is enrolling eligible patients to the Australia-New Zealand Spontaneous Coronary Artery Dissection registry, and the Australian Bifurcation Registry of patients undergoing coronary stenting to an eligible coronary bifurcation.

Box Hill Cardiology continues to prospectively collect data on patients undergoing percutaneous coronary interventions in the Victorian Cardiac Outcomes Registry (VCOR). We also contribute to the VCOR Cardiac Implantable Electronic Devices registry. Dr Jennifer Cooke continues to provide input as our steering committee and CIED member for VCOR.

A/Prof Jaya Chandrasekhar was announced to be an Emerging Leader in 2025 for the World Heart Federation's Salim Yusuf Emerging Leader Programme, a cohort of 25 candidates from across the globe. The theme of the programme was Artificial Intelligence for Cardiovascular Health through Implementation Research. In 2025, A/Prof Chandrasekhar served as a steering committee member for the Novartis Cardiology Congress held in Melbourne in May 2025, and for the Australian Bifurcation Meeting held in November 2025.

Eastern Health Cardiology presented 11 abstracts at the Cardiac Society of Australia-New Zealand/ ANZET meeting with advanced trainees, HMOs or students as first authors:

1. James Fahey: Successful management of a giant left atrial appendage aneurysm thrombus with anticoagulation and AtriClip closure.
2. Davide Tomassoni: Paroxysmal Severe Ischaemic Mitral Regurgitation without obstructive coronary artery disease.
3. Madhuka Wijayarathne: Uptake of additional screening investigations in patients with high probability pulmonary hypertension on echocardiogram.
4. Alice Cai: Mini Oral – Screening and detection rates of ATTR-CA in patients with PPM.
5. Alice Cai: Prevalence of AS in Amyloid patients compared to HFpEF.
6. Davide Tomassoni: Expanding use of drug-coated balloons for CAD management in VIC.
7. James Fahey: Outcomes on tilt table testing for patients with POTS.
8. Timothy Yeung: Management and outcomes of patients with MINOCA.
9. Madhuka Wijayarathne: Use of echo in real world practice to refine diagnosis of pulmonary hypertension.
10. Edmond Wong: Seasonal variation in pericarditis: 10-year experience of >1200 cases from Melbourne.
11. Edmond Wong: Mini Oral – Pilot trial of implanted loop recorder versus smartwatch for AF detection.

PHD STUDENT

Dr Timothy Scully is a current PhD student with joint supervision from Alfred Health and Eastern Health (Dr Jithin Sajeev and Dr Jason Nogic). His thesis title is 'Improving the identification and management of transthyretin cardiac amyloidosis'.

EASTERN CLINICAL RESEARCH UNIT TRANSLATIONAL RESEARCH DIVISION (ECRU-TRD)

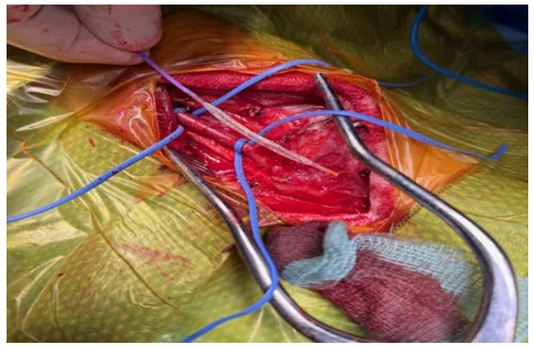
A/PROF ANTHONY DEAR

RESEARCH

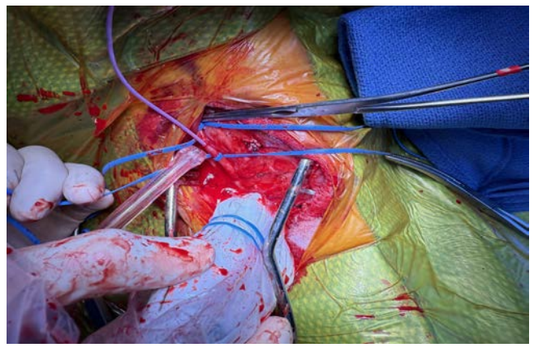
TRANSLATIONAL

The Unit's flagship, NHMRC-supported project **Lumi-Solve, a novel photo-angioplasty device for the treatment of peripheral vascular disease**, made significant progress during 2025, with prototype Lumi-Solve devices, produced at the CSIRO's Biomedical Materials Translational Facility (BMTF) in Clayton, successfully deployed in in-vivo proof of concept studies at the University of Queensland, Medical Engineering Research Facility (MERF) located at the Prince Charles Hospital in Brisbane. Results of these pilot studies are eagerly anticipated. There was also publication of Lumi-Solve design and development advances aiding in prototype development and commercialisation of the device. For more information: https://www.monash.edu/lumi-solve.

Lumi-Solve Catheter Deployment



Operating theatre UQ, MERF facility, Prince Charles Hospital, Brisbane with cardiothoracic surgeon Bruce Garlick performing carotid arteriotomy to enable Lumi-Solve deployment.



Deployment of Lumi-Solve catheter into a sheep carotid artery.

Cartoon of Lumi-Solve activation.

Ultrasound image of Lumi-Solve fibre-optic positioned inside a sheep carotid artery.

Activation of Lumi-Solve fibre-optic power source
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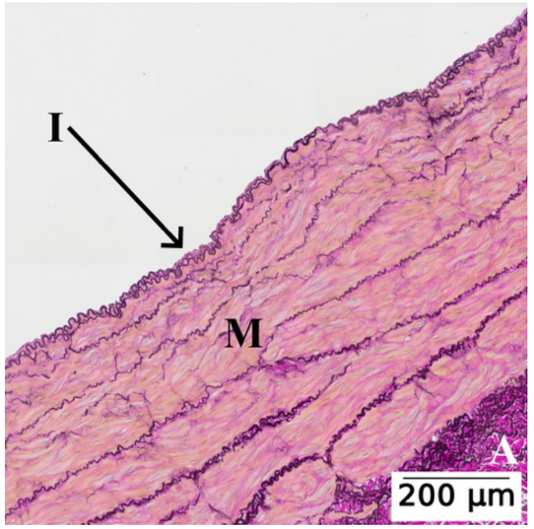
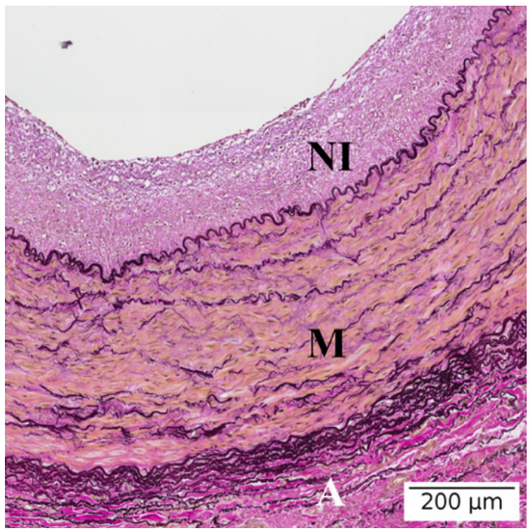




v-1, v-2) Histological sections of right (control (1) and cuffed (2) carotid artery.

CLINICAL TRIALS AND PATIENT MANAGEMENT

The **M**etformin in **A**bdominal aortic aneurysm **T**rial which aims to evaluate the well-established anti-diabetic medication Metformin for its potential to offer, for the first time, the exciting prospect of a medical treatment to prevent abdominal aortic aneurysm (AAA) growth and rupture, has moved into its fifth year, with international site expansion to the UK in an attempt to boost patient recruitment.

MAT

Metformin Aneurysm Trial

Although atherosclerosis, or narrowing of the arteries, is fundamentally a lipid-driven inflammatory disease, most interventions to prevent vascular events do not address this inflammatory mechanism. Colchicine, a low-cost anti-inflammatory drug, most commonly used to treat gout, is effective and safe in reducing vascular events in patients with coronary artery disease (CAD), but it has not been tested in Peripheral Artery Disease (PAD). ECRU-TRD has been invited to participate in an international, prospective, randomized trial of over 6,000 patients to evaluate the efficacy and safety of Colchicine in reducing the incidence of cardiovascular death, myocardial infarction, stroke, or severe limb ischemia in PAD patients.

LEADER-PAD

Low dose colchicinE in pAtients with peripheral artery DiseasE to address residual vascular Risk

RESEARCH COMMERCIALISATION

Highlights of the Lumi-Solve research commercialisation programme included successful lodgement of a Patent Cooperation Treaty (PCT) application, in relation to specific aspects of Lumi-Solve fibre-optic delivery system design and development In addition, partnering with prototype production company Pioneer Optics (USA), has facilitated evaluation of Lumi-Solve design specifications and manufacturing parameters and resulted in manufacture of an advanced prototype device for pre-clinical and early phase clinical studies.

Monash Innovation manager, Dr Phil Lewis, is leading the commercialisation strategy for Lumi-Solve and has identified potential commercial partners including MIMETIC (a medtech foundry), heralding an exciting next step in the commercial development of the Lumi-Solve device.

TEACHING AND EDUCATION

ECRU-TRD's interactive medical device programme has been expanded, enabling students and trainees to engage with real-world medical devices and 3D printed anatomy models, to facilitate hands-on learning experiences as part of their medical, nursing and resident training.

Dr Aaron Tran, a Monash Research Affiliate associated with ECRU-TRD over several years, commenced his Master of Philosophy at EHCS, focusing on the in-vivo evaluation of the Lumi-Solve device. Aaron has been integral to the success of Lumi-Solve pilot studies with our collaborator at UQ, whilst also having successfully published a review article on novel drug coatings for balloon angioplasty therapy in the journal *Current Vascular Pharmacology.*

The unit continues to contribute to EHCS HDR student assessment and aims to foster an environment which is supportive of academic endeavour at undergraduate and postgraduate levels, through a broad range of translational research projects.

COMMUNITY ENGAGEMENT

2025 afforded the unit the opportunity to showcase the Lumi-Solve device and lower limb angioplasty procedure using our recently developed 3D printed model of peripheral artery disease (PAD). In March, we were delighted to host Gabriel Ng MP, Federal Member for Menzies, together with Matt Gregg MP, Federal Member for Deakin (pictured below), who both enjoyed an interactive demonstration of Lumi-Solve and angioplasty simulation.

Useful Link: https://patents.google.com/patent/WO2025227190A1

EASTERN HEALTH INTENSIVE CARE RESEARCH (EHICR)

The Eastern Health Intensive Care Research (EHICR) Team continues to facilitate and support all intensive care-related research across our three campuses, including multicentre and national trials and various local projects. We also continue to collaborate and support clinical trials led by other specialities, including the Emergency Department, Infectious Diseases, and Cardiology.

We thank the whole intensive care team for their ongoing hard work and contribution to the success of research at Eastern Health Intensive Care Services. In particular, we are grateful to our clinical bedside nurses, doctors, and allied health staff who provide high quality patient care and enthusiastically support our research projects.

KEY CONTACTS

- Nicole Robertson – nicole.robertson@easternhealth.org.au
- Kym Gellie – kym.gellie@easternhealth.org.au
- Dr Graeme Duke – graeme.duke@easternhealth.org.au
- Dr Rob Paul – rob.paul@easternhealth.org.au
- Steven Hirth – steven.hirth@easternhealth.org.au

CLINICAL TRIALS AND PROJECTS COMPLETED IN 2025

- **Mega-ROX:** Multicentre, randomised controlled trial in ANZ comparing conservative vs liberal oxygen targets. Principal Investigator: Niall Kennedy/Philippe LeFevre (ICU Consultants). Recruitment reached 40,000 patients, including 673 from all three Eastern Health ICU departments.
- **ICU-Resolve-D:** Digital Peer Support for ICU Survivors: RCT. Principal Investigator: Philippe LeFevre (ICU Consultant). Recruitment completed.
- **ARISE:** Multicentre, randomised controlled trial in ANZ comparing fluids or vasopressors in sepsis; in collaboration with Emergency Department. Principal Investigator: Paul Buntine (ED Physician). Over 1,000 patients were recruited from 46 sites.
- **EXTUBE**: Extubation-related complications; an international observational study to understand the impact and best practices in the operating room and intensive care unit. In collaboration with Anesthesia Department Principal Investigators: May Tsai and Samuel Tay (Anesthetists).
- **Survey to assess staff comfort with, and understanding of, patient readiness for extubation**: Project Lead: Katelyn Fabri (ICU Nurse).
- **Parenteral nutrition after major elective upper GI surgery: a descriptive cohort study:** Principal investigator: Georgia Stringer (ICU Dietitian). Manuscript accepted for publication.
- **EH MET patient frailty scores and clinical outcomes:** Project Lead: Elisa DeBondt (ICU Registrar).
- **Inspire beyond ICU:** Multicentre audit of usual physiotherapy practices in mechanically ventilated patients in the ICU. Principal Investigator: Kirsty Hearn (Physiotherapist).
- **NUTRIENT 2:** A national platform for improving quality of nutrition care for adults with critical illness. Principal Investigator: Graeme Duke (ICU Consultant), Georgia Stringer (ICU Dietitian).
- **ICU Management Goals: quality improvement in EMR workflow:** Project Leads: Rob Paul (ICU Consultant), Graeme Duke (ICU Consultant), Nicole Robertson (ICU Research Nurse).

CURRENTLY ENROLLING MULTICENTRE TRIALS

1. **REMAP-CAP**: International registry and adaptive platform trial of interventions for community acquired pneumonia. Principal Investigator: Joseph Vetro (ICU Consultant).
2. **PRECISE**: PRecision Ecmo in Cardiogenic Shock Evaluation. Principal Investigator: Arun Ilancheran (ICU Consultant), James Bridget (Clinical Nurse Consultant ECMO).
3. **T4P:** Threshold for platelets study: a prospective multicentre, randomised trial to define the platelet count below which critically ill patients should receive a platelet transfusion prior to an invasive procedure. Principal Investigator: Philippe LeFevre (ICU Consultant).
4. **Bone Zone**: Randomised controlled trial, evaluating bone loss prevention with Zolendronic Acid or Denosumab in critically ill adults. Principal Investigator: Rob Paul (ICU Consultant).
5. **SNAP**: Staphylococcus Aureus Network Adaptive Platform trial. In collaboration with Infectious Diseases. Principal Investigator: Stephen Guy (ID Physician).

INTERNATIONAL AND NATIONAL RESEARCH REGISTRIES AND SURVEYS

1. **SPRINT-SARI**: Continuous national registry for viral pneumonia positive patients admitted to ICU. Principal investigator: Graeme Duke (ICU Consultant).
2. **EXCEL**: Continuous national registry for ECMO delivery and outcomes. Principal investigator: John Dyett (ICU Consultant).
3. **ELSO**: Continuous international Extracorporeal Life Support Organization Registry; a comprehensive international data registry of patients receiving ECMO, supporting clinicians' clinical research, and regulatory agencies. Principal Investigator: John Dyett (ICU Consultant), James Bridget (Clinical Nurse Consultant ECMO).
4. **ANZICS APD Data**: Continuous ANZ clinical data registry of all ICU admissions. Data submitted weekly; analysed and reported quarterly. Principal Investigators: Steven Hirth (ICU Data Analyst), Graeme Duke (ICU Consultant).
5. **ANZICS Critical Care Resources report:** ANZ annual audit of clinical activity and clinical resources to provide comparison with national benchmarks. Principal Investigator: Graeme Duke (ICU Consultant), Steve Hirth (ICU Data Analyst), Di Parker (ICU Consultant), Nicole Robertson (ICU Research Manager).
6. **ANZICS Point Prevalence Program**: ANZ annual snapshot observational and descriptive survey of current clinical practice in intensive care focusing on specific therapies not reported elsewhere. Principal Investigator: Graeme Duke (ICU Consultant), Di Parker (ICU Consultant), Nicole Robertson (ICU Research Nurse), Kym Gellie (ICU Research Nurse).
7. **ECMOCARD**: Continuous international registry of COVID positive patients needing mechanical ventilation or ECMO for respiratory failure. Principal Investigator: Arun Ilancheran (ICU Consultant), James Bridgett (Clinical Nurse Consultant ECMO).

EASTERN HEALTH LOCAL RESEARCH PROJECTS

1. **Clinical Decision Support for Mechanical Ventilation**: analysis based on real-time EMR data. Lead investigators: Steven Hirth (ICU Data Analyst), John Dyett (ICU Consultant). On hold.
2. **Clinical evaluation of the national hospital acquired complication program**: Long-term trend in state hospital complication rates. Specific audits of Anaesthesia-specific and Maternity-specific complications. Project Lead: Graeme Duke (ICU Consultant) Manuscript submitted for publication.
3. **DECODE**: Triennial audit of care of the dying patient in Eastern Health ICU. Project Lead: Graeme Duke (ICU Consultant). 144 records audited for 2024-2025. Ongoing.
4. **Trainee Assessment and ICU Feedback Process**: Project Leads: Philippe LeFevre (ICU Consultant), Steve Hirth (ICU Data Analyst). Ongoing.
5. **Audit of Clinical Documentation in ICU**: Development of semi-automated audit of admission note, ANZICS data, discharge summary and daily management plan. Project Leads: Graeme Duke (ICU Consultant), Steve Hirth (ICU Data Analyst). Ongoing.
6. **Ventilation data in COVID patients - predictive data to aid clinical decision making**: Project Lead: John Dyett (ICU Consultant), Steve Hirth (ICU Data Analyst). On hold.
7. **VENT ON – Improving the accuracy and completeness of documentation of ventilation hours in the ICU**: Project Lead: Nicole Robertson (ICU Research Nurse), Kym Gellie (ICU Research Nurse) Ongoing.
8. **MET Dashboard**: Project Lead: Steve Hirth (ICU Data Analyst). Ongoing.
9. **Monitoring Acute Care Outcomes in ICU**: Project Leads: Graeme Duke (ICU Consultant), Steve Hirth (ICU Data Analyst) Quarterly reporting.
10. **Audit of Pulmonary Embolus patients in ICU**: Project Leads: Nick Ryan (ICU Fellow), Jess Dean (ICU Consultant), Jay Finn (ICU Registrar). In preparation.
11. **APO**: Prospective observational audit of Angliss Patient Outcomes during closure of the intensive care ward. Project Lead: Graeme Duke (ICU Consultant). Analysis underway.
12. **PANTHA - Parenteral Nutrition Audit**: Project Leads: Collaboration with Gastroenterology team. Ongoing.
13. **SuMM - Survey of Maternal Morbidity Coding**: Project Leads: Collaboration with the Maternity team. Completed. Analysis underway.
14. **Clinical Audit of Rapid Response Team Medical Support of Maternity Services**: Project Leads: Tim Crozier (ICU Consultant), Graeme Duke (ICU Consultant), Steve Hirth (ICU Data Analyst). Ongoing.
15. **iRATE - Assessment of patient complexity and workload:** Project Leads: Graeme Duke (ICU Consultant), Evan Newman (Executive Director of Clinical Operations), Steve Hirth (ICU Data Analyst). Ongoing.
16. **Defib audit**: Project Lead: Olly Ferris (ICU Registrar). In preparation.
17. **EHCOR2 – Eastern Health Clinical Outcomes Registry for ECCO2R (Extracorporeal CO2 removal)**: Project Leads: Jitain Sivarajah (ICU Consultant), Rob Paul (ICU Consultant).
18. **Junior ICU Nurse's transition experiences – a qualitative study:** Project Lead: Feifei Jin (ICU Nurse).
19. **Beyond ICU - ICU Patient Experience Peer Support Group, including other initiatives to improve patient experience:** Project Lead: Philippe LeFevre (ICU Consultant), Rosie Kennedy (ICU Nurse). On hold.
20. **Audit of BHH ECPR patients in the EXCEL registry**: Project Leads: Tom Dickinson (Medical Student), John Dyett (ICU Consultant). Ongoing.

CLINICAL TRIALS UNDER CONSIDERATION

1. **SPICE IV:** Multicentre interventional trial of Sedation Practice in Intensive Care Evaluation.
2. **Improve-65:** Multicentre interventional trial to improve survivorship for critically ill patients aged 65 and over.
3. **Inspire beyond ICU**: A multicentre, randomised controlled trial, inspiratory muscle training to enhance recovery from mechanical ventilation.
4. **HOME-AKI**: Haemofiltration with Oxiris: a multicentre evaluation of filter cartridge technology in acute kidney injury.
5. **PREVENT-NEURO**: Multicentre interventional trial of antibiotic prophylaxis against early ventilator associated infections in mechanically ventilated Intensive Care Unit patients with acute brain injury.

EASTERN MENTAL HEALTH AND WELLBEING RESEARCH UNIT PROGRAM (EMRU)

A/PROF JUDY HOPE

The Eastern Health Mental Health and Wellbeing Research Unit (EMRU) is a multidisciplinary clinical–academic entity that supports and undertakes research aligned with the strategic priorities of Eastern Health and the Mental Health and Wellbeing Clinical Program. The unit comprises five part-time clinical academics, each contributing distinct clinical and methodological expertise.

Throughout 2025, EMRU has maintained a strong research profile, demonstrating sustained scholarly activity, fostering a robust and inclusive research culture, cultivating research capability, and enhancing research impact and visibility across local, national, and international contexts.

RESEARCH ACTIVITY

During the reporting period, EMRU supported a diverse research portfolio encompassing more than 20 active projects, spanning a broad range of mental health and wellbeing domains. The unit network expanded to include 46 staff members, reflecting growing interdisciplinary engagement and collaborative capacity across the service.

RESEARCH CULTIVATION

Capacity building and workforce development remained key priorities for EMRU. In 2025, 10 healthcare students were engaged in research activities within the unit, with academic supervision provided for seven scholarly research projects. These initiatives contributed to strengthening research capability among students and early-career clinicians, while supporting translational and service-relevant inquiry.

RESEARCH SUCCESS AND IMPACT

EMRU demonstrated substantial scholarly output and impact during the year, with 22 peer-reviewed publications published in 2025, including multiple articles in high-quality journals. The unit was also the recipient of competitive external funding, including a STAR Fellowship grant and a Foundation grant, underscoring the scientific merit, innovation, and applied relevance of EMRU-led research.

Highlight: Health Department funding for a PROM (patient reported outcome measure) study.

RESEARCH VISIBILITY

Research dissemination and visibility were further enhanced through 20 conference presentations, comprising 18 national and two international presentations. EMRU was prominently represented at the Eastern Health Research Forum, contributing five poster presentations, one oral presentation, and one keynote address, thereby reinforcing the unit's leadership and contribution to mental health research within the organisation.

RESEARCH STAFF

- A/Prof Judy Hope, Psychiatrist
- Dr Peter Brann, Psychologist
- Dr Helen Mildred, Psychologist
- Dr Stanley Innes, Research Associate
- Dr Hema Jayaram, Psychologist
- Ms Selin Hikmet, Research Assistant

AREAS OF RESEARCH

1. SUICIDE PREVENTION, CRISIS CARE, AND POST-ATTEMPT ENGAGEMENT

Our research delivers practice-relevant evidence to strengthen suicide prevention across emergency, inpatient, community, and allied health settings. By evaluating post-suicide attempt engagement models and examining why people disengage from crisis services, our work directly informs service redesign to improve continuity of care, safety, and engagement at points of highest risk. A further focus on translating suicide prevention skills to non-psychiatric practitioners, broadens the prevention workforce and embeds suicide prevention across health systems, increasing reach and real-world impact.

2. REDUCING RESTRICTIVE PRACTICES AND IMPROVING SAFETY IN MENTAL HEALTH SERVICES

This program of research contributes to national and international efforts to reduce restrictive practices and improve human rights, safety, and quality of mental health care. Through empirical studies, international collaborations, and systematic reviews, we have generated evidence to guide clinician decision-making, education strategies, and policy reform aimed at minimizing coercive practices. This work supports safer environments for consumers and staff, and directly informs clinical guidelines, service monitoring, and workforce training initiatives.

3. EMERGENCY MENTAL HEALTH AND ACUTE CARE PATHWAYS

Our research addresses critical gaps in emergency and acute mental health care by examining patient flow, triage accuracy, coding reliability, and reasons for premature departure from care. By identifying system-level barriers and opportunities for improvement, this work supports more responsive, equitable, and clinically effective emergency mental health pathways. A strong emphasis on multidisciplinary roles, including occupational therapy, highlights scalable solutions to improve patient experience and outcomes in high-pressure clinical environments.

4. DUAL DIAGNOSIS AND SUBSTANCE USE

This work strengthens care for people experiencing co-occurring mental health and substance use conditions by evaluating service models, engagement strategies, and outcome measurement tools. Through the development and validation of co-designed evaluation frameworks, this research enhances the capacity of services to deliver integrated, recovery-oriented care. Findings inform both clinical practice and service planning, contributing to more effective responses for a high-need and often underserved population.

5. PSYCHOPHARMACOLOGY AND TREATMENT INNOVATION

Our research bridges clinical psychiatry, service delivery, and translational science to address real-world treatment challenges. This includes critical examination of antidepressant use in contemporary practice, exploration of medication repurposing for severe mental illness, and workforce-focused education on pharmacotherapy. Together, this work supports safer prescribing, informed clinical decision-making, and innovation in treatment options for people with complex and treatment-resistant conditions.

6. BORDERLINE PERSONALITY DISORDER (BPD) A ND COMPLEX PRESENTATIONS

We have contributed to improving care for people with BPD and other complex presentations by evaluating emergency department and crisis interventions, including brief admission models, and developing evidence-based screening and psychosocial tools. This research responds directly to service pressures and consumer needs, offering alternatives to prolonged admissions and improving crisis responsiveness. A particular focus on under-researched populations, including older adults, strengthens the inclusivity and applicability of the evidence base.

7. MENTAL HEALTH WORKFORCE DEVELOPMENT, SUPERVISION, AND EDUCATION

A core focus of our work is building a capable, sustainable mental health workforce. Through research on clinical supervision, early-career programs, interprofessional learning, and professional identity formation, this work demonstrates how structured education and supervision improve competency, retention, and wellbeing. These findings directly inform workforce strategy, training models, and policy, with measurable benefits for service quality and staff confidence across disciplines.

8. OCCUPATIONAL THERAPY, ALLIED HEALTH, AND INTERDISCIPLINARY PRACTICE

This body of work advances the contribution of occupational therapy and allied health within mental health systems, particularly in acute and emergency contexts. By articulating and evaluating allied health roles in service redesign, public mental health, and quality improvement, this research strengthens interdisciplinary practice and supports data-driven workforce planning. It also highlights the value of student-led and allied health-driven evaluation in sustaining service innovation.

9. SERVICE EVALUATION, QUALITY IMPROVEMENT, AND JUST CULTURE

Across our research program, we have applied rigorous evaluation methods to assess the implementation, outcomes, and sustainability of mental health service innovations. A particular focus on routine outcome measurement and just culture promotes learning-oriented approaches to safety, governance, and quality improvement.

BOOK CHAPTERS

Allchin, Becca et al. Occupational therapy in mental health: a vision for participation. 3rd Ed. FA Davis. pp.1256 pages

Orr M. Chapter 12: Using solution-focused practice to assess and manage suicide risk. Solution Focused Practice and Mental Health Crisis: Inclusive Support Towards Safety and Hope.

INTERNATIONAL CONFERENCE PRESENTATIONS

Impact Conference 2025. International Psychological Applications Conference and Trends, Budapest, Hungary, 26-28 April 2025. Jayaram, H., Moss, F. & Broadbear, J.H, “Psycho-social factors in older adults with BPD – pilot findings in developing a screening tool”.

UK Association For Solution Focused Practice 18-19 July, Bradford UK. Orr M. Hope and possibilities in life - solution focus in suicide prevention (1 hour workshop). UK Association For Solution Focused Practice, 18-19 July, Bradford UK.

NATIONAL CONFERENCE PRESENTATIONS

RANZCP COLLEGE CONGRESS MAY 2025 GOLD COAST

- Oral: Copolov D, Looi J, Hope J, Sundram S, Keks N. Antidepressants under siege: a clinical perspective. RANZCP College Congress May 2025.
- Oral: Bandara Y, Sellitto T, Jayasekera A, Bandara E. Wherefore art thou? Art and design in psychiatry. RANZCP College Congress May 2025.

SPA NATIONAL CONFERENCE, MAY 2025 PERTH

- Orr M., Rickard J. Hope in Action, 26th National Suicide Prevention Conference, Perth May 2025

ACSA CLINICAL SUPERVISION CONFERENCE: 12-13TH JUNE 2025 CAIRNS

- Oral - Interprofessional group supervision: learner reflections in the allied health mental health early career program - Jaime Jenkinson & Amanda Anderson.
- Oral - Clinical supervision facilitates competency development in the novice allied health mental health workforce learning program - Amanda Anderson & Jaime Jenkinson.

OTA 31ST NATIONAL CONFERENCE & EXHIBITION 25TH TO 27TH JUNE 2025

Mental Health

- Jenkinson, J., Sudholz, J. Occupational identity in mental health occupational therapy graduates via Community of Practice. ePoster. OTA National Conference and Exhibition 2025.
- Jenkinson, J., Sudholz, J. Innovative ways of fostering professional relationships within early career mental health learners. Oral presentation. OTA National Conference and Exhibition 2025.
- Kohn, H., Starbuck, R. Using data strategically at multiple levels...development of public mental health occupational therapy. Oral presentation. OTA National Conference and Exhibition 2025.
- Brincat J. Defining occupational therapy in emergency mental health: a quality improvement project. Oral presentation. OTA National Conference and Exhibition 2025.
- Allchin B., et al. Building monitoring and evaluation frameworks using occupational therapy student projects. ePoster. OTA National Conference and Exhibition 2025.

ANZHPE AUSTRALIAN AND NEW ZEALAND ASSOCIATION FOR HEALTH PROFESSIONAL EDUCATORS CONFERENCE, 30TH JUN – 3RD JULY, PERTH

- Poster. Two years of medication - key learnings from medication focused professional development for novice allied health mental health clinicians in public mental health. Jaime Jenkinson, Cathy Ngo.
- Oral. From pillar to foundation, evolution of wellbeing within allied health mental health early career programs. Jaime Jenkinson, Amanda Anderson, & Karen Urlic.
- Poster. Beyond the horizon: a practice model for orientation in an allied health mental health graduate program. Ian Davey & Darren Johnstone.

16TH NATIONAL ALLIED HEALTH CONFERENCE, AUG 11-14 ADELAIDE

- Oral. Holding an occupational lens for graduates in a community of practice. Occupational identity in mental health occupational therapy graduates via Community of Practice. Jaime Jenkinson, Jess Sudholz.
- Oral. Learnings from learners: an evaluation of a learning & teaching allied health mental health program. Jaime Jenkinson & Jacinta Chavulak.
- Oral. An Initial Investigation into mental health clinicians’ aims to reduce restrictive practices. Jacinta Chavulak.
- Poster. Innovative ways of fostering inter-professional relationships and building professional identity within the early career mental health workforce learner programs - the pub quiz model. Jaime Jenkinson, Jess Sudholz & Ian Davey.
- Poster. Two years of medication - key learnings from medication focused professional development for novice allied health mental health clinicians in public mental health. Jaime Jenkinson & Cathy Ngo.
- Poster. From pillar to foundation, evolution of wellbeing within allied health mental health early career programs. Jaime Jenkinson & Amanda Anderson.

COLAB MENTAL HEALTH NURSING COLLABORATION: AUGUST 19TH, 2025 MARVEL STADIUM

- Donley, E. Time in motion studies to examine effectiveness of team leaders in public health crisis mental health services.
- Lumsden K, and, Donley, E. Realigning mental health nursing TSP to domains of practice at Eastern Health.

EMERGENCY MEDICINE RESEARCH

PROF PAUL BUNTINE

In 2025, the Emergency Medicine Research Program led and contributed to a broad range of research activity across the Angliss, Box Hill and Maroondah emergency departments, as part of both local and national studies. Our research team also expanded, with Gael Sommerville, Dr Christine Wu, Dr Ilya Kardailsky, Bronwyn Kirkwood, Rae-Lee Wilkinson, and Liz Cole bringing an invaluable wealth of clinical knowledge to several of our projects.

HIGHLIGHTS

- AUD$7.0M in research funding
- 27 peer-reviewed journal articles
- 9 conference presentations

OUR TEAM

- Prof Paul Buntine, Director of Emergency Medicine Research
- A/Prof Patrick Owen, Senior Research Fellow
- Joseph Miller, Research Assistant & SQuDs-ED Project Lead
- Liam Hackett, Research Assistant
- Dr Emogene Aldridge, Research Assistant
- Grace Buzasi, Research Nurse
- Gael Sommerville, Research Nurse
- Dr Ramesh Nayak, Medical Research Lead, Angliss Emergency Department
- Dr Erin Woodward, Medical Research Lead, Maroondah Emergency Department
- Dr Christine Wu, Co-Medical Research Lead, Box Hill Emergency Department
- Dr Ilya Kardailsky, Co-Medical Research Lead, Box Hill Emergency Department
- Bronwyn Kirkwood, SQuDs-ED Nurse Lead, Box Hill Emergency Department
- Rae-Lee Wilkinson, SQuDs-ED Nurse Lead, Maroondah Emergency Department
- Liz Cole, SQuDs-ED Nurse Lead, Angliss Emergency Department

RESEARCH FUNDING

- Implementation research to improve outcomes in primary spontaneous pneumothorax: iIMPROVE PSP. MRFF Clinical Trials Activity: 2023 Clinical Trials Activity. AUD$4,784,123.20.
- Building reasonable adjustments, inclusion, and dignity in emergency care for people with intellectual disabilities (BRIDGE-ED). MRFF Emerging Priorities and Consumer Driven Research: 2024 Improving Health Outcomes of People with Intellectual Disability. AUD$1,999,907.91.
- Safer Care Victoria: Sustainable and Quality use of Diagnostics in Emergency Departments Project (site funding). AUD$132,576.00.
- Department of Health, Victorian State Government: Emerging Drugs Network of Australia – Victoria Project (site funding). AUD$25,282.40.
- Prospective assessment of gastric residual volume in patients prescribed GLP-1 receptor agonists vs. controls: correlation of bedside gastric ultrasound with direct gastroscopic findings, an observational study. Community Bank Inner East & Eastern Health Foundation: Research and Innovation Grant. AUD$24,500.00.

MONASH UNIVERSITY SCHOLARLY INTENSIVE PLACEMENT (SIP) PROGRAM STUDENTS

- Anikait Patil: The effect of a supply shortage on blood culture bottle stewardship within the Eastern Health network: an interrupted time series analysis.
- Amanda Samarasekara: The impact of early fluid and vasopressor strategies for septic shock resuscitation on intensive care unit length of stay: an exploratory analysis of the ARISE FLUIDS trial.
- Emasha Seneviratne: Interventions for reducing low-value testing in emergency departments: a systematic review.
- Joan Cheng: Utility of the Clinical Frailty Scale for frailty assessment in the emergency department: a cross-sectional study (Finalist, SIP Research Award).
- Dereck Luk: Evaluating the diagnostic yield and appropriateness of chest x-ray ordering in the emergency department following the introduction of a decision-making flowchart.
- Sophie Gao: Exercise-based advice and referrals for chronic disease: an emergency department audit.

CONFERENCE PRESENTATIONS

- Luk D (SIP student), Miller J, Kirkwood B, Cole E, Wilkinson R, Zheng S, Szelag R, Eccles-Smith S, Kardailsky I, Woodward E, Roche R & Buntine P. Designing a decision-making flowchart to reduce unnecessary CXR ordering in the emergency department. Monash Improving Diagnosis Symposium, Melbourne, Australia.
- Egerton-Warburton D, Yang SN-Y, Clark J, Wiggs S, Holten A, Kuhn L & The PIVC Study Group (Buntine P, Owen PJ, Hackett L, Miller J, Aldridge E, Sommerville G et al.). Say ‘no’ to the just in case cannula: using consumers’ lived experience to educate emergency clinicians. Australasian College for Emergency Medicine 40th Annual Scientific Meeting, Gold Coast, Australia.
- Lown DJ (Emergency Physician, Box Hill Emergency Department), Kelly A-M, Miller J, Keddie E, Buntine P, Senz A, Hope J & Owen PJ. Impact of clinician education on emergency department mechanical restraint: an interrupted time-series study. Australasian College for Emergency Medicine 40th Annual Scientific Meeting, Gold Coast, Australia.
- Szmerling J, Maleki S, Mar G, Gu G, Goulopoulos A, Buntine P & Owen PJ. Pain management at the crossroads: how stewardship activities affect discharge prescribing and communication. Eastern Health Research Forum, Melbourne, Australia. 2025.
- Webb-St Mart M, Walsh C, Bates C, Georgiadis C, Ferguson A, Miller J, Hackett L, Owen PJ, Gunn R (Emergency Physician, Maroondah Emergency Department), Mohanu E, Cohen E & Monk K. Do people with disabilities (PWD) really attend our emergency departments (EDs)? Eastern Health Research Forum, Melbourne, Australia.
- Gao S (SIP student), Owen PJ, Buntine P & Mundell NL. Exercise-based advice and referrals for chronic disease: an emergency department audit. Eastern Health Research Forum, Melbourne, Australia.
- Webb-St Mart M, Walsh C, Bates C, Georgiadis C, Ferguson A, Miller J, Hackett L, Owen PJ, Gunn R (Emergency Physician, Maroondah Emergency Department), Mohanu E, Cohen E & Monk K. Do people with disabilities (PWD) really attend our emergency departments (EDs)? Eastern Health Allied Health Research Forum, Melbourne, Australia.
- Mundell NL, Buntine P, Miller J, Hackett L, Samanna CL, Patel D (SIP student), Mitchell UH & Owen PJ. Discharge referral practices to allied health disciplines following emergency department presentation: a chart audit. 16th National Allied Health Conference, Adelaide, Australia.
- Owen PJ, Bee A, Pattison D, Miller J, Hackett L, Aldridge E, Kanelopoulos M, Young J & Buntine P. Reducing post-fall emergency department transfer from residential aged care facilities: The Falls Outreach and Residential Mobile Assessment Team (FORMAT) before-and-after study. Australasian College for Emergency Medicine 40th Annual Scientific Meeting 2025, Gold Coast.

NEW RESEARCH

EMERGENCY DEPARTMENT EXERCISE TRIAL AND REFERRAL APPROACH: AN EXTRA CARE PATHWAY FOR CHRONIC CONDITIONS (ED-EXTRA)

The study aims to assess the feasibility of referring emergency department patients with chronic conditions to a telehealth exercise physiology consultation.

IMPACT OF PATIENT OWNERSHIP OF TROPONIN TEST TIMING ON ADHERENCE TO PROTOCOL IN THE EMERGENCY DEPARTMENTS OF EASTERN HEALTH

This research project investigates whether giving patients ownership of the timing of their repeat troponin test improves adherence to Eastern Health's troponin protocol.

IMPLEMENTATION OF AN INTERDISCIPLINARY VESTIBULAR (IN-VEST) TRAINING PACKAGE FOR CLINICIANS WORKING IN THE EMERGENCY DEPARTMENT TO IMPROVE ASSESSMENT AND MANAGEMENT OF PATIENTS PRESENTING WITH ACUTE VERTIGO

To increase the proportion of emergency department patients with acute vertigo receiving guideline-based assessment and management by emergency clinicians to 50%.

UTILITY OF ARTIFICIAL INTELLIGENCE TO PREDICT THE FINAL DISPOSITION BASED ON EMERGENCY TRIAGE NOTES: MULTI-SITE STUDY

The proposed study design is to use hospital data to train and test a predictive machine learning model.

ONGOING RESEARCH

AUSTRALASIAN RESUSCITATION IN SEPSIS EVALUATION: FLUID OR VASOPRESSORS IN EMERGENCY DEPARTMENT SEPSIS (ARISE FLUIDS)

This study compares two treatment strategies for patients with septic shock. The treatment strategies are: i) restricted fluids and early introduction of vasopressors; and ii) a strategy involving a larger initial volume of IV fluid and later vasopressor administration if required. The patient recruitment target of 1000 cases was met in November 2025; 57 cases were recruited at Eastern Health emergency departments. As patients are followed up for 12 months, the primary data collection will be completed in 2026.

EMERGENCY DRUGS NETWORK OF AUSTRALIA – VICTORIA (EDNAV)

This clinical registry study involves analysing blood samples from patients experiencing acute illicit drug toxicity, with the aim of better understanding novel psychoactive substances being used in the community. Clinicians at Angliss, Box Hill and Maroondah hospitals continue to collect samples for this project, which serves to identify patterns of drug use.

A STEPPED-WEDGE CLUSTER RANDOMISED CONTROLLED CLINICAL TRIAL OF USUAL CARE VS REGULAR ANTIPYRETICS FOR CHILDREN PRESENTING WITH A FEBRILE CONVULSION TO THE EMERGENCY DEPARTMENT (FEBCON-ED)

A stepped-wedge cluster randomised controlled clinical trial of usual care vs regular antipyretics for children presenting with a febrile convulsion to the emergency department. This is a multi-site study led by Monash University as part of the Paediatric Research in Emergency department's International Collaborative (PREDICT) network, and recruitment is ongoing at Box Hill Hospital (target is 9600 patients across all involved sites).

A RANDOMISED CONTROLLED TRIAL COMPARING PENTHROX (METHOXYFLURANE) WITH NITROUS OXIDE FOR PAINFUL EMERGENCY MEDICINE PROCEDURES

This non-inferiority study is comparing methoxyflurane (Penthrox) with nitrous oxide for procedural sedation across the three Eastern Health emergency departments. In 2025, we recruited 80+ patients (target 198) to assess patient pain levels, procedure satisfaction, time to procedure, and time to discharge.

IMPLEMENTING BEST PRACTICE FOR PERIPHERAL INTRAVENOUS CANNULA USE IN AUSTRALIAN EMERGENCY DEPARTMENTS

This is a stepped-wedge, cluster-controlled trial and health economic analysis led by Monash University, with recruitment at Box Hill Hospital. Part of the study was to implement interventions with the aim to reduce the use of cannulas unnecessarily and increase documentation of cannula insertion. The intervention started in 2024 and continued through 2025, with a multipronged approach through targeted education sessions, posters and events. This study moved into its sustainability phase after a year worth of interventions in December 2025.

SUSTAINABLE AND QUALITY USE OF DIAGNOSTICS IN EMERGENCY DEPARTMENTS (SQUDS-ED)

This year we joined the Sustainable and Quality Use of Diagnostics in Emergency Departments (SQuDs-ED) project, led by Safer Care Victoria in partnership with Climate Health Victoria. The project is being implemented at health networks across Victoria, and for Eastern Health it represents a logical extension of the award-winning diagnostic stewardship work already implemented through the No Unnecessary Tests (NUTs) initiative, led by Prof Paul Buntine since 2016. Early data show a reduction in chest x-ray use across all three Eastern Health emergency departments, and we are now tackling diagnostic yield of CTPA and VQ scans for pulmonary embolism.

The SQuDs-ED team in action

ENDOCRINOLOGY

A/PROF ROSEMARY WONG

The Endocrinology unit at Eastern Health covers inpatients at three acute hospitals, and outpatients though 19 clinics across the eastern suburbs of Melbourne. We service patients in our region with endocrine disorders including diabetes, thyroid disorders, metabolic bone disease, pituitary and adrenal disease, dyslipidaemias and women's health.

Research is an integral part of the activities of the unit, including a strong track record in sponsored clinical trials of new therapeutics in endocrinology.

INVESTIGATOR INITIATED PROJECTS

1. **ctDNA in thyroid cancer**. A project examining the feasibility of monitoring cell-free circulating tumour DNA (ctDNA) in patients with advanced thyroid cancer, and the effects of redifferentiation therapy and I-131 on ctDNA detection as an exploratory aim of the I-First clinical trial (funded by MRFF). In addition patients will be recruited to a long-term study of ctDNA in predicting recurrence in low risk thyroid cancer treated with hemithyroidectomy alone. (PhD project, Dr Hui Yi Ng).
2. **Digital enabled integration in chronic disease care**. In collaboration with researchers at the Baker Institute, Deakin and La Trobe universities, this project seeks to utilise diabetes and the IDEAS Clinics model to investigate how AI tools and digital technology can enhance patient experience, ecosystem integration of diabetes healthcare provision and improve disease-specific outcomes (awaiting funding outcome).
3. **The introduction of a cloud-based remote monitoring system for patients with gestational diabetes.** This project aims to improve glycaemic and clinical outcomes, and improve the healthcare experience for both patients and clinicians, and reduce the cost burden on the health system. The response to implementation will be measured and analysed to provide evidence of benefit, along the axes indicated above.(funded by Net-Health corporation) (PhD project, Dr Will Lau).
4. **Improving care and outcomes of Aboriginal and Torres Strait Islander peoples with Type 2 diabetes mellitus in eastern Melbourn**e. In collaboration with Deakin University, this project seeks to use culturally-appropriate tools, such as photovoice, to identify enablers and barriers in diabetes management of Aboriginal and Torres Strait Islander peoples.

HIGHER DEGREE RESEARCH (HDR) - PHD STUDENTS

1. Shan Balachandran: Novel treatments for radioactive iodine-refractory differentiated and anaplastic thyroid cancer (Thesis conferred July 2025).
2. Hui Yi Ng: ctDNA in thyroid cancer (funded by MRFF) (candidature ongoing).
3. William Lau: Implementation of remote monitoring system in Gestational diabetes (candidature ongoing).

SPONSORED CLINICAL RESEARCH AT EASTERN CLINICAL RESEARCH UNIT (ECRU)

1. **ZLilly GZBM** – A phase 3, randomized, double-blind, placebo-controlled study to investigate the efficacy and safety of retatrutide once weekly compared to placebo in participants with severe obesity with established cardiovascular disease.
2. **Lilly GZGQ** - A phase 3, randomized, double-blind, placebo-controlled study to investigate the efficacy and safety of once daily orforglipron compared to placebo in participants who are overweight or obese and have T2DM.
3. **Endogenex ReCet** - Examining the role of duodenal mucosal ablation and resetting and improving metabolic parameters in patients with T2DM.
4. **Lilly GZBK - Master protocol** -A phase 3, randomized, double-blind, placebo-controlled study to investigate the efficacy and safety of retatrutide once weekly compared to placebo in participants withT2DM obesity and overweight, plus a substudy in sleep apnoea.
5. **Lilly GPIJ** - A phase 3, randomized, double-blind, placebo-controlled study to investigate the effect of Tirzepatide on the reduction of morbidity.
6. **Lilly GPGN** - Effects of tirzepatide 15mg versus dulaglutide on major cardiovascular events. Revised CVOT Tirzepatide GPGN is 54months.
7. **Synergize 1 and 2 Boehringher–**Ingleheim dual GLP-1 and glucagon agonist in obese diabetic and non-diabetic subjects.
8. **Novo Nordisk NNC0519-0130** vs Tirzepatide in type 2 diabetes.
9. **Arrowhead Pharma** – Novel treatment of hypertriglyceridemia.
10. **Lilly GZBO** A phase 3, randomized, double-blind, placebo-controlled event driven study to investigate the effect of once weekly Retatrutide on the incidence of major adverse cardiovascular events and major adverse kidney events on participants with BMI >27 and ASCVD or CKD.
11. **Lilly EZEF** - A phase 3, randomized, double-blind, placebo-controlled study to investigate the effect of Lepodisiran on the reduction of major adverse cardiovascular events in adults with elevated lipoprotein(a) who have established atherosclerotic cardiovascular disease or are at risk for a first cardiovascular event.
12. **Immunovant** A Randomized, double-blind, placebo-controlled, phase 2b study to assess the efficacy, safety, and tolerability of IMVT-1402 as treatment for adult patients with Graves' Disease.
13. **Biohaven- BHV1300-202** An open-label biomarker study of BHV-1300 in Graves' Disease.

POSTERS

Cheuk N, Sharifi A. Hypercalcaemia in a Tiger Man. Poster presentation at 2025 ANZBMS Annual Scientific Meeting.

NOTABLE ACHIEVEMENTS

- Dr Ailie Connell
  - awarded the Eastern Health Achievement Award for Excellent Care and Experiences for Pathology in 2025
  - chaired a session at 2025 ESA Seminar (weekend conference)
  - actively involved in EH intern and BPT lecture series
  - delivered national RACP BPT education session
- Dr Jessie Teng
  - Completed Graduate Diploma in Clinical Education, University of Melbourne
  - awarded the Medical Student Program (MSP) Consultant Educator Special Recognition Award
  - actively involved in medical student teaching with MSP
- Dr William Lee involved with SBS Cantonese on Endocrinology with audience Q&A.
- Dr Mitchel Munnings and Dr George Yang (Endocrinology registrars) both actively involved in medical student teaching with weekly bedside tutorials.
- Dr Jessie Teng and Dr Ming Li Yee supervised a Monash University Scholarly Intensive Program (SIP) project on behalf of Eastern Health titled 'Review of DNE involvement in care of patients with diabetic foot ulcers at Eastern Health'.

VALE PROFESSOR CHRISTOPHER PAUL GILFILLAN

02/02/1959 – 07/10/2025
MBBS, FRACP, PHD

It is with great sadness that the Eastern Health Clinical School marks the passing of Professor Chris Gilfillan on 7 October 2025. For more than 17 years, Chris was at the heart of our community as Director of Endocrinology at Eastern Health, Clinical Professor in the Department of Medicine at Monash University's Eastern Health Clinical School, and Director of endocrine research for the Eastern Clinical Research Unit. His influence on patients, students and colleagues was profound, and his absence will be felt for many years to come.

Chris's professional legacy is extraordinary. Under his leadership, Eastern Health's endocrine services grew from a single clinic into a network of 18 specialist programs, spanning Melbourne's eastern suburbs. He championed the IDEAS clinics in partnership with community health services — a model of diabetes care that was profiled at the 2023 Victorian Department of Health Sector Summit. As Principal Investigator on numerous national and international clinical trials, he led 11 active diabetes trials in 2024 alone. His contributions were recognised nationally with the Centenary Medal for services to diabetes care on the Mornington Peninsula.

Yet Chris' deepest legacy was a human one. He supervised PhD candidates, taught medical students, and trained generations of basic and advanced physician trainees — many of whom now serve as consultants within Eastern Health. Patients adored him; they would ask after "that lovely doctor, a real gentleman." Colleagues describe him as kind, humble, calm under pressure, and fiercely committed to his team. One former trainee wrote that watching Chris with patients was "like watching an artist at work — medicine in its purest, most human form."

Chris faced significant personal health challenges in recent years with remarkable fortitude and without complaint. He set a tone of friendly, no-egos collegiality; and excellence and kindness that define our department to this day.

GASTROENTEROLOGY

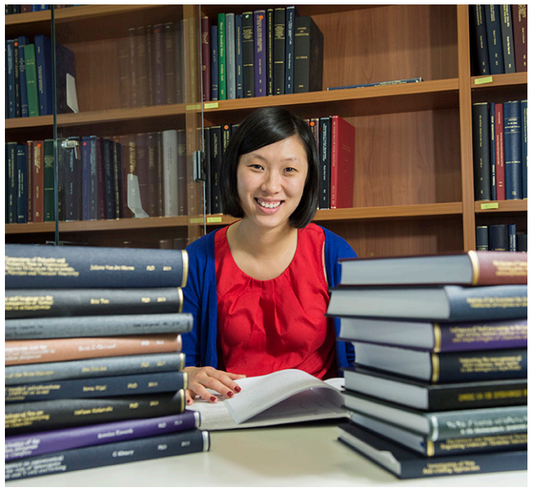
A/PROF ROHIT SAWHNEY

The Department of Gastroenterology is pleased to present the highlights of its work and achievements in 2025. Building on a strong foundation of collaboration, clinical excellence and academic rigor, the department has continued to make significant advances in patient care, education and translational research under the leadership of A/Prof Rohit Sawhney and A/Prof Abhinav Vasudevan.

NOTABLE ACHIEVEMENTS

The department warmly welcomed Dr Natasha Janko as a full-time Gastroenterologist with sub-specialty expertise in hepatology, and a national leader in coagulation in liver disease. Dr Janko's appointment has further strengthened the department's clinical capacity and academic focus in liver disease. She represented the department and Eastern Health Clinical School as an invited speaker at various national and international meetings, including World Congress of Gastroenterology/Australian Gastroenterology Week in Melbourne, and GASTRODIET at Monash University, Prato Campus, Italy.

We also welcomed Dr CK Yao, who joined the team as an Advanced Accredited Practising Dietitian and NHMRC Emerging Leadership Research Fellow. Dr Yao co-leads an innovative research program focused on dietary management in inflammatory bowel disease and disorders of gut-brain interaction, significantly enhancing the department's research capability and interdisciplinary collaboration in nutrition and gastroenterology.



Dr CK Yao

A/Prof Abhinav Vasudevan continues to lead an active research program in inflammatory disease with two current PhD students, Dr Krishneel Dutt and Dr Lynna Chen, investigating novel technologies and imaging techniques for evaluating patients with IBD.

Dr Anuj Bohra (PhD thesis conferred in 2024), under the supervision of A/Prof Daniel Van Langenberg and A/Prof Abhinav Vasudevan, and was awarded the Dean's Commendation for Thesis Excellence in recognition of the outstanding quality and impact of his doctoral research, reflecting both individual academic excellence and the department's strong research mentorship culture.

Dr Anuj Bohra, pictured with Prof James Whisstock, Deputy Dean Research, FMNHS, Monash University

A/Prof Rohit Sawhney celebrated a year as Clinical Director of Gastroenterology at Eastern Health and was acknowledged internally for his sustained contributions to clinical leadership, education, and research.

ADVANCING FELLOWSHIPS

The department's IBD Clinical/Research Fellowship remains a cornerstone of training, integrating advanced clinical exposure, with high-quality research to develop future leaders in gastroenterology. The Hepatology Fellowship continues to provide focused expertise in hepatocellular carcinoma, metabolic-associated fatty liver disease, and cirrhosis management, supporting excellence in subspecialty care.

RESEARCH OUTPUTS

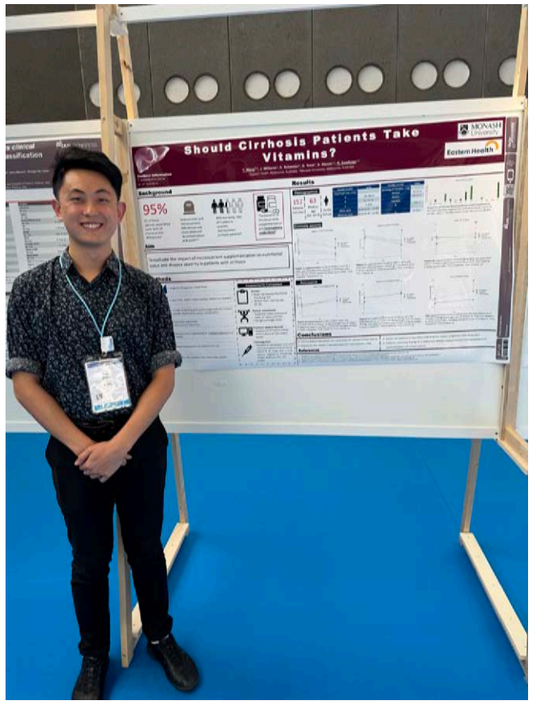
Collaborative research continued to underpin the department's mission. Ongoing participation in major national and international consortia, including ANZIBD initiatives (Aspirin-PSC, PROACTIVE, ANZASUC), has driven impactful research in inflammatory bowel disease.

Significant research activity has also continued in hepatocellular carcinoma, cirrhosis and acute-on-chronic liver failure, chronic viral hepatitis and drug-induced-liver injury with active involvement in investigator-initiated research and both national and international collaborations.

The department also maintained an active program of industry-sponsored clinical trials, spanning conditions such as coeliac disease, eosinophilic oesophagitis, hepatocellular carcinoma, chronic hepatitis B and metabolic dysfunction-associated steatotic liver disease, reinforcing the department's commitment to innovation and improved patient outcomes.

ACADEMIC CONTRIBUTIONS

Department members have continued to produce high-quality publications across inflammatory bowel disease, hepatology, advanced imaging, and therapeutic optimisation. These works have been disseminated through peer-reviewed journals and presented at leading national and international conferences, highlighting the department's ongoing contribution to advancing gastroenterology and hepatology practice.



Ian Wang, BMedSc (Hons) student, presented his work at the EASL Congress in Amsterdam in May.

GERIATRIC ONCOLOGY

Geriatric Oncology remained active across a range of nationally and internationally collaborative projects, focused on improving care and quality of life for older adults with cancer. Key areas of work included frailty, comprehensive geriatric assessment, quality of life, and age-friendly models of cancer care.

Research activity included:

- Collaborative work with the Person-Centred Research Directorate of Eastern Health Clinical School. The ELFI project, led by A/Prof Sandra Nolte and Dr Kheng Soo as Principal Investigators, was awarded funding by the European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Group.
- An ongoing ANZUP-supported project using ENZAMET data to analyse frailty, and examine the effects of Enzalutamide on frailty and resilience in metastatic prostate cancer.
- The evaluation of comprehensive geriatric assessment in surgical and haematological oncology settings; health economic analysis of geriatric assessment and management; and contributions to the development of the Optimal Care Pathway for older adults with cancer, as part of the Australian Cancer Plan.

The program also contributed to research supervision, capacity building, and multidisciplinary collaboration, including the supervision of Eastern Health Pharmacist and PhD candidate, Sam Maleki, supporting emerging research capability and the integration of pharmacy perspectives with geriatric oncology.

HAEMATOLOGY

A/PROF STEPHEN TING

RESEARCH AND EDUCATION

Throughout 2025, the Haematology Unit has maintained its core clinical aim of having clinical trial options available for all patients with blood diseases.

This is reflected by the number of trials the unit is participating in, and the correlative financial turnover to support our 10 clinical trial study coordinators, and three research assistants.

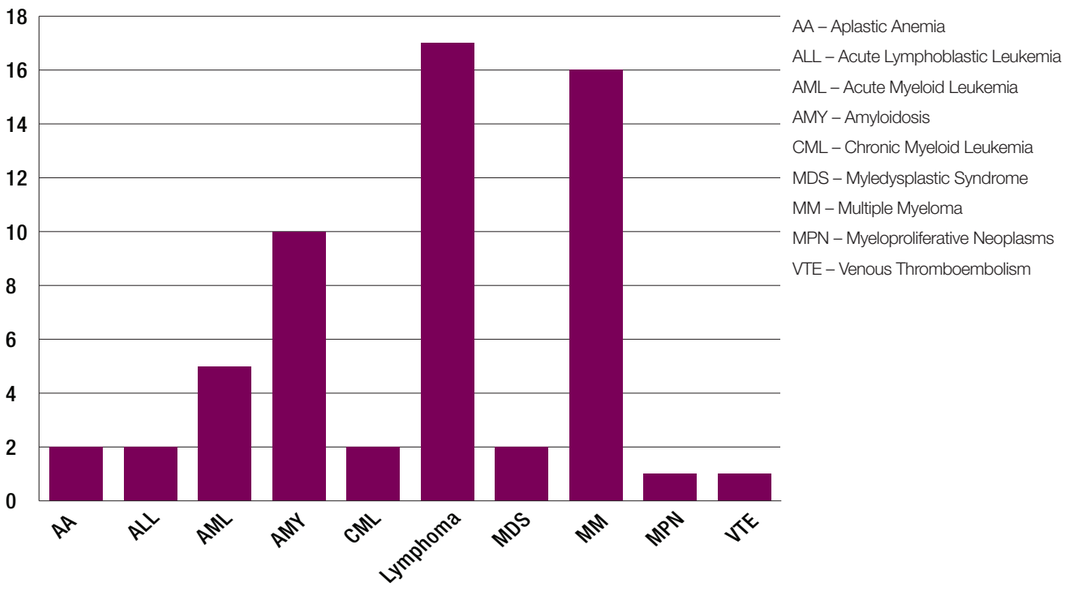
We have 27 active trials recruiting; five associated registries; 31 active trials non-recruiting; 17 studies in start-up; and 16 expressions of interest. This translates into 212 patients in active trial treatment, 50 patients in follow-up, and 250 patients in registries.

There are clearly too many trials to individually name. Instead, we have outlined our disease leads and in the bar graph below, the number of affiliated trials governed by these respective leads.

We continue to be enthusiastically involved in medical student and Basic Physician Trainee (BPT) education and training. Interestingly, all three of our three available haematology advanced trainees were Eastern Health BPTs; and of the current 12 clinical haematology Senior Medical Staff, 75% were trained at the Eastern Health Haematology department.

CLINIC LEADS AND REGISTRIES

- Anticoagulation Stewardship: Dr Alison Slocombe, Dr Nora Lee
- Aplastic Anaemia (AA) & Registry: A/Prof Stephen Ting
- Acute Lymphoblastic Leukemia (ALL): Prof Tony Schwarer
- Acute Myeloid Leukemia & ALLG Registry: Dr Genevieve Douglas
- Amyloidosis (AMY), State Reference Centre & Registry: Dr Brendan Wisniowski
- Chronic Myeloid Leukemia (CML) & Registry: Prof Tony Schwarer
- Lymphoma & LARDR Registry: Dr Tamara Marconi
- Myelodysplasia (MDS): Dr Michelle Tan
- Myeloproliferative Neoplasms (MPN): Dr Melissa Chen
- Haemostasis & Thrombosis (HATH) including Venous Thromboembolism (VTE): Dr Alison Slocombe
- Clinical Nurse Consultant, Cell therapies: RN Katrina Wragg
- Clinical Nurse Consultant, Malignant Haematology diseases: RN Emily Minopoulos
- Clinical Trials Lead Manager: RN Liz Arnold



CONFERENCE POSTERS

INTERNATIONAL CONFERENCE ON MALIGNANT LYMPHOMA, LUGANO, SWITZERLAND, JUNE 2025

Flerlage, Jamie ….., Marconi, T et al. Radiotherapy improves progression-free survival for stage ia nlphl: a retrospective report from the global nlphl one working group (glow). Haematological Oncology. 43. 10.1002/hon.70093_23.

Martynchyck, A., ….., Marconi, T. et al. Treatment of newly-diagnosed follicular lymphoma with rituximab, golcadomide +/- nivolumab-interim analysis of the phase ii top-flor study. Haematological Oncology. 43. 10.1002/hon.70094_230.

Goodall, E., ….., Marconi, T. et al. Australian patients with relapsed or refractory diffuse large b-cell lymphoma frequently fail eligibility criteria for landmark and registration clinical trials. Haematological Oncology. 43. 10.1002/hon.70096_626.

EUROPEAN HAEMATOLOGY ASSOCIATION (EHA), MILAN, ITALY, JUNE 2025

Chung E, Wang L et al. Definition and use of bulky disease in lymphoma care: a study from the Australasian Lymphoma and Related Diseases Registry (LARDR). Haematologica Sept 2025 https://doi.org/10.3324/haematol.2025.287919.

Stephen S., ….., Tamara Marconi et al. Sonrotoclax monotherapy for treatment of patients with relapsed/refractory CLL; data from an ongoing phase 1/1b study (BGB-11417-101). Haematologica Sept 2025.

AUSTRALIA AND NEW ZEALAND TRANSPLANT AND CELLULAR THERAPIES (ANZTCT) CONFERENCE, GOLD COAST, QUEENSLAND, AUGUST 2025

Douglas G et al. Health-Related Quality of Life in Australians Improves After Allogeneic Hematopoietic Stem Cell Transplantation, Yet Remains Below Population Norms. ANZTCT Conference, August 2025.

BLOOD (HSANZ, ANZSBT, ISBT) CONFERENCE, PERTH, WESTERN AUSTRALIA, OCTOBER 2025

Wei Z, ….., Ting SB et al. A Novel Case of Blastic phase CML in ERF mutated Noonan's syndrome. BLOOD Conference, October 2025.

Wang L, Hosking P, Ting SB. The heterogeneity of plasmacytoid dendritic cells. Blood-ISBT 2025.

Tan M, …. Nedeljkovic M. Banking on a positive change: A single institution audit of major haemorrhage protocol activation and use of group O RhD negative red cell units. BLOOD Conference, October 2025.

AMERICAN SOCIETY OF HEMATOLOGY (ASH), FLORIDA, USA, DECEMBER 2025

Lewis K, ….., Marconi T et al. Pembrolizumab (Pembro) plus R-CHOP is efficacious as first-line therapy for primary mediastinal B-cell lymphoma (PMBL) with high rates of ctDNA negativity – interim efficacy analysis of the ALLG-Pacific (NHL35) trial. Blood (2025) 146. 1016-1016. 10.1182/blood-2025-1016.

Tapan Kadia, ….., Stephen Ting et al. Results of the APG2575AU101 Study of lisaftoclax (APG-2575) combined with azacitidine (AZA) in patients with newly diagnosed (ND) or prior venetoclax–exposed myeloid malignancies. Blood (2025) 146 (Supplement 1): 1641. https://doi.org/10.1182/blood-2025-1641.

John Byrd, ….., Stephen Ting et al. A healthy volunteer study with lomonitinib predicts pharmacokinetics and pharmacodynamics in a relapsed refractory AML study. Blood (2025) 146 (Supplement 1): 6781. https://doi.org/10.1182/blood-2025-6781.

Fox L, ….., Tan M et al. .Whole genome transcriptome sequencing in inherited bone marrow failure syndromes and related diseases–the ibmdx study. Blood, December 2025.

CONFERENCE ORALS

AUSTRALIA AND NEW ZEALAND TRANSPLANT AND CELLULAR THERAPIES (ANZTCT) CONFERENCE, GOLD COAST, QUEENSLAND, AUGUST 2025

Douglas G et al. The Australian Index of Relative Socioeconomic Disadvantage Predicts Long-term Health-Related Quality of Life Outcomes in Allogeneic Haematopoietic Stem Cell Transplant Survivors. ANZTCT August 2025.

PHD CANDIDATE

Dr Tim Scully, investigating ATTR Cardiac Amyloidosis. Co-supervision between Haematology and Cardiology teams.

GRANTS & AWARDS

Eastern Health Foundation (EHF) Research & Innovation Grant: A/Prof Stephen Ting, studying ferroptosis in aplastic anaemia.

ECRU Haematology Team, winners of the 2025 EHCS holiday decoration competition

INFECTIOUS DISEASES

A/PROF STEPHEN GUY

2025 was a busy year for Infectious Diseases with expanding engagement in teaching and research as well as our diverse and busy clinical services.

A highlight for the year was the first report of the SNAP (Staphylococcus aureus bacteremia (SAB) network adaptive trial) registry data – which benchmarks our performance across a number of domains including our ability to participate in clinical research at a high standard, as well as quality metrics of the care we provide for people with SAB and outcome data. We were pleased and reassured to find that we performed very well! The SNAP study remains ongoing at Eastern Health; The findings of the 'backbone' domain were presented in 2025 and the publications from this domain within the study are eagerly awaited. Our practice has already changed and been shaped by participation in the study and the results released to date.

Infectious Diseases and Microbiology also launched a second major randomised platform study in 2025: the ROADMAP study. This is a collaborative project between Infectious Diseases, microbiology and orthopaedics, aiming to interrogate the best strategies for prosthetic joint infection management. Recruitment is underway.

The Infectious Diseases Unit remains active in a number of other ongoing studies. We had several posters and abstracts presented at both local and international conferences, and continue to see increased research outputs year on year.

Dr Katrina Fernandes presented her VZV CNS infections poster in Vienna, at the European Society for Infectious Diseases and Clinical Microbiology meeting, April, 2025.

We continue to provide teaching and education for a wide spectrum of learners: both junior and senior and for many different types of healthcare workers. Dr Daniel Forster hosted a SIP student in AMS, with further SIP projects planned for 2026. The unit values the close ties and associations with Antimicrobial Stewardship (Pharmacy) Service, Infection prevention and Control and Microbiology, and has several more initiatives underway with these colleagues in service delivery, research and education.

NEPHROLOGY

PROF LAWRENCE MCMAHON

Research within the Department of Renal and Obstetric Medicine is now an established and fruitful component of the department and involves both laboratory and clinical studies.

Apart from the researchers, there are additional laboratory and clinical trials staff. The research team meets fortnightly and member numbers (physicians, scientists, study coordinators, research higher degree students, advanced trainees) continue to expand.

The focus of the laboratory work is skeletal muscle health in chronic kidney disease. Cell culture methods are used to tease out the crosstalk between muscle and bone, and the effect of uraemic toxins on this. The laboratory is developing collaborative partners (Prof S. Ricardo, Monash University) to allow studies of both mouse and human skeletal muscle. We measure numerous analytes 'in-house' for both laboratory and clinical studies, usually by ELISA. These include fibroblast growth factor 23, and uraemic toxins indoxyl sulfate and p-cresyl sulfate.

Clinical projects cover a breadth of topics related to kidney disease and hypertension, particularly in relation to obstetric medicine. Investigators include our Research Higher Degree students, as well as physicians, advanced trainees, hospital medical officers and medical students. The Sarcopenia in Patients with Chronic Kidney Disease (SPARSE) study has provided an excellent database of various measures to better understand sarcopenia in our patients. Dr Aruni Malaweera's PhD studies are due to be completed by the end of 2026. She has been able to analyse and present her novel and interesting findings at international and national meetings.

RESEARCH HIGHER DEGREE STUDENTS

- Dr Aruni Malaweera continues her PhD, supervised by Prof Lawrence McMahon and Dr Louis Huang, studying the effects of different peritoneal dialysis fluids on the gut, and different uraemic toxins.
- Dr Madeleine Cosgrave continues her PhD, supervised by Prof McMahon and Dr Catherine Brumby, studying hypertension in pregnancy and in young women.
- Dr Sarah Tan commenced her PhD, supervised by Prof McMahon, A/Prof Kathryn Ducharlet, and Prof Josephine Clayton, investigating kidney supportive care in clinical practice.

GRANTS AND AWARDS

- Dr Aruni Malaweera was runner up in the Early Career Award (Clinical Science) at the Australian and New Zealand Society of Nephrology Congress 2025 in Perth.
- Dr Louis Huang awarded NHMRC funding ($2.7M) for AKTN international clinical trial Incremental Peritoneal Dialysis.

PARTICIPATION IN NATIONAL COMMITTEES

AUSTRALIAN AND NEW ZEALAND SOCIETY OF NEPHROLOGY

A/Prof Kathryn Ducharlet: Co-Chair Kidney Supportive Care Special Interest Group

AUSTRALASIAN KIDNEY TRIALS NETWORK

A/Prof Matthew Roberts: Chair, Scientific Committee
Dr Limy Wong: Member, CKD Work Group

AUSTRALIAN AND NEW ZEALAND DIALYSIS AND TRANSPLANT REGISTRY:

A/Prof Matthew Roberts: Chair, Haemodialysis Work Group
A/Prof Darren Lee: Member, Transplant Work Group

TRANSPLANTATION SOCIETY OF AUSTRALIA AND NEW ZEALAND:

A/Prof Darren Lee: Member, Living Kidney Donation Steering Committee; Member, Living Kidney Donation Working Group

OBSTETRIC MEDICINE:

A/Prof Suet-Wan Choy: Member, National LEAPP (Living Evidence for Australian Pregnancy and Postnatal Care); Australian Living Evidence Collaboration Pregnancy Panel

PERITONEAL DIALYSIS:

Dr Louis Huang: Member, Peritoneal Dialysis Academy of Australia and New Zealand; Member, International Society for Peritoneal Dialysis Asia-Pacific Core Group

ACADEMIC PROMOTIONS

Kathryn Ducharlet was promoted to Adjunct Clinical Associate Professor in November 2025.

INDUSTRY SPONSORED CLINICAL TRIALS

We are currently managing participants in the following industry-sponsored clinical trials:

- **ALIGN**: a phase 3, randomized, double-blind, placebo-controlled study of Atrasentan in patients with IgA Nephropathy at risk of progressive loss of renal function.
- **FIND-CKD**: a randomized, double-blind, placebo-controlled, parallel-group, multicentre phase 3 study to investigate the efficacy and safety of Finerenone, in addition to standard of care, on the progression of kidney disease in patients with Non-Diabetic Chronic Kidney Disease.
- **BEYOND**: a phase 3, randomized, double-blind, placebo-controlled study of BION-1301 in adults with IgA Nephropathy.

COLLABORATIVE CLINICAL TRIALS

INCH HD: an investigator-initiated randomized controlled trial randomizing patients commencing haemodialysis to incremental (twice weekly) or conventional (thrice weekly), to determine if quality of life is non-inferior after 6 months. This trial is being run by the Australasian Clinical Trials Network and Eastern Health is currently recruiting (EH PI: A/Prof Matthew Roberts).

STEP-PD: an investigator-initiated, international, multi-centre, randomised controlled study to determine the impact of incremental dialysis prescription on patient-reported outcome measures in patients starting peritoneal dialysis. This study is coordinated by the Australasian Clinical Trials Network, with Eastern Health being one of the three lead sites (EH PI: Dr Louis Huang).

CONFERENCE PARTICIPATION

INVITED SPEAKERS:

- ANZSN Congress 2025, Dr Limy Wong: Sarcopenia and frailty in CKD
- ANZSN Congress 2025, A/Prof. Kathryn Ducharlet: Kidney supportive care and dialysis

ORAL PRESENTATIONS:

- ERA Congress 2025, Focused-oral presentation: Dr Limy Wong, Establishing a co-culture system to identify key paracrine and endocrine interactions between myoblasts and osteoblasts
- ANZSN Congress 2025, Kidney Health Australia Award Session: Dr Limy Wong, Frailty as a determinant of mortality
- ANZSN Congress 2025, Mini-oral presentation: Dr Limy Wong, Establishing a co-culture system to identify key paracrine and endocrine interactions between myoblasts and osteoblasts
- ANZSN Congress 2025, Mini-oral presentation: A/Prof. Kathryn Ducharlet, Understanding engagement with advanced care planning for people with renal disease and recommendations for how to improve patient experiences: a qualitative study.
- ANZSN Congress 2025, Mini-oral presentation: Dr Limy Wong, The dynamics of sarcopenia and frailty.
- SOMANZ 2025, Mini-oral presentation: Dr Madeleine Cosgrave, Understanding secondary hypertension in pregnancy
- ASCEPT Hypertension 2025, Mini-oral presentation: Dr Madeleine Cosgrave, Chronic hypertension in pregnancy, are we preparing our patients adequately?
- ANZSN Congress 2025, Mini-oral presentation: Dr Aruni Malaweera, A cross-sectional study investigating the association between uraemic toxins and patient-focused outcomes
- ERA Congress 2025, Mini-oral presentation: Dr Aruni Malaweera, A cross-sectional study investigating the association between protein-bound uraemic toxins and patient-focused outcomes
- ANZSN Congress 2025, Mini-oral presentation: A/Prof. Kathryn Ducharlet, An observational registry-based study of trajectories and outcome of treatment decision making for people with advanced chronic kidney disease in France

POSTER PRESENTATION:

Su Jen Chua, …., Matthew Roberts. Assessing the eligibility and applicability of the CONVINCE trial protocol: insights from the ANZDATA Registry. American Society of Nephrology Kidney Week, Houston Texas, November 2025.

Dr Limy Wong. Kidney and inferior vena cava abnormalities with leg thromboses. ANZSN Congress 2025.

NEUROSCIENCES

PROF PATRICK CARNEY

DEMENTIA

The Dementia clinical trials team has had another successful year of trial activity. Under the leadership of Prof Amy Brodtmann, the team remains highly active in the conduct of clinical trials in Alzheimer's disease and frontotemporal dementia.

The team is recruiting participants for several studies, including the Traveller-Master screening study, which aims to identify individuals with potential eligibility for Alzheimer's disease trials, based on biomarker status and cognitive assessment. Recruitment is also ongoing for the Trontier trial, a placebo-controlled trial of trontinemab in individuals with early symptomatic Alzheimer's disease.

Additional active studies include Traiblazer 5, a randomised, placebo-controlled study of donanemab designed to remove existing amyloid in participants with early symptomatic Alzheimer's disease and the CVHB937A12201 trial, a placebo-controlled study evaluating the efficacy and safety of VHB937 in early Alzheimer's disease.

The team is also conducting Passage Bio Uplift, a novel gene therapy study assessing the effects of a single dose of PBFT02 delivered into the cisterna magna in adult participants with Frontotemporal Dementia and GRN or C9orf72 mutations. Finally, recruitment continues for Selenate, a placebo-controlled study investigating Sodium Selenate as a disease-modifying treatment for individuals with probable behavioural variant frontotemporal dementia or progressive non-fluent aphasia.

EPILEPSY

The Eastern Health Epilepsy team continue to pursue opportunities to collaborate with colleagues to develop novel epilepsy research projects, as well as partnering with key opinion leaders to conduct investigator-initiated research. We have had a quieter year after a very busy 2025, but continue to pursue our research interests. Key highlights include:

1. Prof Patrick Carney, in collaboration with the Allied Health Research team (CIA: Prof Katherine Harding), are making steady progress with the WaitLESS study. This study expands on the pilot study of the STAT model in outpatient epilepsy service, and is now being implemented across multiple specialty clinics, including Paediatrics, Gynaecology, Respiratory, Gastroenterology, and Movement Disorders clinic.
2. Dr Alex Bryson has received a grant from the Brain Foundation for his research "Illuminating the mechanisms of epileptogenesis". Other than being a busy clinician in the epilepsy clinic, Alex is also involved in basic science research into understanding how seizures are generated.
3. We continue to participate in novel research studies with our research partners in Victoria and nationally. This includes the PERSONAL trial using AI to optimise medication selection for patients with a new diagnosis of epilepsy. In addition, we are also engaged in the SELECT study which is exploring Na+ selenate as a disease modifying agent in epilepsy.
4. The Eastern Health Epilepsy team continues to take a leading role in a large, novel linkage study looking at outcomes for patients with a first-ever seizure. This long-term study is already producing papers, looking at medication usage patterns in patients with newly diagnosed epilepsy.
5. We continue to strongly support the Australian Epilepsy Project, a world leading study of advanced diagnostic and classification techniques in epilepsy, funded by the MRFF. This study is coming to a close with the potential for future extension. Prof Carney is on the steering committee of this project and Eastern Health remains one of the major recruiting sites.
6. We continue to be engaged in research into new investigational agents, in conjunction with the Eastern Clinical Research Unit (ECRU) and the Australian Epilepsy Clinical Trials Network (AECTN). The team is due to commence two pharma-sponsored studies this year, on a new investigational agent in patients with medication refractory epilepsy.

CLINICAL TRIALS UPDATE

Research databases

FIRSTbase is a database of all patients presenting to the EH first seizure clinic with a first suspected seizure. The database has over 1700 patients and clinical data from this database have been used for a number of studies in seizure prediction, medication choice and outcome.

Investigator-led trials

- **Personalised Selection of Medication for Newly Diagnosed Adult Epilepsy (PERSONAL) trial**. This trial evaluates the role of artificial intelligence (AI) in optimising initial medication selection for adults newly diagnosed with epilepsy.
- **SUDEP study**. An international case-control study investigating sudden unexpected death in epilepsy (SUDEP). The primary objective is to identify clinical and biological factors associated with increased or decreased risk of SUDEP.
- **Epilepsy Biomarker study**. A retrospective clinical and genetic biomarker study aimed at identifying molecular and genetic markers associated with epilepsy and treatment response. This includes clinical data collection and the establishment of a biobank (saliva samples) to facilitate future biomarker discovery and precision medicine approaches. This data will also be used to contribute to an international collaborative study of Ai for diagnosis and management in epilepsy (EpiCFAIR).
- **Select**. A phase 2 trial of Sodium Selenate as a disease modifying treatment for chronic drug-resistant temporal lobe epilepsy.

Industry-sponsored clinical trials

- **Renaissance Study**. A phase 2 open-label safety and tolerability study of SPN-817 in adults with treatment-resistant epilepsy.
- **PRAXIS Study**. This open-label clinical trial evaluated the efficacy and safety of PRAX-628 in adults with focal onset or primary generalized tonic-clonic seizures.

MULTIPLE SCLEROSIS AND NEUROIMMUNOLOGY (MSNI)

In 2025, the Multiple Sclerosis and Neuroimmunology (MSNI) Unit at Eastern Health continued to lead an impressive portfolio of active clinical and translational research under the leadership of Dr Katherine Buzzard, alongside Associate Investigators Dr Olga Skibina, Dr Mark Marriott and Dr Melissa Chu, and study coordinators Amanda Fiora, Carly Shaddick and Sandy San Jose. The unit farewelled Dr Izanne Roos and welcomed Dr Pakeeran Siriratnam to the team.

In recognition of her outstanding contribution to neuroimmunology research and clinical leadership, Dr Katherine Buzzard was promoted to Adjunct Clinical Associate Professor in 2025.

Throughout the year, the MSNI team conducted and concluded multiple pharmaceutical-sponsored clinical trials in Multiple Sclerosis and other neuroimmunological diseases, while also progressing numerous Investigator-Initiated research projects.

A major highlight was the commencement of the Adapt Oculus Clinical Trial; a randomised, double-blinded, placebo-controlled phase 3 study evaluating the efficacy and safety of subcutaneous efgartigimod in adults with Ocular Myasthenia Gravis. Notably, the Eastern Health MSNI Unit recruited the only Australian participant in this global study, reinforcing Eastern Health's position as a national leader in Myasthenia Gravis clinical research.

Research in Myasthenia Gravis has emerged as a major focus within the MSNI clinical trials portfolio at Eastern Health. Dr Katherine Buzzard also serves as Co-Chair of the Scientific Leadership Group overseeing an international database dedicated to advancing knowledge in Myasthenia Gravis, and improving quality of life for people living with the disease. With the support and infrastructure of the MSBase Foundation, a not-for-profit organisation based at the School of Translational Medicine, Monash University, and with valuable support from Myasthenia Alliance Australia, the MGBase Registry has a strong presence within the MG community. This concept of a physician-captured, longitudinal, real-time database for Myasthenia Gravis was first presented to the patient community in December 2016 and as of February 2025, the international registry includes over 1,050 patients and continues to grow daily. A total of 154 specialist members are engaged across 12 countries and 24 clinics, and the data is already contributing to active research projects.

Active recruitment also continues for the pharma-sponsored MyClad trial — a phase 3 study assessing the efficacy and safety of oral cladribine capsules for the treatment of generalised Myasthenia Gravis — with multiple additional MG studies set to follow.

Myasthenia Gravis was not the only focus during 2025. Our continued commitment to Multiple Sclerosis research saw the unit strengthen its dedication to improving outcomes for the MS community.

Excitingly, early results from ongoing participation in the FENtrepid trial — a phase III, double-blind, double-dummy study, evaluating the efficacy and safety of fenebrutinib (a BTK inhibitor) compared with ocrelizumab in adults with primary progressive MS, has been hopeful. The continuation of this study provides invaluable insight into the emergence of potential future treatment options for this cohort. Through participation in this important comparator study, Eastern Health has contributed meaningful data toward what may become a new therapeutic option. The MSNI team is set to explore similar investigational product treatment clinical trials throughout 2026, which highlights the importance of ongoing research within this area of treatment.

Recruitment into BMS IM0451018 – a study to evaluate the efficacy, safety and tolerability of BMS-986368, a FAAH/MAGL Inhibitor, in participants with Multiple Sclerosis spasticity, also commenced in 2025. There was also a continuation of:

- Lemtrada OBS13434 – an observational, post-authorisation safety study of participants who received Alemtuzumab with relapsing forms of MS. This 10-year safety follow up study, coming to fruition in the next few years since its commencement in 2015.
- CLOBAS - Cladribine long-term efficacy biomarker Australian study. The primary objective to monitor outcomes of RRMS patients on Cladribine over 6 years - now extended to 8 years.
- PREGMOLS – the immunobiology of pregnancy, and impacts in women with Multiple Sclerosis or Neuromyelitis Optical Spectrum Disorder (pregnancy immunobiology study).

Autoimmune Encephalitis research is also notable to the MSNI Unit. Eastern Health continues to actively recruit participants in the Neuroinflammatory Brain Conditions Study. The aim of this study is to analyse individuals with autoimmune encephalitis, and other neuroinflammatory conditions, to characterise the features of the diseases.

Together, the strong commitment to MSNI clinical and investigative trials positions the Eastern Health MSNI Unit at the forefront of innovative, collaborative and patient-centred neuroimmunology research, both nationally and internationally. We look forward to the exciting new research opportunities that 2026 will bring.

STROKE

2025 marked a year of remarkable progress and growth for the Stroke Trials Team at Box Hill Hospital. We enrolled nearly 200 patients across 12 trials and registries, spanning small investigator-led studies to large, multicentre, pharmaceutical-sponsored programs.

We achieved our goal of being the highest enrolling site for the OCEANIC-STROKE trial and are now setting our sights on replicating this success with Librexia. Box Hill Hospital is currently the top recruiting site in Australia for two of the largest international pharmaceutical trials: OCEANIC-STROKE, a phase 3 study evaluating asundexian for secondary stroke prevention (sponsored by Bayer); and Librexia, a phase 3 trial evaluating milvexian (sponsored by Johnson & Johnson/Janssen). Both studies belong to the emerging class of Factor XI inhibitors, which could represent the next generation of stroke prevention therapies. Preliminary analysis suggests OCEANIC-STROKE is positive; once confirmed, we will have another tool beyond the current old generation anti-platelets in the secondary prevention paradigm for acute ischaemic stroke.

In 2025, we completed our transition from alteplase to tenecteplase as the default thrombolytic agent, both in clinical trials and in routine clinical usage. While a 0.25 mg/kg dose is commonly used in Australia, international practice ranges from 0.15–0.5 mg/kg. Box Hill is contributing to the ACT GLOBAL trial, a collaborative international platform study led by The George Institute for Global Health (Sydney) and the University of Calgary. This trial is evaluating different tenecteplase doses under routine conditions, but more importantly, is also assessing safety and efficacy of thrombolysis in patients taking direct oral anticoagulants (DOACs).

For haemorrhagic stroke, Box Hill remains an active participant in the EVACUATE trial for intracerebral haemorrhage and contributes data to the Australian ICH registry. These efforts are enhancing our understanding of haemorrhagic stroke and helping to develop more effective treatment strategies.

In 2026, we will once again have a trial available for most patients presenting with an acute ischemic stroke within 24 hours of onset; right across the spectrum from acute reperfusion to novel therapies that may enhance recovery, to secondary prevention. Australia is currently leading the world in the development of portable cerebral imaging devices that may one day be deployed with routine ambulances. Along with two other sites in Australia, we will be testing a novel microwave device from EMVision in acute stroke. This fast, AI-powered technology holds the potential to enable rapid differentiation of stroke type at the point of care, supporting earlier treatment decisions in the prehospital setting.

Thanks to the generous support of the Eastern Health Foundation and our community partners, Box Hill Hospital is progressing toward acquiring a state-of-the-art Bi-plane Angiography Suite by the end of 2026. This facility will enable the establishment of a new endovascular clot retrieval service onsite, avoiding unnecessary outbound transfer of critically ill stroke patients where possible.

With these ongoing trials, infrastructure advancements, and a dedicated team, Box Hill Hospital continues to lead the way in stroke care, research, and innovation, shaping the future of stroke treatment locally and abroad.

ONCOLOGY

PROF PHILLIP PARENTE

The Oncology unit celebrated yet another productive and busy year in research at the Eastern Health Clinical School (EHCS) and Eastern Health. Oncology accounts for the majority of Eastern Clinical Research Unit (ECRU) clinical trials, with 88 active clinical trials in 2025.

Research highlights included Dr Edmond Kwan's ground-breaking research paper, published in Nature Medicine, analysing cell-free DNA in metastatic castration-resistant prostate cancer in the TheraP clinical trial. The paper was co-authored by Prof Ian Davis. In fact, three papers were published in Nature journals by the Eastern Health Medical Oncology team in 2025, including A/Prof Rachel Wong and A/Prof Margaret Lee's papers on ctDNA in colon cancer in the DYNAMIC and DYNAMIC-III trials.

Our team was well represented internationally with abstract presentations at ESMO 2025, as well as Dr Edmond Kwan's presentation at ESMO ASIA; From trial to practice: Implementing liquid biopsies in health systems.

Research grant funding was awarded to a number of the team, including a sizable Medical Research Future Fund (MRFF) grant and Dr Kwan's grants to further progress translational research across EHCS, the Monash Biomedicine Discovery Institute and Eastern Health.

Our research output reflects the remarkable achievements in clinical and academic excellence of the team, and underscores the commitment to advancing consumer care through precision oncology research.

GRANTS / AWARDS

- Bianca Devitt. National Breast and Cancer Foundation, Associate Investigator. $1,060,430 (2025-26)
- Edmond Kwan. Viertel Charitable Foundation Clinical Investigator Award (2026), Principal Investigator. AUD $90,000
- Edmond Kwan. ANZUP Below the Belt Research Fund (2025-2026), Co-Principal Investigator. AUD $50,000
- Edmond Kwan. Monash Partners EMCR Award (2025) 'Novel Use of Data' Category
- Edmond Kwan. ESMO 2025-2026 Global Leadership Programme (worldwide selection; 20 participants)
- Edmond Kwan. North Eastern Melbourne Integrated Cancer Service (NEMICS) Professional Development Grant
- Edmond Kwan. Monash Partners and Equity Trustees STAR Clinical Fellowship. AUD $120,000 (over 2 years)
- Edmond Kwan. Eastern Health Institute Oliver Blumberg Prostate Cancer Research Grant. AUD $100,000 (over 2 years)
- Edmond Kwan. Prostate Cancer Foundation Australia Ignite Synergy Grant, Team Leader / Co-Investigator. AUD $4.5 million (over 3 years)
- Sieber O, ….., Wong R. MRFF Grant - Development of a patient stem-cell derived disease model platform for screening treatments for human colorectal cancer. MRFF Grant $843,019.82 (1 Apr 2025 - 31 Mar 2028)

CONFERENCE ABSTRACTS / ORAL PRESENTATIONS / POSTER PRESENTATIONS

Devitt B et al. Molecular profiling rates of patients with metastatic lung adenocarcinoma and overall survival in patients receiving publicly funded targeted medications for EGFR /ALK mutations in Victoria, Australia. (Australian Lung Cancer Conference (ALCC) 2025)

Rob G Stirling, ….., Phillip Parente et al. Impacts of a clinical quality registry on lung cancer quality measures: a retrospective observational study of the Victorian Lung Cancer Registry. Australian Lung Cancer Conference (ALCC) 2025)

Sue-Anne McLachlan, ….., Margaret Lee et al. Circulating tumor DNA (ctDNA) analysis guiding adjuvant therapy in patients (pts) with colorectal cancer (CRC): impact on fear of cancer recurrence (FCR) (ASCO 2025)

Jeanne Tie, ….., Rachel Wong et al. ctDNA-guided adjuvant chemotherapy escalation in stage III colon cancer: primary analysis of the ctDNA-positive cohort from the randomized AGITG dynamic-III trial (intergroup study of AGITG and CCTG)

Andrisha-Jade Inderjeeth, ….., Angelyn Anton et al. Changing landscape of real-world upfront treatment of metastatic hormone-sensitive prostate cancer (mHSPC). (Australian New Zealand Urogenital Prostate Trials Group (ANZUP) 2025)

Yong Yeung, ….., Angelyn Anton et al. Real-world clinical outcomes in non-metastatic (M0) castration-resistant prostate cancer (CRPC) patients in Australia. (Australian New Zealand Urogenital Prostate Trials Group (ANZUP) 2025)

Carl He, Iris Tung et al. Treatment patterns in hormone receptor-positive advanced breast cancer following disease progression on first-line CDK4/6 inhibitor + endocrine therapy.

Edmond Kwan. From plasma to practice: liquid biopsy for personalising PSMA radioligand therapy in metastatic prostate cancer. (Thomas Ashworth CTC and Liquid Biopsy Symposium)

Shehara R. Mendis, ….., Margaret M. Lee et al. FORECAST-II: feasibility of using organoid response to inform treatment selection for patients with colorectal cancer receiving systemic therapy. (ESMO 2025)

Shehara R. Mendis, ….., Rachel Wong et al. Borderline and locally advanced pancreatic cancer: using real-world data to explore presentation, treatment patterns and outcomes. (ESMO 2025)

Nadia Hitchen, Margaret M. Lee et al. Clinical performance of a blood-only, targeted methylation circulating tumor DNA (ctDNA) assay for minimal residual disease (MRD) detection in colorectal cancer (CRC). (ESMO 2025)

Jeanne Tie, ….., Rachel Wong et al. ctDNA-guided adjuvant chemotherapy de-escalation in stage III colon cancer: primary analysis of the ctDNA-negative cohort from the randomized AGITG DYNAMIC-III trial (Intergroup study of AGITG and CCTG)

Joanna C Chan, ….., Phillip Parente et al. A phase 1b study to evaluate the safety, tolerability and efficacy of the combination of Encorafenib, Binimetinib and Palbociclib in patients with BRAF-mutant metastatic melanoma (CELEBRATE).

Edmond Kwan. From trial to practice: Implementing liquid biopsies in health systems. (ESMO Asia Congress 2025 – MOGA-elected National Representative Speaker)

Crumbaker M, ….., Davis ID et al. Circulating tumour cell (CTC) characteristics associated with survival outcomes in metastatic castration-resistant prostate cancer (mCRPC) in a randomised trial of enzalutamide with or without [177Lu]Lu-PSMA-617 (ENZA-p; ANZUP 1901). ESMO Congress, 17-24 October 2025, Berlin, Germany.

Zarba M, ….., Davis ID et al. Durability of complete responses (CR) from first line (1L) therapy in metastatic renal cell carcinoma (mRCC) in the real world. ESMO Congress, 17-24 October 2025, Berlin, Germany (abstract 2629P).

Mellor R, ….., Davis ID et al. PCPro, plasma lipid biomarker, in metastatic hormone-sensitive prostate cancer (mHSPC): from research to clinical implementation in the ENZAMET trial (ANZUP 1304). ESMO Congress, 17-24 October 2025, Berlin, Germany.

Scheinberg T, ….., Davis ID et al. PCPro as a prognostic plasma lipidomic biomarker in TheraP (ANZUP 1603): a trial of Lutetium-PSMA-617 (LuPSMA) vs cabazitaxel in metastatic castration-resistant prostate cancer (mCRPC). ESMO Congress, 17-24 October 2025, Berlin, Germany.

Soon YY, ….., Davis ID et al. Addition of early docetaxel to enzalutamide for metastatic hormone-sensitive prostate cancer: a trial emulation approach based on the ENZAMET trial. ESMO Congress, 17-24 October 2025, Berlin, Germany.

Horvath L, Lin H-M, Davis ID et al. Association of circulating immune and metabolic markers with clinical outcomes in the ENZAMET trial (ANZUP 1304). ASCO 2025 Annual Meeting, 30 May – 45 June 2025, Chicago, USA.

Weickhardt AJ, ….., Davis ID et al. Pembrolizumab (pembro) with chemoradiotherapy (CRT) as treatment for muscle invasive bladder cancer (MIBC): long term follow up of secondary endpoints of efficacy including overall survival of the PCR-MIB phase II clinical trial (ANZUP 1502). ASCO 2025 Annual Meeting, 30 May – 45 June 2025, Chicago, USA.

Sabahi Z, ….., Davis ID et al. Prognostic value of PSMA PET against CHAARTED criteria in an ENZAMET sub-cohort. ASCO 2025 Annual Meeting, 30 May – 45 June 2025, Chicago, USA.

Zhang AY, Davis ID et al. 8-year outcomes of enzalutamide (ENZA) versus a non-steroidal anti-androgen (NSAA) for metastatic, hormone-sensitive prostate cancer (ENZAMET; ANZUP 1304). ASCO 2025 Annual Meeting, 30 May – 45 June 2025, Chicago, USA.

Guard HE, ….., Davis ID et al. Disentangling the association between age and overall survival in an international cohort of patients with advanced prostate cancer. AACR Annual Meeting, 25-30 April 2025, Chicago, USA.

Sodipo MO, ….., Davis ID et al. First-line therapies and subjective cognitive function trajectories among international metastatic hormone-sensitive prostate cancer survivors. AACR Annual Meeting, 25-30 April 2025, Chicago, USA.

Hovens C, ….., Davis ID et al. Genomically informed active surveillance in intermediate risk prostate cancer (GenI-AIRSPACE): An Exploratory Study. USANZ Annual Scientific Meeting, 1-4 March 2025, Perth, Australia.

Soon YY, ….., Davis ID et al. Challenges of estimating treatment effects after a positive interim analysis. ASCO Genitourinary Cancers Symposium, 13-15 Feb 2025, San Francisco, USA.

Scheinberg T et al. LEEP: a randomised, window of opportunity, neoadjuvant trial examining the pharmacodynamic effects of ribociclib prior to radical prostatectomy for high-risk, localised prostate cancer. ASCO Genitourinary Cancers Symposium, 13-15 Feb 2025, San Francisco, USA.

Keane K et al. SUBDUE-3: SUB-urothelial DUrvalumab-zirconium to investigate local and systemic distribution of durvalumab when injected in the sub-urothelium. ASCO Genitourinary Cancers Symposium, 13-15 Feb 2025, San Francisco, USA.

Crumbaker M et al. Bipolar androgen therapy (BAT) for nonmetastatic castration-resistant prostate (nmCRPC) cancer progressing on darolutamide: Working Out M0 BAT (WOMBAT; ANZUP 2201). ASCO Genitourinary Cancers Symposium, 13-15 Feb 2025, San Francisco, USA.

Nguyen P, ….., Davis I et al. Randomised phase 3 trial of androgen deprivation therapy (ADT) with radiation therapy with or without enzalutamide for high risk, clinically localised prostate cancer: ENZARAD (ANZUP 1303). ESMO Congress, 17-24 October 2025, Berlin, Germany (presented by P Nguyen).

Ayati N, ….., Davis ID et al. LuPSMA-617 SPECT/CT as an early response biomarker for prediction of overall survival in patients with metastatic castration resistant prostate cancer treated with enzalutamide and [^{177}Lu]Lu PSMA 617 within the ENZA p trial (ANZUP1901). EANM 2025 Annual Congress, 4-8 October 2025, Barcelona, Spain (presented by N Ayati).

Ong M, ….., Davis ID et al. Prognostic significance of psa>0.2 after 6-12 months treatment for metastatic hormone-sensitive prostate cancer (mHSPC) intensified by androgen-receptor pathway inhibitors (arpi): a multinational real-world analysis of the IRONMAN registry. ASCO 2025 Annual Meeting, 30 May – 3 June 2025, Chicago, USA (presented by M Ong).

Hayne D, ….., Davis ID et al. Mitomycin plus BCG as adjuvant intravesical therapy for high-risk, non-muscle-invasive bladder cancer: a randomized phase 3 trial (BCG+MM; ANZUP 1301). ASCO 2025 Annual Meeting, 30 May – 3 June 2025, Chicago, USA (presented by D Hayne). J Clin Oncol 43(17 suppl), 2025. https://doi.org/10.1200/JCO.2025.43.17_suppl.LBA4504

Munzur AD, ….., Davis ID et al. Clonal hematopoiesis (CH) in participants with metastatic castration-resistant prostate cancer (mCRPC) receiving ^{177}Lu-PSMA-617 or cabazitaxel: an exploratory post-hocanalysis of a randomized phase II trial (TheraP; ANZUP 1603). ASCO 2025 Annual Meeting, 30 May – 3 June 2025, Chicago, USA (presented by A Munzur).

Emmett L, ….., Davis ID et al. Predictive and prognostic value of baseline PSMA-PET total tumor volume and SUV mean within ENZA-p, a randomized phase II trial of enzalutamide versus enzalutamide plus [^{177}Lu] Lu-PSMA-617 (ANZUP1901). ASCO 2025 Annual Meeting, 30 May – 3 June 2025, Chicago, USA (presented by L Emmett).

Sandhu S, ….., Davis ID et al. ^{177}Lu-PSMA-617 with ipilimumab (ipi) and nivolumab (nivo) in metastatic castration-resistant prostate cancer (mCRPC): an investigator-initiated phase 2 trial (EVOLUTION; ANZUP2001). ASCO 2025 Annual Meeting, 30 May – 3 June 2025, Chicago, USA (presented by S Sandhu).

Emmett L, ….., Davis ID et al. Overall survival and quality of life with [^{177}Lu]Lu-PSMA-617 plus enzalutamide versus enzalutamide alone in poor-risk, metastatic, castration-resistant prostate cancer in ENZA-p (ANZUP 1901). 2025 ASCO Genitourinary Cancers Symposium, San Francisco, USA, 13 –15 February 2025 (presented by L Emmett).

Fisher D et al. Which patients with metastatic hormone-sensitive prostate cancer (mHSPC) benefit more from androgen receptor pathway inhibitors (ARPIs)? STOPCAP meta-analyses of individual participant data (IPD). ASCO Genitourinary Cancers Symposium, 13-15 Feb 2025, San Francisco, USA (presented by D Fisher).

REVIEWS

Azad AA, ….., Davis ID et al. Combination therapies in locally advanced and metastatic hormone-sensitive prostate cancer. European Urology 2025. https://doi.org/10.1016/j.eururo.2025.01.010

EDITORIALS, LETTERS, AND OTHER PUBLICATIONS

1. Davis ID. If the treatment for metastatic hormone sensitive prostate cancer stopped working – what next? [invited editorial]. European Urology 4: 408-410, 2025. https://doi.org/10.1016/j.eururo.2025.06.009
2. Davis, ID, Anton A, Kwan EM. "… but words will never hurt me." [invited editorial] European Urology 87: 289-291, 2025.
3. Conduit C, ….., Davis ID et al. Plain language summary of the ENZAMET study (ANZUP 1304): Enzalutamide with standard first-line therapy for metastatic prostate cancer. Future Oncology 2025 (ePub ahead of print 17 Jan 2025). https://doi.org/10.1080/14796694.2024.2440277

RESPIRATORY AND SLEEP MEDICINE

PROF FRANK THIEN

In 2025 we continued our clinical trial and investigator-initiated research, maintaining a strong and diverse research profile. This includes investigator-initiated studies of long term follow up of thunderstorm asthma; eosinophilic exacerbations of COPD; obstructive sleep apnoea; sleep in hospitals; functional lung imaging; and bronchial thermoplasty in treatment of severe asthma.

Our department members were principal investigators in two successful Medical Research Future Fund (MRFF) grants, in investigation of obstructive sleep apnoea, and assessment of seasonal allergic and thunderstorm asthma, which commenced implementation in 2025. Our inaugural PhD scholar Chuan Foo completed and submitted his PhD thesis in December 2025: “Shedding Light On The Mechanisms Of Asthma And Response To Bronchial Thermoplasty Using Novel Imaging Techniques”.

NATIONAL AND INTERNATIONAL REGISTRIES

1. **ASAR**- The **A**ustralasian **S**evere **A**sthma **R**egistry records and follows patients with a diagnosis of severe asthma, with respect to the clinical history, treatments and outcomes.
2. AILDR –The **A**ustralasian **I**nterstitial **L**ung **D**isease **R**egistry, a bi-national database established since 2016, incorporating prospective epidemiological and investigational data at centres across Australasia of ILD patients, to better understand the nature of ILD and assist in developing future clinical research. Eastern Health is the fifth highest contributor to the registry of 18 centres, nationally.
3. **AUSCAR** - **AUS**tralasian registry of **S**evere **C**utaneous **A**dverse **R**eactions records patients with a history of allergy, or who have experienced a severe drug reaction, to study how to best manage, diagnose and prevent severe adverse drug reactions.

CLINICAL TRIALS

We continued to be active in clinical trials, recruiting in the last two years in the following respiratory disease areas:

IDIOPATHIC PULMONARY FIBROSIS

1. ALOFT IM027-068 - a multicentre, randomized, double-blind, placebo-controlled, phase 3 study to evaluate the efficacy, safety, and tolerability of BMS-986278 in participants with Idiopathic Pulmonary Fibrosis.
2. ENV-IPF-103 Whistle-PF - a phase 2, multicentre, randomized, double-blind, controlled trial evaluating the safety and efficacy of ENV-101 (Taladegib) in patients with lung fibrosis (WHISTLE-PF Trial).
3. NAL03-202-CORAL - a randomized, double-blind, placebo-controlled, parallel, 4-arm dose ranging study of the safety and efficacy of Nalbuphine extended-release tablets (NAL ER)
4. for the treatment of cough in Idiopathic Pulmonary Fibrosis (IPF).

PROGRESSIVE PULMONARY FIBROSIS

1. ALOFT IM027-1015 – a multicentre, randomized, double-blind, placebo-controlled, phase 3 study to evaluate the efficacy, safety, and tolerability of BMS-986278 in participants with Progressive Pulmonary Fibrosis.
2. RIN-PF-304 - a randomized, double-blind, placebo-controlled, multinational, phase 3 study of the efficacy and safety of Inhaled Treprostinil in subjects with Progressive Pulmonary Fibrosis (TETON-PPF).

BRONCHIECTASIS

1. ASPEN - a phase 3, randomized, double-blind, placebo-controlled study to assess the efficacy, safety, and tolerability of Brensocatib administered once daily for 52 weeks in subjects with Non-Cystic Fibrosis Bronchiectasis (the ASPEN study).
2. AIRTIVITY – a phase III, randomised, double-blind, placebo-controlled study to assess the efficacy, safety, and tolerability of BI 1291583 2.5 mg administered once daily for up to 76 weeks in patients with bronchiectasis (the AIRTIVITY® study).

CHRONIC OBSTRUCTIVE PULMONARY DISEASE

1. GB4431 - a phase IIb, randomized, double-blind, placebo-controlled, multicentre study to evaluate the efficacy and safety of Astegolimab in patients with Chronic Obstructive Pulmonary Disease.

ALPHA1 ANTITRYPSIN DEFICIENCY

1. INBRX101-01-202 - a phase 2, single-arm, open-label extension study, evaluating the long-term safety and clinical efficacy of INBRX-101 in adults with Alpha-1 Antitrypsin Deficiency (AATD) Emphysema.

HEREDITARY ANGIOEDEMA

1. RAPIDe-3 PHA022121-C306 - a phase 3, randomized, double-blind, placebo-controlled, cross-over study of oral Deucrictibant soft capsule for on-demand treatment of attacks in adolescents and adults with hereditary angioedema.
2. CHAPTER-4 NCT06679881 – a long-term, open-label study of oral Deucrictibant extended-release tablet for prophylaxis against angioedema attacks in adolescents and adults with HAE.

ASTHMA

1. CARISTA - creating a risk assessment biomarker tool to prevent seasonal and thunderstorm asthma (CARISTA). A phase 1 prospective cohort study, recruitment of a cohort of patients with seasonal allergic rhinitis (hay fever) with or without asthma, with prospective symptom monitoring for asthma and seasonal allergic rhinitis symptoms, throughout two consecutive Melbourne springtime grass pollen seasons, with collection of physiological data at study entry, together with storage of biological specimens for specified analysis at the completion of the recruitment.

PULMONARY REHABILITATION

1. TAPPET - Targeted Approach for Preventing Pulmonary and Extra-pulmonary Traits. Patients with chronic respiratory diseases are frequently hospitalised despite receiving the best available drug treatment. Systemic inflammation and frequent chest infections represent clinical signs (treatable traits) across multiple chronic respiratory diseases. These treatable traits are known to predict high risk of hospitalisations, but are not routinely targeted by treatments. Non-drug treatments such as pulmonary rehabilitation and self-management are effective in reducing hospitalisations, but their potential to transform outcomes for high-risk patients is unrealised, due to limited access and lack of guidance on optimal implementation. In this clinical trial, we will implement a treatable traits approach that identifies patients at highest risk of hospitalisation, and targets a personalised, safe, low-cost model of home pulmonary rehabilitation and self-management. We will evaluate the clinical effectiveness and cost-effectiveness of this approach, and generate new knowledge to guide future scale-up in health services across Australia.

CHRONIC SPONTANEOUS URTICARIA

1. EMBARQ-CSU2 NCT06455202. A phase 3 study of barzolvolimab in participants with chronic spontaneous urticaria. Barzolvolimab (CDX-0159) is a monoclonal antibody that inhibits the KIT receptor, thereby reducing mast cell activity and number. The current clinical trial EMBARQ-CSU2 is a phase 3 study that aims to establish the efficacy, safety and tolerability of barzolvolimab in subjects with chronic spontaneous urticaria (CSU) inadequately controlled by non-sedating second generation antihistamines. Identification and targeting of novel pathways addresses the unmet need in treating recalcitrant cases of CSU.

GRANTS

1. Eastern Health Foundation ($29,500) Redesigning the hospital environment to promote sleep time and recovery in Chronic Obstructive Pulmonary Disease (REST-COPD). A/Prof Alan Young; Prof Julie Considine; A/Prof Denise O'Driscoll; A/Prof Rowan Ogeil; Ms Penny Casey; Ms Lisa Jarvie.
2. Medical Research Future Fund (MRFF) 2035716 ($1,995,310.08). SIMPLIFI-OSA - a study to investigate the management of patients using limited-channel testing versus full polysomnography for identification of obstructive sleep apnoea. A/Prof Ching Li Chai-Coetzer, ….., A/Prof Denise O'Driscoll et al.
3. MRFF Chronic Respiratory Conditions Application 2031254 ($1,999,052). Creating a risk assessment biomarker tool to prevent seasonal allergic and thunderstorm asthma (CARISTA). Prof Jo Anne Douglass, ….., Prof Francis Thien et al.

INVITED LECTURES

A/Prof Jason Fok:

1. Angioedema – European Academy of Allergy and Clinical Immunology (EAACI). Hong Kong Allergy School, Hong Kong, August 2025.
2. Expert panellist discussion on management of chronic urticaria. European Academy of Allergy & Clinical Immunology (EAACI) Allergy School. Hong Kong, August 2025.
3. Patient-centric approaches in chronic spontaneous urticaria: enhancing quality of life through tailored therapies. Asia Pacific Association of Allergy, Asthma and Clinical Immunology (APAAACI) Scientific Congress. Jakarta, October 2025.
4. What's new in urticaria: refractory cases and differential diagnoses. Taiwan Dermatology Meeting (TDM). Taipei, November 2025.
5. Differential diagnoses of angioedema – Urticaria Centres of Research and Excellence (UCARE) Conference. Mumbai, December 2025.

TEACHING ACTIVITIES

1. Year 3 medical student teaching on Allergy and Anaphylaxis.
2. Basic Physician Trainee (BPT) teaching on Hot topics in Immunology/Allergy.
3. Box Hill Hospital Grand Round clinical vignettes: hereditary angioedema and DiGeorge syndrome.

ECRU Respiratory Team

RHEUMATOLOGY

DR CHRISTOPHER FONG

AUSTRALIAN LIVING GUIDELINES FOR INFLAMMATORY ARTHRITIS

Rheumatology has continued to be involved in the Australian Living Guidelines for Inflammatory Arthritis in 2025.

The treatment recommendations are developed by an expert panel of Australian rheumatologists, general practitioners and other medical specialists, allied health professionals, and people with lived experience of rheumatic disease. The most up to date global evidence is applied to the Australian healthcare context. The guideline is updated regularly and is available online:

https://anzmusc.org/outputs/australian-living-guidelines/

This living guideline is produced by:

- Australia and New Zealand Musculoskeletal (ANZMUSC) Clinical Trials Network
- Australian Rheumatology Association (ARA)
- Cochrane Musculoskeletal

as part of the Targeted Therapies Alliance, led by NPS MedicineWise.

The latest update has been on laboratory safety monitoring in people with inflammatory arthritis using conventional synthetic disease-modifying antirheumatic drugs (DMARDs).

RESEARCH TRIALS

We were involved in one multinational trial using a novel drug for lupus or Systemic Lupus. This is a complicated disease and affects many people from Asian and Indigenous/ Aboriginal backgrounds. It is a serious disease, causing early mortality and organ damage in young, child bearing patients. Apart from skin and joint manifestations, it can also affect the brain, kidneys, blood , heart and lungs. The availability of effective treatment is lacking.

Protocol: a multicentre, randomized, double-blind, placebo-controlled, phase 3 study to evaluate the efficacy and safety of Litifilimab (BIIB059) in adult participants with active Systemic Lupus Erythematosus receiving background non-biologic lupus standard of care.

PRESENTATIONS AT SCIENTIFIC MEETINGS

- Utility of preoperative risk screening tools for predicting complications after orthopaedic surgery: a validation study presented at the Australian and New Zealand Society of Geriatric Medicine, Sydney, 2025 . We explored the usefulness of screening tools to predict complications in patients undergoing surgery for hip fractures, and arthroplasty for osteoarthritis of hips and knees. This helped us to triage care perioperatively, and provided shared decision-making to patients and their carers.
- Pattern of autoimmune testing on antinuclear antibodies (ANAs) at a major metropolitan health care network, presented at the Australian Rheumatology Association meeting, Adelaide, 2025.
- Review of antibody testing at Eastern Health resulting in ongoing audits to limit repeat testing and prevent unnecessary blood tests (project aided by medical students involved in the Monash University Scholarly Intensive Placement program).
- Phenotypic variation in cranial versus extracranial giant cell arteritis presented at the Asian Pacific League against Rheumatic Diseases in Japan (APLAR 2025). We explored the different presentations of large cell vasculitis in a cohort of patients within Eastern Health.

SPECTRUM (SPECTRUM PERSONALITY DISORDER AND COMPLEX TRAUMA SERVICE)

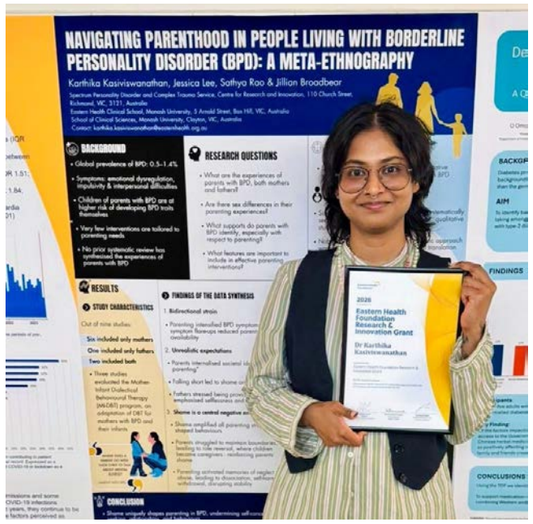
A/PROF JILLIAN BROADBEAR

In 2025, Spectrum advanced a broad and strategically aligned research agenda across its four organisational priorities: Deepening Impact, Increasing Influence, Widening Reach, and Transforming the Program. The year saw major progress in research related to suicide prevention, psychedelic-assisted psychotherapy, health economics, peer-led initiatives, and emerging work focused on complexity in personality disorders.

Spectrum expanded its long-running data linkage project - in partnership with the Centre for Victorian Data Linkage (CVDL) - to collaborate with the Eastern Melbourne Primary Health Network (EMPHN) and include data from the Coroners Court of Victoria (CCoV). This is the first study of its kind to explore the longitudinal course of borderline personality disorder (BPD) in an Australian context.

2025 also marked the funding and establishment of the pilot Personality Disorder and Autism Assessment Clinic at Spectrum (PAACS), with an embedded evaluation component. Funded by the Department of Families, Fairness, and Housing (DFFH), this clinic is in a unique position to gather valuable data, elucidating the diagnostic complexity and intersectionality between BPD and Autism. Throughout 2025, the groundwork for a pilot study of MDMA-assisted psychotherapy (MDMA-AP) was completed. Despite substantial operational and regulatory challenges, Spectrum successfully recruited its first participant; an important milestone towards demonstrating the feasibility of this ambitious program within a public health service. Findings from the pilot study will guide the design of a future randomised controlled trial, to help inform the development of novel psychopharmacological adjuncts as interventions for people with co-occurring BPD and trauma-related disorders.

In May, Prof Sathya Rao, A/Prof Jillian Broadbear and Ms Cathryn Pilcher represented Spectrum at the Suicide Prevention Australia (SPA) Conference in Perth, where they presented Spectrum's suicide-prevention research, and shared practical clinical insights on working with people experiencing persistent suicidality. Later in the year, Spectrum commenced discussions with Eastern Health Mental Health Access and East Metro Health Service in Perth, to investigate models of care and associated costs for people with BPD presenting to emergency departments. In November, Spectrum secured funding from the Eastern Health Foundation to trial Good Psychiatric Management (GPM) as an alternative to ED-based crisis responses for people with BPD. This project is designed to address a critical service gap by providing evidence-based care following crisis stabilisation. It intends to reduce the likelihood of emergency department involvement in subsequent crises, improve the person's distress management capability, and decrease their reliance on urgent care services.



Dr Karthika Kasiviswanathan, recipient of funding from the Eastern Health Foundation

Spectrum's Peer Group Program, led by lived experience consultants, set the foundation for a preliminary evaluation of the program's acceptability and impact. Embedding and strengthening partnerships with the lived experience workforce remains a priority for Spectrum, to ensure that peer perspectives continue to shape service design and translational research.

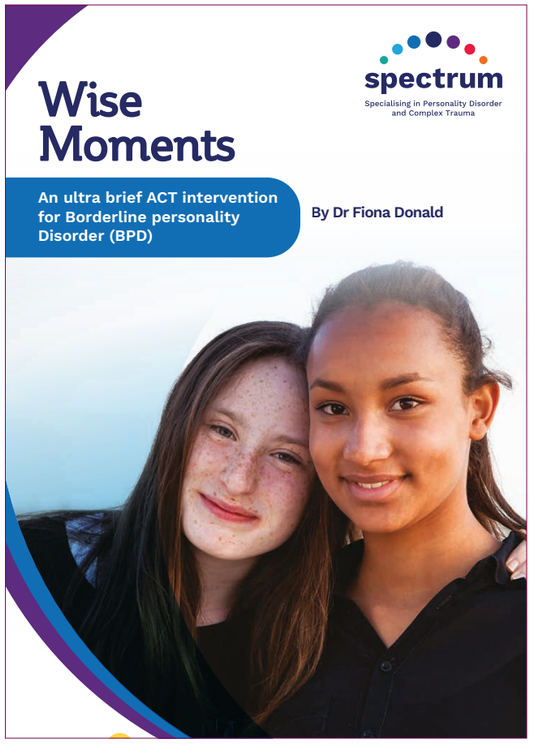
Spectrum also progressed several additional initiatives. The Spectrum Client Care Program, focusing on understanding complexity in personality disorders, remains a key strategic research area exploring the effectiveness of Spectrum's ongoing clinical work. A study examining the intersection of BPD and sleep, funded by the Eastern Health Foundation, and conducted in partnership with Turning Point, commenced recruitment and is expected to conclude by the end of 2026. The project has attracted strong community interest, with anticipated outcomes expected to inform improvements in sleep health, increasingly recognised as a key factor in mental health, wellbeing, and suicide risk reduction among people with BPD.

In November, Dr Julian Nesci represented Spectrum on the international stage at Boston at the ISSPD (International Society for the Study of Personality Disorders) Congress, where he presented Spectrum's 25-year journey as a specialist personality disorder service. Following this, Spectrum released an evidence-based treatment manual describing the Wise Moments program, authored by Spectrum clinical psychologist and academic Dr Fiona Donald. Continuing its tradition of sharing research, Spectrum hosted the 2025 Spectrum Research Forum, attracting participants from Australia, India, France, Japan, and the United States. The event was highly appreciated by attendees from diverse fields, with one remarking:

Jillian Broadbear at the podium

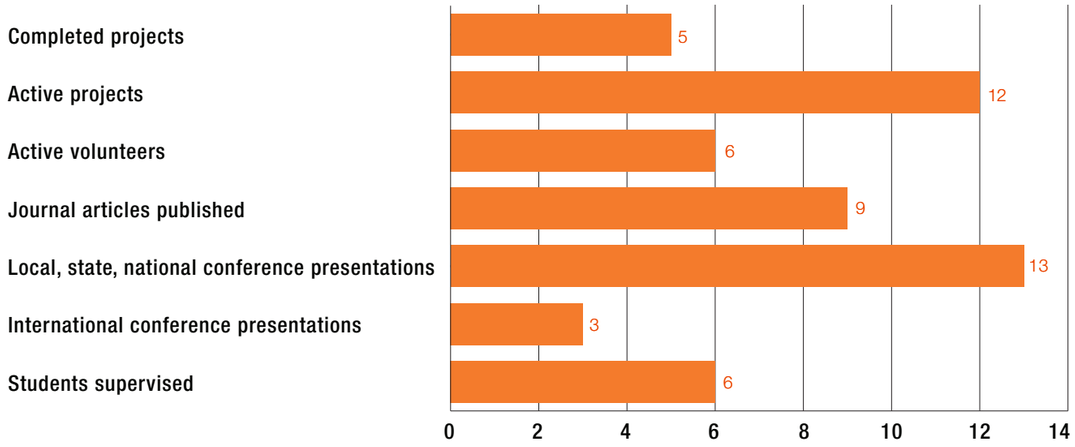
"Thoroughly enjoyed listening to the presenters and what the future holds as a result of their dedicated research."

In December, Professor Sathya Rao, Executive Clinical Director at Spectrum, received an academic promotion from Monash University. This not only recognised his own distinguished career and experience, but also reflected the dedication of Spectrum staff and the exceptional work of the team under his leadership over many years. International recognition of Spectrum's preeminence in the personality disorder field, was confirmed with the invitation of Prof Sathya Rao and A/Prof Jillian Broadbear (Head of Research and Innovation), to be guest editors for a special collection in Frontiers in Psychiatry on the topic 'Borderline Personality Disorder: Insights into Etiology, Diagnosis, and Treatment Strategies'. Seven research articles with over 8,000 views and 634 downloads have already been published in the special issue.



Wise Moments treatment manual

Research Output



By December, Spectrum had contributed nine research papers, published in leading peer-reviewed psychiatry and allied health journals. Among these was a milestone study conducted with the CCoV, examining factors associated with suicide among people with BPD, and the moderating role of co-occurring depression.

Published in the Journal of Psychiatric Research, the findings reinforce Spectrum's leadership in suicide prevention research, and offer valuable insights to enhance risk assessment and guide targeted prevention strategies for vulnerable people. Dr Nesci also shared findings of this study at the ISSPD Congress, 2025. Ongoing collaboration with CCoV to extend this work through data linkage, further strengthens Spectrum's contributions to suicide prevention efforts in 2025 and beyond.

Cumulative journal articles published in the last 10 years

In summary, 2025 was a year of substantial research growth for Spectrum. The service advanced major work in suicide prevention, psychedelic-assisted psychotherapy, and health economic research, while strengthening key collaborations and establishing a strong foundation for future trials and cost-effectiveness analyses.

The year's accomplishments could not have been possible without the dedicated and passionate efforts of Spectrum's research team, research volunteers, research students, and support from all levels of Eastern Health leadership.

Members of Spectrum's research team (Joseph Fettling, Melissa Morando, Jillian Broadbear, Karthika Kasiviswanathan, and Dinuli Nilaweera)

SUPPORTIVE AND PALLIATIVE CARE

The Department of Supportive and Palliative Care would like to share the highlights of its journey in 2025. With a collaborative spirit and commitment to high quality and equitable palliative care delivery, the department has established a structure and network to support collaborative and interdisciplinary research, and education to advance palliative models of care and evidence underpinning best practice.

NOTABLE ACHIEVEMENTS / GRANTS / AWARDS

- Dr Aaron Wong was the first Australian to be selected for the Cynthia Goh Fellowship, joining a prestigious regional network of palliative care leaders to lead impactful initiatives across the Asia Pacific region.
- Bessie Wong (Senior Palliative Care Pharmacist) received an EH Foundation Research and Innovation Grant to pilot pharmacist integration in the palliative care clinic.
- Sarah Lindsay-Macfadyen (Palliative Care CNC) and Berni Swinkels (Palliative Care nurse) received CareXperience Tank grants for their respective "Breathing Easier" and "Handover Heartwork" projects, to enhance patients' experience.
- The department received a NEMICS professional grant of $5000 to build interdisciplinary palliative care research capacity, and supported 12 clinicians to complete research courses.
- Drs Aaron Wong and Grace Walpole were nominated to co-lead the Safer Care Victoria review of the Syringe Driver Compatibility and Opioid Conversion guidelines.
- Establishment of the Eastern Health Network for Research Interdisciplinary Collaboration in Hospital-based Palliative Care (ENRICH-PC).

EDUCATION / INVITED PRESENTATIONS

- Drs Grace Walpole and Katie Tham led and facilitated various communication skills and shared decision-making workshops through Eastern Health Clinical School (EHCS) and other external organisations (VitalTalk, Healthcare Communication Collective).
- SMRPCC webinars: Dr Aaron Wong, Dr Grace Walpole, Penelope Casey and Aliesha-Jane Fejgl presented on dementia palliative care and delirium at end of life.
- EMRPCC/EMPHN GP Community of Practice education sessions: Drs Katie Tham, Aaron Wong and Grace Walpole presented on dementia palliative care, palliative care in aged care, and communication skills.
- Asia Pacific Hospice Conference: Dr Aaron Wong presented on "Managing transitions in care" and "Serotonin syndrome in palliative care".
- Residential InReach Education Day: Aliesha-Jane Fejgl, Lauren Hamill and Dr Aaron Wong presented on "Recognising and managing symptoms at end of life".
- Dr Katie Tham coordinated and updated a series of online palliative care education modules for final year Monash University medical students.
- Renal Supportive Care: Dr Sarah Tan presented at Renal Society of Australasia and Kidney Supportive Care masterclass in Sydney. Dr Tan organized the Kidney Supportive Care workshop and ANZSPM Trainee Day.
- Dr Aaron Wong delivered the keynote presentation on Dementia and Palliative Care at Hume Palliative Care in Aged Care Summit.
- Dr Aaron Wong facilitated the Safer Care Victoria Palliative Care Community of Practice virtual roundtable discussion on improving access and advocacy for core palliative care medications (with Registrar Dr Shalini Ponnampalam presenting on "Responding to Australia's palliative medication shortages" and contribution from Bessie Wong).
- Dr Yok-Yin Lee and Meegan Callinan conducted a Pain Assessment and Management program and End of Life Nurses Day education sessions.
- Palliative Care Victoria Seniors webinar: Drs Aaron Wong and Amanda Tan presented on palliative care and dementia.
-

CONFERENCE ABSTRACTS / PRESENTATIONS (LOCAL AND COLLABORATIVE)

ANZSGM ANNUAL SCIENTIFIC MEETING, SYDNEY 2025 (CONTRIBUTOR: DR AARON WONG)

- Palliative care needs of residential aged care facility residents admitted to a Hospital in the Home service.
- The Residential Care Evaluation and Support Pathway for Optimising Needs in Delirium (RESPOND) implementation evaluation.
- Prevalence, characteristics, and symptom burden of patients with dementia in an inpatient palliative care unit setting.
- The Impact of a Perioperative Care of Older Adults undergoing Surgery (POPS) clinic on goals of care completion: findings from an Australian retrospective cohort study.

ASIA PACIFIC HOSPICE CONFERENCE, SARAWAK MALAYSIA 2025 (CONTRIBUTORS: DRS AARON WONG, ED PRANOTO, BENJAMIN CROCK)

- Enhancing support for palliative care needs of patients with cognitive impairment or dementia living in residential aged care homes through an Australian Hospital at Home service.
- Strengthening palliative care support for residents with dementia in residential aged care homes through the RAPID Assist Service.
- Serotonin: too much of a good thing?
- Surgery (POPS) clinic on goals of care completion: findings from an Australian retrospective cohort study (and APHC).
- Oncology clinical trials prohibited medications complicating cancer pain management and the role of palliative care; 2 case reports.

WORLD HOSPITAL AT HOME CONFERENCE, VIENNA 2025 (CONTRIBUTOR: DR AARON WONG)

- Responding to terminal deterioration in residential aged care homes: preliminary evaluation of an Australian Hospital at Home (HAH) service.
- Challenges of acute transitions from hospital to home for end-of-life care: lessons learned from a collaborative specialist palliative care and Hospital at Home service pilot.

EUROPEAN ASSOCIATION FOR PALLIATIVE CARE CONFERENCE (CONTRIBUTORS: DRS AARON WONG/GRACE WALPOLE)

- Australian breakthrough cancer pain gap analysis.
- Palliative care communication skills workshops – the Australian experience.

MEDICINES MANAGEMENT 2025 NATIONAL CONFERENCE (CONTRIBUTORS: BESSIE WONG, EMILY HUYNH, DRS YOK YIN LEE, GRACE WALPOLE, AARON WONG)

- Unpacking polypharmacy: insights into risk factors among palliative care patients.
- Deprescribing in palliative care: medication shifts across the patient journey.
- Evaluating the use of Venous Thromboembolism (VTE) prophylaxis in palliative care: implications for practice.
- Bridging the Gap – Buprenorphine/Naloxone (Suboxone®) to Methadone conversion for pain in palliative care (case report).

EASTERN HEALTH ALLIED HEALTH RESEARCH FORUM (CONTRIBUTOR: BESSIE WONG)

- Polypharmacy and deprescribing in palliative care: why pharmacists matter.

CLINICAL TRIALS (RECRUITING)

- RESONANCE: multicentre RCT, medicinal cannabis on quality of life and symptom control in advanced cancer.

ONGOING RESEARCH (LOCAL AND COLLABORATIVE)

- Breakthrough cancer pain gap analysis and substudies (Dr Aaron Wong, National expert, working group member).
- Nutritional screening in the Palliative Care Unit (Suba Slater, Alyssa Yap, Drs Dewmi Abeysirigunawardana, Aaron Wong and Sarah Tan) – multiple studies.
- Palliative Care Clinic evaluation studies (Drs Sarah Tan, Aaron Wong).
- MODEL-PC: Delirium screening in palliative care (Dr Grace Walpole, Penelope Casey).
- Responding to Australia's medication shortages in palliative care: the need for a multi-agency coordinated response (Drs Shalini Ponnampalam and Aaron Wong, Bessie Wong).

COMPLETED RESEARCH (LOCAL AND COLLABORATIVE)

- Palliative care clinicians' medication recommendations for Intensive Care Unit patients transitioning to ward-based end-of-life care: a descriptive study (Drs Amanda Tan, Aaron Wong)
- Complexities in restless legs syndrome management in palliative care (Drs Melissa Ang, Aaron Wong, Sarah Tan, Shalini Ponnampalam and Bessie Wong).
- Palliative care needs among residential aged care facility residents referred to an Australian Hospital-in-the-Home service: a descriptive retrospective cohort study (Dr Aaron Wong).
- Breakthrough cancer pain management – gap analysis of the current Australian landscape (Dr Aaron Wong).

FUTURE RESEARCH

- Comparing PainChek® with routine pain assessments in non-verbal inpatient palliative care populations ($15,000 grant).
- Virtual Immersion for Better Experience (VIBE) – pilot implementation of virtual reality in the Palliative Care Unit.
- Mapping out public palliative care hospital and community services in Victoria.
- Pilot implementation and evaluation of a novel model of care: Hospital in the Home – Acute Palliative Care stream.

Aaron Wong, Asia Pacific Hospice Conference in Sarawak, Malaysia

Aaron Wong with Bessie Wong

SURGICAL PROGRAM

PROF SHOMIK SENGUPTA

Eastern Health surgical units continued to grow their academic activities and output through 2025, with many of the units being notably productive. Some highlights are summarised below, and indexed publications are listed in the Publications section of the Annual Report.

ANAESTHESIA AND PAIN MANAGEMENT

RESEARCH AND QUALITY ASSURANCE ACTIVITIES

Randomised Controlled Trials and large studies

LOLIPOP Trial (EH PI: Raja Rengasamy)

The LOLIPOP trial is a pragmatic, phase III, international, multicentre, double-blind, randomised trial comparing chronic post-surgical pain after breast cancer surgery in patients receiving a 24-hour lidocaine infusion vs placebo.

SNaPP Trial (EH PI: Dr Libia Machado)

Sugammadex, neostigmine and pulmonary post-operative complications in non-cardiac surgery: a multicentre, double-blind, RCT examining how reversal agents affect postoperative outcomes.

ROCKET Trial (EH PI: Dr Gordon Mar)

Reduction Of Chronic post-surgical pain with Ketamine: multicentre, double-blind, placebo-controlled phase 3/4 RCT examining whether ≤72 hours of perioperative ketamine reduces chronic post-surgical pain.

STARGATE Study (EH PI: Dr Mark Ng)

International observational study on airway management in OR and non-OR anaesthesia. Large multicentre observational design.

EXTUBE Study (EH PI: Dr May Tsai)

Large international observational study evaluating extubation complications in the OR and ICU.

Prepartum Fibrinogen & Postpartum Haemorrhage (PPH) study (PI: Dr Sarah Lee)

The PPH study is an ongoing prospective project at Eastern Health investigating whether antenatal fibrinogen levels can serve as an early predictive biomarker for postpartum haemorrhage. Although low fibrinogen is a recognised marker once bleeding has commenced, its role before delivery remains unclear. Establishing a reliable pre-labour indicator could support earlier risk stratification, targeted planning, escalation and preventative strategies for women at higher risk of PPH.

The study, funded by an Eastern Health research grant, and conducted in collaboration with Monash University Scholarly Intensive Placement medical students, has recruited more than 170 participants. Prospective data include antenatal fibrinogen levels, obstetric and anaesthetic variables, quantified blood loss, transfusion requirements and maternal outcomes, forming one of the most comprehensive obstetric haemorrhage datasets at Eastern Health. Given strong feasibility and multidisciplinary involvement, the next stage will explore progression to a randomised controlled trial, with the broader aim of evaluating prenatal fibrinogen as part of a validated PPH risk assessment tool and identifying modifiable factors and care pathways influencing outcomes.

GRANTS

Eastern Health Research Foundation Grant awarded to Dr Libia Machado Munoz for the study “A prospective single-blinded observational study assessing gastric residual volume in patients prescribed GLP-1 receptor agonists after 24-hour fasting, correlating bedside gastric ultrasound with direct gastroscopic findings”.

POSTERS AND ORAL PRESENTATIONS

1. Apputhura P, Meyer D, El-Behesy B, Wu A. *Factors influencing postoperative serum magnesium levels in adult patients undergoing major abdominal surgery*. Oral presentation at 2025 Euroanaesthesia; poster presentation at 2025 ANZCA ASM.
2. Apputhura P, Meyer D, El-Behesy B, Wu A. *Factors contributing to increased hospital costs in older surgical patients after hip fracture*. Oral presentation at 2025 Euroanaesthesia; poster presentation at 2025 ANZCA ASM.
3. Azzopardi S, Szmerling J, Ng WH, O’Gorman B, Cheung R, Ozcoban O, Dash S, Watkins L, Schembri E, Owen P, Hoang MD, Dewapura S, Mar GJ. *A comparative analysis of adverse effects between sublingual Buprenorphine and immediate-release Tapentadol in postoperative adult patients*: a retrospective cohort study. Presented at the Australian Pain Society Conference.
4. Bedford T, Morrice C, Skiller A, Liu T, El-Behesy B, Wu A. The effects of surgical approach (open vs laparoscopy) on serum magnesium following major abdominal surgery. Poster presentation at the 2025 ASA National Scientific Congress.
5. Nguyen C, Machado Munoz L. *Anaesthetic adherence to ERAS pathways in colorectal surgery.* 2025. Presented at CME meeting.
6. Collings M, Zupan I, Skiller A, Donaghy K, Wu A. *Spinal anaesthesia and hyperglycaemia spiking spines and sugars?* Oral presentation at the 2025 ASA National Scientific Congress.
7. Collings M, Zupan I, Skiller A, Donaghy K, Wu A. *Fasting, diabetes, and the sweet spot: navigating glycaemic control in the perioperative period*. Oral presentation at the 2025 ASA National Scientific Congress.
8. Dickson S, Cappellari D, Wu A. *The effects of topical pharyngeal anaesthesia on patient tolerance and recovery time following gastroscopy under sedation*. Oral presentation at 2025 Euroanaesthesia; poster presentation at 2025 ANZCA ASM.
9. Jun BK, McGugan-Wevill C, Schneider J, Wu A. *Fatigue eclipses pain and PONV in preoperative concern profiles of women undergoing gynaecological surgery: a longitudinal interview study*. Oral presentation at the 2025 Anaesthesia NZ ASM.
10. Jun BK, McGugan-Wevill C, Schneider J, Wu A. *Self-management of postoperative fatigue after gynaecological surgery: a prospective qualitative study*. Oral presentation at the 2025 Anaesthesia NZ ASM.
11. Ng WH, Dodds J, Azzopardi S, Schneider J, Lim J, Shao J, Liew T, Pahl D, Machado Munoz L, Low C, Lee S. *Delayed discharges from Box Hill Hospital Post Anaesthetic Care Unit: factors contributing to clinical and non-clinical delays.* Oral presentation at EH Research Forum.
12. Hoang MD, Cui D, Wong A, Satari S, Wu A. *Measuring quality of Recovery-9 in adult patients following lower limb orthopaedic surgery*. Oral presentation at 2025 Euroanaesthesia.
13. Machado Munoz L, Campbell M, Cheung RA, Tang KHJ, Rupeshraj H. Surgical site infections after Clindamycin vs Cefazolin prophylaxis in penicillin-allergic patients: a retrospective cohort study. 2025. . Poster presentation at ANZCA Peri-operative Medicine SIG Meeting, oral presentation at ANZAAG symposium (Malcom Fisher Prize winner).
14. Wang K, Langton S, Machado Munoz L. *Are we meeting the mark? An audit of liver resection care at Eastern Health against enhanced recovery after surgery guidelines. 2025 Poster presentation at Eastern Health Research Forum and ANZCA ASM 2026.*

EDUCATION

ADVANCE meetings

2025 has been a year of significant growth and impact for ADVANCE – Anaesthesia Discussion, Views and Contemporary Evidence.

Across multiple high-engagement sessions, ADVANCE continued its mission of addressing variation in practice, improving patient safety, and fostering evidence-based multidisciplinary dialogue. Sessions attracted strong national and international participation with several reaching record-high registrations.

2025 has been a landmark year for ADVANCE, marked by record engagement, high level discussion, and expansion of its research pillars. The platform continues to evolve from an educational series into a catalyst for research, practice improvement, and international collaboration.

Anaesthesia Crisis Management Course

The interactive, multi-disciplinary Anaesthesia Crisis Management courses are specifically designed to foster effective team-based management of anaesthetic and perioperative emergencies. These courses bring together trainees, nurses, and consultant anaesthetists to collaboratively develop their crisis response skills.

The courses are officially recognised and accredited as ANZCA emergency response Continuing Professional Development (CPD) activities.

Throughout 2025, four sessions of the Anaesthesia Crisis Management Course were held, each addressing major crisis modules including Major Haemorrhage, Anaphylaxis, Advanced Life Support (ALS), and Can't Intubate Can't Oxygenate (CICO).

A total of five trainees, 17 nurses, and 22 consultant anaesthetists completed the course during the year. Participant feedback was overwhelmingly positive, noting that the course provided valuable opportunities to manage simulated emergency scenarios, which are rarely encountered in routine practice.

- Other teaching activities
- Weekly Registrar teaching at BHH; weekly HMO teaching at BHH and MH.
- 12 sessions of neonatal resuscitation MDT, and six sessions of adult resuscitation MDT simulation, at AH.
- Monthly PROMPT sessions at BHH and AH

BREAST/ENDOCRINE

ACTIVE PROJECTS:

1. Systematic review of existing preoperative clinical models to predict sentinel node status in operable breast cancers.
2. Systematic review of existing preoperative radiomics-based models to predict sentinel node status in operable breast cancers.
3. Meta-analysis of external validation studies of the MSKCC nomogram for the prediction of sentinel node status in early breast cancers.
4. A model to select early breast cancers where sentinel node biopsy may be avoided.
5. Implementing a quality assurance and research database for the breast and endocrine surgery unit.

ONGOING MULTICENTRE TRIALS AND REGISTRIES:

1. The ANZ Targeted Axillary Dissection Registry.
2. POSNOC trial.

Dr Justin James is continuing his PhD project on the development of prediction models for nodal status to enable selective sentinel node biopsy, under supervision of Prof Shomik Sengupta and Prof Christobel Saunders (external supervisor).

COLORECTAL

ACTIVE RESEARCH PROJECTS:

1. TENTACLE study: Colon cohort study on colonic anastomotic leakage - international multicentre study, completed, pending publication.
2. Exploring the utility of peritoneal tumour DNA to detect clinically occult peritoneal metastasis in locally advanced colon cancer (detect-PM) – multicentre collaborative study.
3. The optimal dose of Botulinum toxin for the treatment of chronic anal fissure – single-centre randomised controlled trial.

ENT

Dr Kevin Nguyen was faculty and presenter at the RACS TIPS Course (Training in Professional Skills), August 2025. He was a panel member at the pre-conference Prehab Workshop, ANZ Head and Neck Cancer Society ASM, August 2025. He was an invited presenter on Head and Neck Reconstruction, ANZ Head and Neck Cancer Society ASM, August 2025. He was an invited presenter, Head and Neck Reconstruction, Robert Guerin Memorial ASOHNS Trainee Meeting, October 2025. He was Convenor for 4th HN Dissection Course, Melbourne University, Melbourne-Sydney Head & Neck Dissection Course, October 2025.

Dr Natalie Sist and Dr Dayan Chandrasekara were examiners for the RACS Clinical Exam (CE) for SET trainees, Sydney and Adelaide 2025.

Dr Natalie Sist was Instructor at RACS TIPS Course, Brisbane, August and October 2025.

Dr Dayan Chandrasekara was faculty, Melbourne Head & Neck Dissection Course, October 2025.

ORTHOPAEDICS

PRESENTATIONS AT MEETINGS

Ulna step lengthening osteotomy in severe ulnar negative variance (Most Innovative Paper award). Kemble Wang. Australian Hand Surgery Society Conference.

Growth arrest of the radius and ulna and its effect on the adjacent bone (Best Paper award). Kemble Wang. Australian Paediatric Orthopaedic Association Conference.

Orthopaedic Devices Infection Network. Sina Babazadeh. International Consensus Meeting, Istanbul, Turkey.

GRANTS

Victorian Orthopaedic Foundation. Greater sigmoid notch dysplasia - cadaveric biomechanical study of elbow stability with greater sigmoid notch sling reconstruction. Kemble Wang, Eugene Ek, David Acland, Jacob Chen ($7,000).

Victorian Orthopaedic Foundation. Orthopaedic Device Infection Network. S. Babazadeh ($7,000).

Royal Australasian College of Surgeons. Orthopaedic Device Infection Network. S Babazadeh ($10,000).

UPPER GI/HPB

There was an encouraging critical mass of surgical residents and registrars involved in a variety of research projects, culminating in a range of conference presentations and publications. Weekly research meetings served as a focus for developing, refining and presenting research projects. The newly appointed Upper GI Research Manager role, initially held by Ms Sena Arpaci, and taken over by Mr Haroon Gill, provided crucial support for these research projects.

Dr Melanie Crispin was awarded her Masters of Surgical Education through the University of Melbourne for her project "Do you want to be a surgeon? A qualitative study of medical students in Australia".

Dr Janindu Goonawardena successfully completed the pre-submission milestone review for his Master of Surgery project, under supervision of A/Prof Sean Mackay. His thesis has now been submitted and is under review by examiners.

UROLOGY

CLINICAL TRIALS RESEARCH

The Urology unit continued to contribute significantly to clinical trials research through Eastern Clinical Research Unit (ECRU) trials.

RESEARCH HIGHER DEGREE

Two higher-degree students had their Master of Surgery degrees conferred during 2025:

- Paul Rival (Jan 2025) for his project “Assessing the up-to-date management of recurrent urinary tract infections”; co-supervised by Prof Shomik Sengupta and A/Prof Caroline Dowling.
- Abram Botros (Sept 2025) for his project “Implementation of a standardised surgical checklist for transurethral resection of bladder tumour to improve risk stratification and overall management of non-muscle-invasive bladder cancer”; co-supervised by Prof Shomik Sengupta and Prof Ian Davis.

Dr Henry Yao successfully completed his pre-submission milestone for his PhD project, under co-supervision of Prof Ian Davis, Prof Shomik Sengupta and Dr Justin Chee (external supervisor). Dr Yao is currently finalising his thesis for planned submission.

A further two Masters students commenced enrolment in 2025:

- Dr David Toro Tole, under co-supervision of Prof Shomik Sengupta and A/Prof Caroline Dowling.
- Dr Snigdha Guralla, under co-supervision of Prof Shomik Sengupta and Dr Eva Fong (external supervisor).

VMO ACADEMIC HIGHLIGHTS

Dr Courtenay West was involved in the development of new Therapeutic Guidelines (Kidney & Urology); leading chapters on stress urinary incontinence and lower urinary tract symptoms; and contributing to the group as a whole. She was also an invited speaker at the Australia and New Zealand Urology Nurses Society Vic/Tas education event in Dec 2025.

Dr Athina Pirpiris has submitted her PhD thesis titled “Development of a sonographic grading system for pelvic floor contractions in men using transperineal ultrasound and correlation with continence outcomes post radical prostatectomy”, undertaken through the University of Sydney.

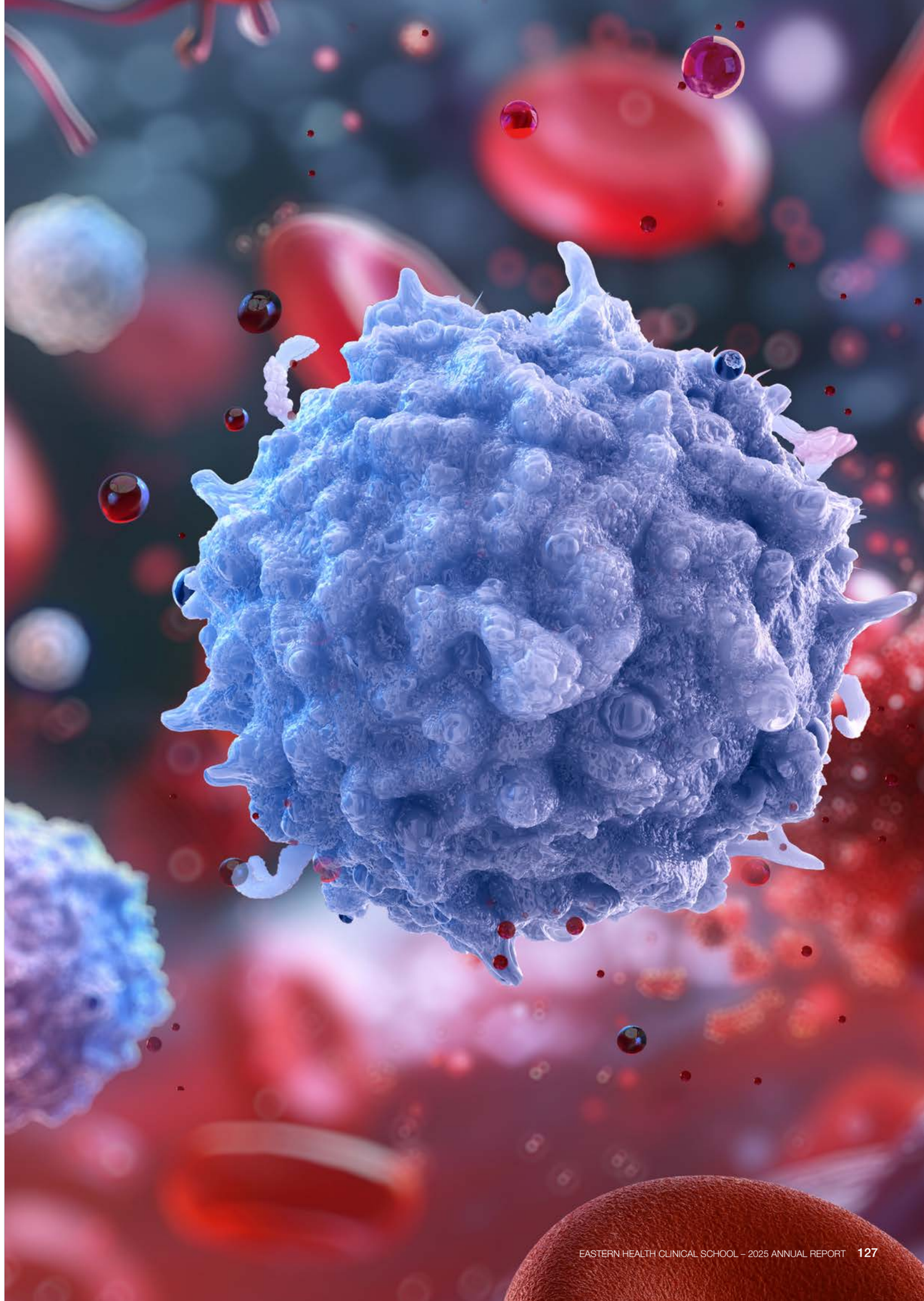
Dixon Woon was promoted to Adjunct Clinical Associate Professor. He also achieved a similar appointment through the University of Melbourne. He was an invited speaker at the Hong Kong Urology Society ASM meeting in November 2025. He was also an invited speaker at the ANZUP/USANZ Best-of-GU program in November 2025.

Assoc Prof Caroline Dowling continued in her role as Co-Director of the Medical Students Program Directorate at EHCS. She was an invited session and workshop chair at the Urological Society of Australia and New Zealand ASM in Perth in March 2025. She developed and directed a course on “Complex and challenging cases in female pelvic medicine and reconstructive surgery” at the American Urological Association annual meeting in Las Vegas in April 2025.

Prof Shomik Sengupta was an invited speaker at the European Association of Urology Annual Congress in Madrid in March 2025. He was an invited moderator at the Urological Association of Asia Annual Congress in Taipei in August 2025. He also attended the International Bladder Cancer Group annual retreat in Houston in August 2025.

Prof Sengupta was a member of the scientific program committee, Chair of the prostate cancer organising committee, session chair and speaker at the Société Internationale d’Urologie Annual Congress in Edinburgh from October-November 2025. He was also an organising committee member, invited faculty and session chair for the World Uro-Oncology Federation meeting held as a satellite meeting during the SIU Annual Congress.

Prof Sengupta was an invited speaker at the Best-of-GU program organised by ANZUP and USANZ in November 2025. He was also invited to be a member of the expert advisory group for the Victorian Integrated Cancer Services review of cancer care in culturally and linguistically diverse populations.



ACADEMIC OUTPUTS

RESEARCH FUNDING

EHCS received a total of $44.83M in research funding in 2025. This comprised 49 grants: 16 in Category 1; 6 in Category 2; 17 in Category 3; 2 in Category 4; and 8 in Not Specified.

Funding Category	Funding Subcategory	Award Count	Awarded Amount
Category 1	Commonwealth Other	1	$121,448
	Medical Research Future Fund (MRFF)	9	$22,537,476
	National Health and Medical Research Council (NHMRC)	5	$9,030,480
	State/Territory Government	1	$194,796
	Total	**16**	**$31,884,199**
Category 2	State/Territory/Local (other)	2	$283,744
	State/Territory/Local (own purpose)	4	$524,407
	Total	**6**	**$808,151**
Category 3	Australian for-profit organisations	2	$60,000
	Australian not-for profit organisations	10	$1,993,308
	Australian philanthropy	1	$1,200,000
	International not-for profit organisations	4	$4,393,402
	Total	**17**	**$7,646,710**
Category 4	Funding derived from Commonwealth grant to CRC's	2	$3,399,631
	Total	**2**	**$3,399,631**
Not Specified	Not Applicable	6	$641,435
	Not Specified	2	$450,272
	Total	**8**	**$1,091,707**
Total		**49**	**$44,830,398**

PUBLICATIONS

These figures are derived from the Monash University Power BI system and are likely to be incomplete in terms of outputs by adjuncts, and incomplete collection of conference presentations.

Summary		2025
Output Indicator - Research	Output Count	% of total
Research	344	87%
Not Research	48	13%
Total	**392**	**100%**

Research	2025
Output Subtype	Output Count
Article (journal)	301
Review Article (journal)	37
Chapter (Book)	3
Other Report	3
Total	**344**

Not Research	2025
Output Subtype	Output Count
Article (journal)	16
Comment/Debate (journal)	4
Letter (journal)	5
Meeting Abstract (journal)	8
Chapter (Book)	3
Editorial (journal)	8
Other	4
Total	**48**

PUBLICATIONS

AGED MEDICINE

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FINANCE

A detailed financial statement is provided for 2025. In brief:

- Total revenue: $34.36M, an increase of $2.4M over 2025.
- Research revenue: $18.7M.
- Expenditure: $33.06M.
- Operating result: $1.29M SURPLUS, representing a gross margin of 21.9% and ongoing operating margin of 32.8% (calculated without including central charges as per Monash guidelines).

INCOME STATEMENT 2025

	2024	2025 (actual)
Financial Plan	(575,069)	1,292,567
Operating Revenue	31,924,611	34,354,555
Commonwealth Government Grants DEEWR	6,503,366	7,421,088
Student Fees	4,542,778	4,197,334
Research	17,841,801	18,705,329
Commercial	2,204,128	2,172,067
Other Grants & Donations	(492,323)	24,480
Other Revenues	-	-
Internal Grants & Support	45,830	-
Inter Faculty Transfers	-	(3,500)
Intra Entity Contributions	(952,707)	(1,126,840)
Intra Entity Allocations	2,231,737	2,964,597
Operating Expenditure	32,499,680	33,061,988
Salary and Related Expenses	18,814,979	20,098,899
Infrastructure related expenses	483,022	572,576
Finance Incentive	-	-
Financial and administration expenses	57,600	19,963
Student scholarships and awards	369,925	628,523
Other Operating Expenses	4,197,818	3,284,837
Depreciation	84,507	75,568
Direct & Central Overhead Charges	6,186,087	6,236,152
Space Charges	34,397	45,023
Other Overhead Costs	2,271,345	2,100,447
Contract Recoveries	-	-
Net Cash Position	21,701,358	23,058,668
Net Cash from Plan	(490,562)	1,368,136
Capital Expenditures	40,390	10,826
Previous Year Funds	22,232,310	21,701,358

MONASH
University