President’s Report

With deep sighs of relief resonating around the Australian health and medical research (HMR) sector following the end to another gruelling round of major grant submissions, I take this opportunity to reflect on the past 4 months and look ahead to the rest of 2017.

Pre-budget submission

In January the ASMR submitted its recommendations to Treasury ahead of the 2017–18 Federal Budget (http://www.asmr.org.au/Pre-Budget_2017_FINAL.pdf). As many of you will be acutely aware, investment into the NHMRC has remained static for the past 5 years and decreased considerably as a proportion of total health system expenditure. As both NHMRC data and our own workforce survey data attest, this funding stagnation has resulted in considerable losses from the HMR workforce, placing the sector in a precarious position.

As always, our pre-budget advice to Government was grounded in a solid evidence base. While our submission drew on many of our previous reports and surveys, a focal point was the silver lining that emerged from our recent Deloitte Access Economic report on the exceptional value of the HMR workforce. This report showed that the implementation of a sustainable investment model, in which investment into NHMRC is benchmarked against total health system expenditure, would create a windfall of $58 billion in net returns.

Our recommendation to Treasury for the 2017-2018 Federal Budget is an immediate injection of an additional $350M into the NHMRC Medical Research Endowment Account (MREA). The reasons for this recommendation are two-fold. Firstly, we believe that this will provide some short-term stability to the HMR sector, with the potential to raise Project Grant and CDF funded rates from the current lows to historic levels, with the potential to raise Project Grant and CDF funded rates from the current lows to historic levels, with the potential to raise Project Grant and CDF funded rates from the current lows to historic levels, with the potential to raise Project Grant and CDF funded rates from the current lows to historic levels; placing the sector in a precarious position.

Research investment

The NHMRC Structural Review continues to roll on (highlighted on page 3), with a public announcement expected sometime in the next few months. While the research community is no doubt eager to learn about the revised structure, I encourage everyone to exercise patience. Restructuring a national grants program is a major undertaking with implications that extend well into the future; it is critical that NHMRC be allowed to prioritise rigour over rapidity in this endeavour and leave no stone unturned in their evaluation of the revised model.

The Medical Research Future Fund (MRFF) remains a bit of a mystery. Strategies and priorities were released late last year yet there is still no information on how funds will be allocated and whether this will be subject to a competitive application process with independent expert review. There is $61 million earmarked for allocation before the end of this financial year, and it is our understanding that new Health Minister Greg Hunt and his team are currently working feverishly to develop the mechanism for initial MRFF disbursements.

Our 2016 Deloitte Access Economics report on the value of the NHMRC-funded workforce (see article page 4) has provided fresh ammunition for our conversations with Government, showing that every dollar invested in the NHMRC-supported workforce returns $3.20, that this rate of return is maintained if the size of the workforce is increased, and that gradually increasing investment in NHMRC to 3% of total health system expenditure over a 10 year period would yield $58 billion in net returns. In addition to this report, the ASMR conducted a snap survey of the HMR workforce at the end of 2016. Sadly — but not surprisingly — the findings of this survey of over 1200 researchers confirmed the results of our more extensive 2015 workforce survey, revealing that ~25% of researchers were uncertain of employment in 2017 and 44% of researchers were considering leaving the HMR sector. Job security remains a clear problem that needs to be addressed.

Ministerial reshuffle

Since the resignation of Sussan Ley as Health Minister in late January, there has been a ministerial reshuffle ofmasır newsletter

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direct relevance to the HMR sector. Greg Hunt is now the Minister for Health, David Gillespie is the Assistant Minister for Health, Ken Wyatt is the Minister for Aged Care and Indigenous Health and Arthur Sinodinos is the Minister for Industry, Innovation & Science.

This change in the ministry represents an opportunity for ASMR to renew relationships and educate the new ministers on the exceptional quality and value of Australian HMR. We have already enjoyed very constructive meetings with Assistant Minister for Health David Gillespie and the chief HMR Advisor to Greg Hunt. Further meetings with relevant ministers will follow. In these discussions, we articulate our vision for a sustainable and predictable investment model for HMR, the evidence underlying this model and the exceptional health and economic benefits that would result from its implementation. It is worth noting that Greg Hunt has publicly listed HMR as one of the “Four pillars” of health and appears quite supportive of the Australian HMR sector.

Health policy into the future
In early March I attended the Labor Health Policy Summit, which provided an opportunity to again present our evidence-based model for HMR investment (for which we seek bi-partisan support), this time to Shadow Health Minister Catherine King and the ALP. The Summit was attended by around 150 representatives from a broad range of interest groups, each with their own suggestions about what needed to be done to improve healthcare into the future. There was clear support for the need to better integrate the different arms of our convoluted healthcare system; this aspiration aligns with ASMR’s long-term goal of a fully integrated healthcare system, and we hope to play a leading role in realising this vision by bringing together key stakeholders for a forum later this year.

And the 2017 ASMR Medallist is…
“La La Land”… oops, that was a mistake.

As many of you will know, the ASMR Medal is awarded annually to an eminent figure who has made outstanding contributions to health or medical research. The ASMR Medallist then tours the country during ASMR Medical Research Week®, giving talks at Gala Dinners in all state capitals and at the National Press Club in Canberra.

One of the most pressing health issues facing our country right now is health equity. The recent Closing the Gap report highlighted the still-dismal health prospects of Indigenous Australians, while non-Indigenous Australians of low socioeconomic status are also consigned to poorer health outcomes. We need some fresh ideas on how we can address these health inequities and ensure a brighter future for all Australians.

With that segue, I’m delighted to announce that the 2017 ASMR Medallist is Professor Richard Wilkinson, Professor Emeritus of Social Epidemiology at the University of Nottingham and co-founder of The Equality Trust. Professor Wilkinson is a staunch advocate for social equality and has led a distinguished career examining the social determinants of health. He is perhaps best known for his best-selling book The Spirit Level (recently made into documentary film The Divide), which uncovered relationships between inequality and a range of health and social problems and provided some solutions on how these problems might be addressed. I’m sure Professor Wilkinson will captivate Gala Dinner audiences with his ideas, and I encourage all of you to attend your local Gala Dinner to discover how we might transform our societal structures to set Australia on the path towards a healthier, more equitable future.

**ASMR National Scientific Conference**
It is with great excitement that we present a new format to the ASMR National Scientific Conference (NSC) for 2017. We have taken note of the changing conference landscape, with increased competition among scientific meetings and less funds available for researchers to attend conferences. We have also noted a scarcity of high-level professional development opportunities for early- and mid-career researchers. With this in mind, NSC 2017 will integrate presentations, providing a one-stop shop for researchers. Some of the exciting offerings of the NSC 2017 are highlighted on page 9. We understand the financial constraints on researchers in the current environment and will be making every effort to keep registration fees as low as possible. Be sure to mark November 14–15 in your diaries for NSC 2017 and we will keep you informed as the program develops and key dates are set.

Looking forwards
I’d like to take this opportunity to acknowledge my predecessor, ASMR Immediate Past President Dr Sarah Meachem, who has left the ASMR in a very strong position going forward, with many key visionary initiatives underway. Recent changes in the Ministry, coupled with the generation of important workforce data, provide exciting new opportunities for ASMR to influence Government policies around HMR investment, with the ultimate aim of providing a vibrant and sustainable environment in which your research can flourish and provide maximal benefit to the health and wellbeing of our community. Of course, you too can be an advocate for health and medical research. I encourage you to download our updated one-page fact sheet (http://www.asmr.org.au/Fact%20Sheet%202017.pdf) so you are armed with some key facts and figures when educating friends, family and the community on how health and medical research produces exceptional health, economic and social returns.

I am deeply honoured by the opportunity, as President of the ASMR, to serve a passionate and dedicated HMR sector. I look forward to keeping the ASMR membership apprised of our progress throughout the rest of 2017.

Dr Daniel Johnstone
Reviewing the structure of NHMRC’s grant program

In early 2016, NHMRC CEO, Professor Anne Kelso, announced a review of the structure of NHMRC’s grant program. The review was prompted by concerns from the health and medical research sector — concerns about the burden of preparing and reviewing the high numbers of grant applications that will not be funded, concerns that early and mid-career researchers are being discouraged from pursuing a research career, and concerns about conservatism in the way that research proposals are developed and assessed.

Accordingly, the key aims for the review were to consider if the grant program can be restructured in order to improve the value of the public investment in health and medical research by:

- reducing the burden on researchers of application and peer review,
- encouraging greater creativity and innovation,
- and
- providing opportunities for talented researchers at all career stages.

An Expert Advisory Group was established to assist in the review. The expertise of this group was supplemented by advice from a group of early and mid-career researchers. After considering data about NHMRC’s grant program, along with information about research funding systems in other countries, the Expert Advisory Group advised the CEO to consult on three alternative grant program models.

In mid-2016, a consultation paper was released, seeking feedback from the research sector about the alternative models. At the same time, Professor Kelso and members of the Expert Advisory Group held public forums in most capital cities to discuss the review. There was strong engagement from the sector which provided a rich source of information. The diversity and differences in views expressed, including from within segments of the research sector, highlighted the complexity of the issues and the importance of understanding the range of perspectives and experience the health and medical research workforce and research institutions bring. (A summary of the submissions is on NHMRC’s website.)

The Expert Advisory Group carefully considered the sector’s feedback in developing and finalising its advice on an alternative structure for the grant program. The advice of NHMRC Council, Research Committee and other NHMRC Principal Committees on this alternative grant program has recently been provided to the NHMRC CEO. The Office of NHMRC is now working through a number of details before presenting the proposal to Government.

We appreciate that the sector is keen to hear the outcome of the review, with many anxious that we take action to address the challenges facing the sector. The structure of NHMRC’s grant program is important and changes will not be made lightly. We will advise the sector about the final decision on the proposed new grant program and its implementation as soon as possible. Any changes would be supported by comprehensive implementation and transition arrangements.

More information about the review is available here: https://www.nhmrc.gov.au/grants-funding/structural-review-nhmrc-s-grant-program/structural-review-nhmrc-s-grant-program

Professor Anne Kelso CEO, National Health and Medical Research Council

NHMRC announcements

Release of The Human Research Ethics Application (HREA)

In December 2016, the National Health and Medical Research Council released the new Human Research Ethics Application (HREA) to replace the National Ethics Application Form (NEAF).

The HREA is a streamlined and contemporary ethics application that uses dynamic content and guidance so that only questions relevant to proposed research are asked.

The application will assist researchers consider and address the principles of the National Statement on Ethical Conduct in Human Research and provide the information that Human Research Ethics Committees (HREC) require to review the research proposal.

Accepted by more than 60 HRECs, and fully in use by a number of universities, there are already over 1300 users of the HREA.

NHMRC will be removing support for the NEAF around July 2017, and is currently working with IT vendors to licence the HREA content for institutional IT systems. NHMRC will continue to support NEAF while researchers transition to the HREA.

The HREA, help guide and further resources is available at www.HREA.gov.au

Professor Anne Kelso

NHMRC CEO, National Health and Medical Research Council
New Data — A Beacon of Hope for Australia

Do you sometimes get the feeling that governments make their decisions based on a hunch or vibe? It was comforting to read this quote from former health minister, Nicola Roxon, whose legacy was plain cigarette packaging:

“I think it is very rare for ministers or governments to want to make decisions where evidence is incomplete…”

The ASMR, governed by health scientists, understand the importance of data and evidence to substantiate requests for changes to policy — this makes common sense. Mindful evidence-based policy reform is critical to advance Australia, and to minimize unintentional negative consequences to the community. ASMR has commissioned many valuable reports (http://asmr.org.au/Publications.html) over the past 15 years describing the exceptional economic benefits of HMR and in workforce planning that have and will continue to shape the health sector. The biggest form of flattery is when you are speaking to the Prime Minister or Health Minister, and they inform you that ‘$1 invested in health and medical research returns $5’… and you think…’hey they’re our data’… in that moment you know the data and reports are working.

Last year ASMR broke new ground and commissioned another report, which forms part of the mission to create a well-planned workforce and a world class healthcare system that is accessible to everyone, not just those that live in the affluent postcodes. These goals are not mutually exclusive, but closely interlinked, as to improve the health care system, one needs dedicated research scientists; a strong workforce that can combat and prevent disease and alleviate the economic burden of the out of control health expenditure Australia faces. Simply put, clinicians and policy makers need new information and knowledge from the expert researchers to make smart choices for their patients and for the health system to succeed. Australian health experts often look to Northern Europe for positive health system benchmarks and to the USA to learn lessons from their failing health care system. But what it has to be about (that the ASMR has known since its inception in 1961) is PEOPLE. PEOPLE have to be at the heart of the health systems. The health system is a human rights issue, it’s an issue of justice.

So let’s turn to the new data… and its significance. It is a beacon of hope for the sector and provides a positive future pathway for the people and Australia’s economy. I can’t do the 73 page report, bulging with information, justice here in this short article, but as a teaser…

- Over the past 15 years, investment into the NHMRC-funded health and medical research workforce has returned $3.20 for every $1 invested. That equates to a $23.4 billion net return to the economy.
- Three scenarios of future investment into NHMRC (2016-2025) were estimated.
  - Base case (current investment of 0.55% of total health system expenditure maintained), expected to yield total net benefits of $17.3B
  - Static investment in real terms (investment decreased to 0.34% of total health system expenditure) expected to result in benefits of $13.2B.
  - Investment incrementally lifted to 3% of total health system expenditure – expected to yield $58.7B in net benefits

In a little over decade, Treasury projections of Australian government health expenditure will increase from $51B (2009-10; excluding state and territory health expenditure) to $105B (2029-30, Intergenerational Report 2007). The latter scenario indicates that if investment was raised to 3% of health system expenditure, savings of a whopping $58B could be realized — this would no doubt make the Department of Treasury and Finance officials smile. Now ASMR’s job, led by President Dr Daniel Johnstone, is to make the case to the departments. Dan has always had a fire in his belly to make a difference to the healthcare system (see his President report) but it has taken on a whole new meaning since the arrival of his first child (only weeks ago) because, after all, we want a better and more affordable healthcare system for our kids!!!!

Dr Sarah Meacham
Consumers and community members having a say in research

Consumer and community involvement in research is where researchers, consumers and community work in partnership to make decisions about research priorities, policy and practice. Creating opportunities for consumers and community members to have a ‘voice’ at all levels and stages of health research has been the driving force behind the WA Consumer and Community Health Research Network.

Formerly known as the Consumer and Community Involvement Program (Involvement Program), it was first established at the UWA School of Population Health and Telethon Kids Institute in 1998. This was in direct response to community concerns about linked data research being undertaken in WA at that time. This part-time consumer advocate position aligned with the principles outlined in the National Health and Medical Research Council and the Consumers Health Forum of Australia’s joint Statement on Consumer and Community Participation in Health and Medical Research (2002).

Having a long-term strategic plan to manage organisational and cultural change that was inclusive of both staff and community aspirations and values resulted in a strong, sustained Involvement Program that was consistent with recommendations outlined in the NHMRC and CHF Statement. The Involvement Program has received national and international recognition as a good practice model for consumer and community involvement in laboratory, clinical, epidemiological and linked data research.

Significant achievements of the Involvement Program have included:

- The development of training workshops; for researchers on implementing consumer and community involvement and writing in plain language; for consumers and community members on ‘understanding research’ including topics such as, how research is funded, types of research; and being effective on a research teams. 66 workshops have been held across Australia since 2009.

- Developing a range of tested methods for involving consumer and community members in all types of research. There has been substantial success in implementing methods to increase involvement in laboratory based research following changes to funding requirements. Currently we have over 280 consumers and community members serve on decision-making committees.

- Securing three-year funding from Lotterywest in July 2016 to establish the Consumer and Community Health Research Network as an initiative of the WA Health Translation Network. This enables the Involvement Program to be expanded across all 21 Partner Organisations within the WA Health Translation Network. The Consumer and Community Health Research Network’s Strategic Framework includes the Partner Organisations providing:
  - Senior level support and commitment to establishing a consumer and community involvement plan
  - Shared funding of a Consumer Advocate role in their organisation.

The Consumer and Community Health Research Network anticipates the uptake of opportunities for researchers, consumers and community members to work in partnership to continue. A shared common interest in consumer and community involvement has led to a changing landscape with researchers now asking “how do we do this” rather than the “why do we need to?”

While there is still a way to go before consumer and community involvement is standard practice, there is a definite increase in awareness amongst researchers of the positive benefits and contribution consumers and community members can make to health research.

Anne McKenzie AM
Head of the WA Consumer and Community Health Translation Network

Anne McKenzie AM works as the Head of the WA Consumer and Community Health Translation Network and is an experienced consumer representative serving on key state and national health and research committees.

Calendar of Events

Upcoming conferences —

- The Joint Annual Scientific Meetings of the Endocrine Society of Australia and the Society for Reproductive Biology 27–30 August 2017 Perth Convention & Exhibition Centre

- 9th World Congress on Melanoma and 14th International Congress of the Society for Melanoma Research 18–21 October 2017 Brisbane Convention and Exhibition Centre

- 46th Annual Scientific Meeting of Australasian Society for Immunology 27 November – 1 December 2017 Brisbane Convention and Exhibition Centre
The intersection of science and business — taking a sidestep in Medical Research

Astonishingly, it has been 18 years since I enrolled in a Bachelor of Science degree and took my first step towards building a career in medical research. Though admittedly, it shouldn’t be so astonishing given certain things I find myself doing in recent times. Like having to Google some of the acronyms texted to me from my gen Y siblings, going out on “big nights” that conclude by 11pm, and the ultimate — listening to AM radio in the car for the news. I would be lying if I said I always wanted to be a Scientist. Like three quarters of my cohort, I was aiming to get into medicine at some point during my 3 year degree. Thoughts of job security, remuneration and industry structures were far from my freshman mind. Simplistically I thought to myself that if I did well at university, I would not only have a job for the rest of my life but I would be happy doing it.

It was only during my Honours year that I really fell in love with the idea of biological discovery and developed a real drive for a career in this field. Obtaining a national scholarship, I was easily funnelled into the well-trodden path beginning with a PhD, a couple of post-docs, and establishing a small research team. I do not need to preach to the ASMR community about all the caveats and challenges in that supposedly cogent pathway. During my postdoc I very quickly started to see the unsustainable nature of the medical research sector and the deep-rooted issues entrenched within it. Too many of my contemporaries and colleagues were opting out of this career due to unrelenting funding pressures and lack of support. Extrapolating to where the industry would be in the near future, I saw a barren wasteland of much-needed skills and expertise, a rising health burden and stagnant growth in education. The issues were bigger than just more funding, and I decided to start an MBA to build connections outside of academia and create a platform for me to potentially work in policy change.

The highlight of my MBA was connecting with people from such a vast array of backgrounds, and diverse career paths. Keen to take a break from the lab, I was seriously considering gaining some experience in the private sector, before eventually working in the not for profit sector. But the economic downturn, the practicalities of parenthood and a clearer understanding of my own ambition were all contributing factors that led me away from that decision. I was very keen to put my MBA learning to use but also highly conscious of the fact that most of my training and skills were in medical research. The biggest gain from my MBA was learning how to pivot those skills to make them applicable across a broader range of roles. I spent a few months involved in a couple of projects in international public health and social impact before an opening for a program coordinator in personalised medicine opened up. This was an opportunity to utilise my MBA learning while still having a window into research. Additionally, I was drawn to the idea of being involved in something potentially as significant as patient-led care which is the core of personalized medicine and I’m excited to see how the field plays out.

There is an increasing trend towards “multi-disciplinary” skills in the workforce. Employers want you to be able to do a little bit of everything, a full repertoire perfectly balanced with hard and soft skills to tackle the volatile workplace of the twenty-first century. This may sound paradoxical coming from someone working in a cross-disciplinary field such as research management, but I am cautious of this emerging trend. Creating more people with jack-of-all-trades proficiency without supporting the development of more specialised and unique expertise will mean that we will never reach our full societal potential. Breadth of knowledge cannot be at the cost of depth of knowledge, as both are necessary to truly excel.

Though I’m acutely conscious of the fact that you can never treat research, or any scholarly institution for that matter, like a typical business, I can’t help but identify some lessons we can take away from the business sector. Firstly, we are not good at claiming our worth. For too long we have not engaged enough with government, the public and other sectors of society to ensure they understand the purpose and implications of improving the standard of health for the long-term. Science buzzwords such as “frameworks,” “initiatives,” and “roadmaps” so prevalent now amongst government think tanks and international consortia, may seem unsubstantial and unnecessary, but big ideas require a coalescence of resources and mustering of troops to advance complex data-drenched scientific ideas. Secondly, a cultural change needs to take place which pushes back against a longstanding elitist culture driven by less established researchers. Proper processes and guidelines need to be in place to ensure accountability at all levels of research. And thirdly, strong leadership is imperative for success, be it at the national, state or organisational level. Science advocacy for not only academic research groups, but technological industries and areas of government must be convincing and compelling to congregate the requisite action necessary for bona fide scientific progress.

Dr Mitali Manzur
Program Coordinator Personalised Medicine Telethon Kids Institute
We are living in an era of innovation and discovery. Yet many in the health and medical research workforce might feel as if they are walking paths that are leading them into a seemingly fragile future. Perhaps the stark contrast between the passion to pioneer medical discoveries to improve the health of humankind and the challenges that one faces due to the current climate of the health and medical research sector has led one to ask oneself, “What options do I have?” This is indeed a pertinent question. Does an individual continue on the path less travelled and carry on tenaciously with the hope that they will still be around when things eventually get better? Or does one become strategic and understand that they need to adapt, evolve, and develop new knowledge and skills that will allow them cultivate or maintain success (whether it be in the same career or a completely new one) during the challenging times?

Career development can be defined as “the development of skills and knowledge that enables you to plan and make informed decisions about your education, training and career choices.” The ASMR understands the critical role that professional development plays in the careers of our health and medical researchers, and we have always held a strong stance on the importance of career development for Australia’s early- and mid-career researchers. Historically, our State Committees have run numerous career development initiatives throughout each calendar year, and we have also placed an emphasis on career development activities during the ASMR National Scientific Conference to support and foster the development of skills and knowledge of our members.

As we venture into a world of innovation that sees a growing emphasis on multi- and trans-disciplinary research, and a growing significance in industry and philanthropic linkages and engagement in the health and medical research sector, ASMR knows that we must create new opportunities for development and success. We also know that we must be dynamic and fresh. With that in mind, I am proud to say that we will be rolling out new career development events that will complement our current initiatives but that will also offer the exciting edge that we need as we move forward.

ASMR has a long and proud history in the area of professional development. Our commitment to supporting and fostering the development of leadership skills allows us to support the growth of our members and past Directors, many of whom are now opinion leaders who have gone on to become highly influential across the health sector. In an increasingly competitive environment, ASMR asks the important questions. How do we make ourselves stand out from the crowd? How do we go from being good leaders, to great leaders? ASMR will continue our approach to tackling these relevant issues and gaps in the sector that can be filled through professional development training. Our National Mentoring Program, which has been running since 2008, will continue to provide excellent mentors to an increasing number of equally excellent mentees. We will continue to offer unique networking opportunities between health and medical researchers and senior opinion leaders with the goal to provide our researchers with key insights and skills that will allow them to effect positive influence and change in our sector. We will also run events that will focus on the honing of essential cross-disciplinary skills that will help to not only drive the ongoing success of our current research leaders, but that will also foster the transition of our early- and mid-career researchers into becoming our future leaders in the health and medical research sector. Moreover, ASMR will launch a new award to recognise the outstanding contributions of Australia’s health and medical researchers.

We are proud of our career development initiatives, and we are looking forward to continuing to support the career development of all researchers across Australia. As ASMR injects new life and vigour into the way we approach career development, we have every confidence that you will be prepared to invest in your ongoing professional development. Every individual has the power to choose to become involved in career development initiatives. By seizing the opportunities that ASMR will offer, you can put strategies in place to make informed choices about your education, training, and career. Undeniably, this will help you build a foundation of expertise that will drive success.

Dr Shyuan Ngo

Congratulations! Congratulations to Dr Ivan Poon from La Trobe University who was recently a recipient of the Victorian Tall Poppy Award
Next-Generation Healthcare: Merging Biology & Technology
Highlights from NSC 2016

What will healthcare look like in 10 years’ time?

This was the central question posed at the 55th ASMR National Scientific Conference (NSC), and if the quality of research presented at this meeting is anything to go by, the future of healthcare looks very bright indeed!

Over 100 researchers converged on Bond University on the sunny Gold Coast from 13 to 15 November for NSC 2016, which served as a unique transdisciplinary forum for the exchange of cutting-edge ideas and techniques to address the major health-related issues of the future. The need for such a conference was precipitated by rapid recent advances in technology (e.g. high-throughput biomolecule sequencing, nanoscale engineering, stem cell manipulation, tissue engineering, improvements in telecommunications) that have opened up research and translational opportunities that were unimaginable only years ago.

By adopting an applications-based approach rather than a discipline-focussed approach, NSC 2016 brought together researchers from a broad range of fields, including ‘omics and systems biology, personalised and precision medicine, nanotechnology, real-time monitoring, tissue engineering, imaging and robotics.

As with all ASMR NSCs, two true highlights of the conference were the Firkin and Edwards Orations. We extend our deepest thanks to Professor Alim-Louis Benabid, who travelled from Grenoble, France (sans luggage!) to deliver an outstanding Firkin Oration that blended physics, engineering and neuroscience to showcase a tour de force in neuromodulation research. Professor Benabid was deeply engaged in all aspects of the conference, being ever-present in the symposia and generously giving hours of his time to interact with students and post-docs – a true gentleman of medicine.

For the Edwards Oration we were treated to a thought-provoking presentation from Professor Alan Trounson, who drew on examples from his own sterling career to explicate how disruptive, non-linear research can accelerate discovery and push the boundaries of biology and technology.

The broader conference program consisted of 8 invited talks, 25 talks selected from abstracts, 17 rapid-fire talks and 46 poster presentations. A particular hit was the rapid-fire session, a new format in which presenters are given only 2 minutes to provide a snapshot of their research and encourage the audience to visit their poster in the subsequent session. This challenging exercise in conciseness really brought out the best in the presenters’ communications skills and enabled more attendees to present their work in an oral format than has traditionally been possible.

Special congratulations go to Joshua Horne-Debets from QIMR Berghofer who, despite having to overcome some computer issues on the morning of his presentation, was awarded the prestigious Campion-Ma-Playoust award for the best presentation by an ASMR student member. Congratulations also go to Kate Redgrove, who received the new ECR Presentation award.

The ASMR NSC relies on sponsorship to ensure affordable registration fees, and we gratefully acknowledge the generous support of CSL, Hudson Institute of Medical Research, QIMR Berghofer, Shimadzu and Bond University. My deepest thanks also to Annette McClellan and the staff of ASN Events, as well as the incredibly helpful event co-ordinators at Bond University. Finally, I take this opportunity to once again thank Dr Jamie Fletcher and the Program Organising Committee for delivering an exciting program featuring a diverse range of experts leading the push towards “next-generation healthcare”.

I look forward to seeing everyone in Sydney in November for NSC 2017!

Dr Dan Johnstone
56th ASMR National Scientific Conference (NSC) — SAVE THE DATE!!!

Save the date and join the 56th ASMR National Scientific Conference (NSC) to be held in Sydney, at the Charles Perkins Centre, from November 14th to 15th, 2017. Entitled “Science and Survival — equipping you with the tools to further your research career” the 2017 NSC features an engaging and exciting new format encompassing both scientific sessions and professional development workshops.

In these highly competitive times, the 2017 NSC will provide invaluable insights into:
- Achieving scientific excellence and
- Developing sound career strategies using the right tools.

We believe this conference will fulfill an important yet unmet need for the early to mid-career Australian scientific community.

This year’s ASMR NSC will showcase Australia’s scientific research excellence. Distinguished Professor Chennupati Jagadish, an eminent transdisciplinary researcher and nanotechnology pioneer, head of the Semiconductor Optoelectronics and Nanotechnology Group at the Australian National University, will deliver the prestigious Edwards Oration.

Professor Jagadish’s research on innovative nanotechnologies has huge potential in the field of communications, data storage, solar cells and medical applications.

His latest research on neuromorphic cells, “brain on a chip”, is paving the way for a new field in nanotechnology with enormous implications for medical research.

Professor Jagadish was awarded Companion of the Order of Australia (AC) last year.

We anticipate that this two-day meeting will attract an audience of researchers from a wide range of disciplines with an emphasis on transdisciplinary research.

!!! Abstracts from all fields of Health and Medical research are welcome !!!

Join the NSC this year to survive, thrive and be inspired!

Dr Jordane Malaterre

Professor Chennupati Jagadish
ASMR Medical Research Week®

Be inspired by the discoveries of our health and medical researchers

More than 40 events around the country, including:

- ASMR Medallist tour
- Gala dinners in each capital city
- Scientific meetings
- Schools quiz
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- Science in the cinema
- Science in Parliament
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