

the Australian Society for Medical Research



Newsletters, News and Events

Newsletters

[back to home page](#)

ASMR NEWSLETTER JULY 1996

*

President's Report

- **1996 Budget**

At the time of writing, the Budget is one month away. The Government has been under fire from many quarters for staking out a general position which gives priority to reducing the deficit and the public sector component of the national debt. The official line that no specific measure has been ruled in or out has meant that the research community has had to take literally the threat that public spending on research, and science generally, will be cut in August.

Any cuts to public funding of health and medical research would be a disaster, as would any weakening of the incentives for private sector investment in that research. Instead, both need to be much more solidly supported than they are at present. Even in narrow economic terms, cuts to the nation's ability to acquire and apply knowledge about our health problems, or to capture and develop commercially significant intellectual property, will cost Australia many times more than the savings made.

Needless to say, that view has been put publicly and privately to the Government in various ways. In particular, I spoke at a press conference on science funding held at Parliament House by FASTS (see below) on May 31, together with representatives of the Australian Academy of Sciences, ANZAAS, the Australian Science Teachers Association, the National Farmers' Federation, the Collaborative Research Centres Association, and other members of FASTS. All parties delivered strong statements in support of public and private sector science funding which received good radio and TV coverage.

Kieran Scott and I will be meeting the Minister during a round of Canberra visits in the next couple of weeks. The Minister Dr. Wooldridge is a member of the powerful Expenditure Review Committee, which should have provided a better opportunity than usual for defence of health and medical research during the Budget process, but this remains to be seen.

- **FASTS**

The Federation of Australian Scientific and Technological Societies (FASTS) has been increasingly effective in putting science policy issues in front of the Government and the public. In addition to the successful press conference mentioned above, they were instrumental in the strong media defence of higher education funding earlier that week. ASMR is presently reviewing its status as an associate member of FASTS, and options for change will be presented in the next Newsletter and at the AGM. I urge all members in the meantime to have a look at FASTS's recently released, and updated, policy document: A Science Policy for Australia in the 21st Century (surf to <http://bimbo.pharmacol.su.oz.au/fastr/policy96.html>, via ASMR's very own home page at <http://www.medstv.unimelb.edu.au/asmr>), and pass your views on to the Board.

- **ASMR Directors**

It is again time for nomination of candidates for election to the Board of Directors. Please consider whether you could participate in the work of ASMR at the national level as a director in 1997.

In the last Newsletter, Kieran Scott opened a debate on two issues: the potential for increasing directors' terms beyond one year, and the long-standing prohibition on members over 40 being elected as directors. We have received comments from several members, and these are reproduced on ASMR's home page. At this stage it is possible that separate motions to (i) increase directors' terms to two years, and (ii) extend the age limit on election to the Board (say to 45) will be put to the 1996 AGM in November, after a mailout setting out the cases for and against. The Board will take a final decision on whether to proceed with these, or similar motions at its meeting in September. Before then, please continue to contribute your views and suggestions to myself, Kieran or any member of the Board.

- **Gun Control**

All would be well aware that the initial strong displays of public support for gun control have been overshadowed, at least in the media, by pressure from opponents of those measures. This is at the crucial time of implementation of those laws by the States. Both Coalition parties are experiencing strong internal tensions as a result.

There is sound epidemiological evidence that gun ownership per se is a risk factor for gunshot-related injury and death (eg., see <http://www.guninfo.org/annotated.html>). That kind of evidence is what underpins efforts to reduce the level of gun ownership in the community, as it does for campaigns against smoking, or for seat-belt use, or safe sex. Health and medical researchers have an interest in seeing that public policy is evidence-based, quite independently of our individual political and moral stance, so I have written to the Government in support of their gun control proposals on behalf of ASMR (see ASMR home page correspondence). NHMRC, the Committee of Presidents of Medical Colleges and the AMA have also strongly supported gun control, and I urge individual members interested in the issue to express their views to their local State governments (see <http://www.medfac.su.oz.au/medfac/GunControl2/index.htm> for further info).

- **NSC 1996**

On a lighter note - look for the posters advertising the 1996 National Scientific Conference at the Gold Coast in November. Once again a great program is in store, with international speakers, diverse symposia and even a "great debate" comparing the merits of perspiration and inspiration in successful research. Great science and good fun awaits - let's see you there!

Graham Mann

NH&MRC Fellowship Scheme.

The Career Fellowship Scheme has been long recognized as one of the great strengths of the NH&MRC. Not only does it support medical research of the highest quality in Australia but it also provides a continuous, long-term career structure for capable young researchers.

The Career Awards Committee is a subcommittee of MRC and advises on policy matters relating to the award of Fellowships, R.D. Wright Awards, Burnet Fellowships, Eccles Awards and the Sir Colin and Lady Mackenzie Trust Award. A key function of the Committee is to make recommendations to MRC each year on applicants suitable for initial appointment to the Fellowship Scheme as well as applicants seeking promotion and reappointment within the Scheme. The Career Awards Committee is chaired by Professor Geoff Tregear and includes Professor Uwe Proske (Deputy Chair), Professor Daine Alcorn, Professor Peter Brooks, Dr. Ron Dickinson, Professor Annette Dobson, Associate Professor John Finlay-Jones, Professor Ieva Kotlarski and Dr. David Roder.

Requirements for Appointment to Research Fellow (RF) :

Initial appointment as Research Fellow is dependent on success in obtaining funding of a salary on a Project Grant or on performance within a Program or in an Institute.

Initial appointment to the Research Fellowship Scheme may be made at any level, i.e., Research Fellow (RF), Senior Research Fellow (SRF), Principal Research Fellow (PRF) or Senior Principal Research Fellow (SPRF).

Promotion within the Research Fellowship Scheme is normally considered at the time of review of a Project Grant and is made on merit rather than years of experience. In general, most Research Fellows would eventually be expected to be promoted to Senior Research Fellow. Promotion of Senior Research Fellows to Principal Research Fellowship is not automatic, in line with their academic counterparts, and Principal Research Fellows would be expected to have outstanding research records. Fellows are expected to exhibit a degree of distinction whereby their research performance is superior to that of their academic counterparts. Research Fellows, at all levels, who are not recommended for promotion, will not normally be considered again for promotion within three years of the submission of their unsuccessful application, unless otherwise specified by the Committee.

The Career Awards Committee considers all applications for appointment and promotion, and decides whether there is a case to proceed. Appropriate assessors with knowledge of the relevant research field are asked to comment on and rank the applicant's performance. The committee normally interviews Fellowship

applicants where a *prima facie* case exists at which time any concerns raised by the assessors will be explored.

Each application for appointment or promotion is considered on its own merits, however, there are certain requirements that serve as a useful guideline for applicants. The major criteria obviously shift with seniority. For initial Fellowship appointment at the RF level the potential for future research is a major consideration whereas for appointment at the more senior levels track record of proven success as a researcher is more important. The balance between the need to demonstrate independence and the importance of collaboration is also carefully considered by the committee. It is not possible to set a required number of publications as this will vary between research fields and on the quality and impact of individual papers. Applications are always assessed with due reference to equal opportunity guidelines.

The overriding criterion for appointment to Research Fellow (RF) is the quality of the research performed by an applicant in a particular branch of biomedical science. Evidence for such an advanced level of scholarship would be the quality of a body of published work in peer-reviewed journals of high international standing. The contributions should be significant, original and should advance the state of knowledge in the applicant's field of expertise. An important corollary is that the candidate must have evidence of independent investigator status and/or have demonstrated the capacity for independent contributions, perhaps as part of a team, to a research program. All applicants are considered on individual merit.

Other important criteria include:

- formal academic qualifications and research experience subsequent to postgraduate training
- collaborative interactions
- participation in learned societies
- postgraduate teaching
- recognition at the national level
- professional contributions
- success in obtaining peer reviewed research grants

Appointment or Promotion to Senior Research Fellow (SRF)

Under normal circumstances, candidates should have reached the top level of RF. Promotion is dependent on demonstrated ability and achievement, with a considerable body of published works demonstrating originality, independence and commitment to biomedical research. In addition to recognition nationally in a particular field the applicant's achievements should be supported by a growing international reputation/profile.

Initial appointment at the level of SRF is possible for candidates who have achieved a level of research and scholarship exceeding that required for appointment as RF and who fulfil the criteria indicated above.

Appointment or Promotion to Principal Research Fellow (PRF)

Under normal circumstances, candidates should have reached the top level of SRF. Candidates for promotion will have made very significant contributions in their field of expertise, demonstrated outstanding scholarship and original achievement,

and shown a long term commitment to biomedical research. Scholarship and original achievement will normally be demonstrated by a substantial body of scholarly publications and by international recognition. Principal Research Fellows should have outstanding leadership qualities and a considerable record in postgraduate training.

Initial appointment at the level of PRF is possible for candidates who have achieved a level of research and scholarship exceeding that required for appointment as SRF and who fulfil the criteria indicated above.

Promotion to Senior Principal Research Fellow (SPRF)

The standards of scholarship and original achievement are at least those required for appointment to a personal Chair at a University. Candidates for promotion would under normal circumstances have reached the top level of PRF. The candidate's case for appointment or promotion is considered by independent expert national and international assessors, and taking into consideration these written assessments and the individual merits of the candidate, the Career Awards Committee decides whether a case exists to establish an interviewing committee. The composition of such a committee is similar to a chair selection committee and includes members of CAC, Deans of Medicine from Australian Universities and appropriate qualified senior members of the biomedical research community.

Reappointments:

Reappointment within the Fellowship Scheme for Fellows whose grants continue to be funded is not automatic. The Career Awards Committee can recommend to MRC that a Fellow whose performance is not commensurate with the criteria for the level at which reappointment or promotion is sought is transferred to a probationary appointment or be given notice of termination. The probationary period is normally 3 years with the duration of the associated Project Grant to be the same.

How Many Fellows?

The issue of the total number of Fellows in the system is a matter of some debate. The National Association of Research Fellows (NARF) is of the firm belief that the number of Fellows is too few and that there should be a steady and regulated increase. The contrary view is that there should be a limit to the growth of the Fellowship Scheme in the face of other competing pressures for the limited resources available. Over the last several years, most areas funded by the NH&MRC have remained constant. There have been no growth in programs, there are very few extended 5 year grants and the number of project grants funded has remained constant. The current policy is that the number of appointees to the Fellowship Scheme in any one year is determined by the MRC as part of the evaluation of all competing demands on the available funds. The Career Awards Committee prepares a ranked list of all applicants deemed appointable to a Fellowship on the basis of its evaluation. This list includes applicants on Project and Program Grants, Centres and Units. In each year the MRC determines the number of initial Fellows to be appointed thereby setting the cut-off on the ranked list prepared by the Career Awards Committee.

In 1995, the MRC approved the appointment of 11 new Fellows (17% of those who applied) and 13 promotions (34% success rate) bringing the total number of Fellows

in July 1996 to 179. Of these, 42 are in the Block Funded Institutes (Baker, Florey and WEHI). The majority of the Fellows are in Victoria (102), followed by NSW (29), South Australia (16), Queensland (13), Western Australia (12), the ACT (6) and the Northern Territory (1).

The breakdown of Fellows at the various levels is SPRF (28), PRF (47), SRF (75) and RF (29).

There are currently 30 active R.D. Wright awardees, 7 of whom were appointed in 1995. Since the R.D. Wright Scheme commenced in 1991 there have been a total of 89 R.D. Wrights approved. Of these, 16 are now Fellows (41% success rate) and 27 have relinquished the award to take up academic appointments. It is worth remembering that it was never intended that the R.D. Wright award ensured progression to the Fellowship Scheme. Rather, the awards are to enable outstanding young researchers in the early phase of their careers to establish their independence in research, providing opportunities not only in the Fellowship Scheme but also to take up appointments in academia, in hospitals and other research institutions or in industry.

This year, because of substantial cuts in the operational budget of the NH&MRC Secretariat, there have been wide-ranging measures to improve efficiency. This has had a considerable effect on the operation of all MRC committees. Career Awards Committee has had to drastically reduce its interview program. This year, for the first time, not all applicants for appointment or promotion will be interviewed. However, it is important to note that non-interview should not be seen as indicative of the success or otherwise of the application. Research Fellows scheduled for reappointment will not be interviewed unless a specific problem has been identified. In any case, whenever such problems arise they will be attempted to be resolved, in the first instance, by individual members of CAC resident in that State or a nearby State.

Career Awards Committee has implemented these changes of procedure very mindful of the need to preserve the essential academic assessment process for appointment and promotion.

Geoff Tregear
Chairman, Career Awards Committee

PROTECTING INTELLECTUAL PROPERTY - PATENTS

Biomedical research represents a substantial public investment in Australia. It is in the national interest that as many of the benefits of that investment as possible return to Australians - protection of intellectual property is a vital element in ensuring those returns. Here is a broad overview of the role of patents in protecting inventions, and the mechanisms for obtaining patent protection.

Introduction

The granting of a patent is essentially the sealing of a "contract" between the country which grants the patent and the patentee. In return for a patent, the patentee discloses an invention over which he or she has absolute monopoly for a limited term. After this term expires, the invention is free to be used by the public.

Thus, during the term of a patent, a patentee can derive income by licensing, assigning or entering into commercial ventures with third parties. One result of the ability to obtain financial reward in this manner is encouragement of innovation, and in some instances, investment of foreign dollars.

The filing of a patent application, when the invention is at a developmental stage (but which is expected to proceed through to fruition), can be a means to obtain further funding. For example, the filing of an initial, provisional application can act as an incentive for commercial corporations to financially sponsor the development of the project. This in turn enables the inventor to complete his or her innovative work.

What Is Patentable?

Even though rules regarding patentability are slowly becoming more uniform world-wide, partly due to international agreements such as GATT and TRIPS, there remains a lot of variation, principally amongst countries that are smaller and less industrialised than, for example, Australia, Canada, Japan and USA.

In general, ideas, scientific theories, principles or laws of nature are not patentable subject matter throughout the world. However, the issue becomes more complex where the medical, pharmaceutical and molecular biology disciplines are concerned. There is no simple or black and white "yes" or "no" answer. The eligibility for patentability depends upon the nature of the subject for which monopoly is sought and on the national, patent law in each country.

For example, in Australia and USA, claims to pharmaceuticals, treatment of diseases and genetic engineering are generally allowable subject matter, subject to compliance with the requirements of novelty, inventive step, utility and sufficiency in each of these countries. By contrast, in developing countries such as India and the Latin- or South- American countries, it is not possible to patent these subject matter.

Genetically engineered plants, animals, cells and new cell lines or hybridomas, as well as antibodies and nucleic acid sequences are patentable subject matter in most developed countries. However, Europe is unusual in that only plants and animals which have been produced by *microbiological* process are allowable subject matter.

In the case of microorganisms, the specific requirements are also unique to each country although intervention by man to obtain the microbes in question is usually a pre-requisite. For example, a new strain of soil bacteria which has been identified in a specific geographical area cannot be patented unless it has been isolated, purified and characterised in the laboratory and shown to be stable and homogeneous with respect to the characteristics of the organism. Often, it may be difficult to fully and accurately describe a new microorganism in words. In such a case, a facility for depositing a sample of the microorganism in an internationally certified depository is provided to allow applicants an alternative means of "describing" the invention. A list of depository institutions recognised under the provisions of the "Budapest Treaty on the International Recognition of the Deposit of Microorganisms for the Purposes of Patent Procedure" is available, and once deposited, the sample eventually becomes available to the public, subject to conditions, for purposes of experimentation only.

As can be seen from the discussion above, the laws regarding what is or is not

subject matter eligible for patenting varies very much with each country. Although international trade agreements such as GATT and TRIPS are giving rise to some degree of consistency in some areas, there is no one answer that would apply universally.

How new does the "invention" need to be?

Inventions are also assessed for patentability against information in the public domain in order to determine whether the invention is novel and inventive. The exact category of information that can be used for this assessment will depend on the laws of the country concerned. In Europe, for example, the invention will be assessed against information in the public domain, whether it became public through an oral presentation, a written publication or by public use of the invention.

Generally speaking, when a patent application is filed, everything in the public domain before that date is potentially relevant to the assessment of the invention. The date of filing the patent application provides the invention defined in the application with a priority date, subject to the invention being properly described and defined. This means that it is important to secure an early priority date for the invention. It is also important to realise that publication (even by the inventor) of the invention or of work related to the invention before the priority date may be detrimental to the assessment of the invention.

Novelty

Novelty can be thought of in terms of whether the invention is new compared to what is in the public domain. Generally, if the invention is new compared to, or is somehow different from, what is already in the public domain, then it is novel.

In a hypothetical example, inventor A files a patent application describing an invention related to a protein isolated from mice and which is useful in the treatment of cancer. The full amino acid sequence of the protein is described, as well as the method of its isolation. Unbeknownst to A, three months before his application was filed, A's colleagues published a paper describing the isolation of a protein with the same activity from rabbits. The protein was isolated by the same method as used by A but has a slightly different amino acid sequence. There is a stretch of three amino acids in a non-biologically active portion of the rabbit protein which is different to A's protein.

On a strict test, A's invention is novel because the exact protein was not described by his colleagues. However, there would be a question whether A's protein constitutes an unimportant variation compared to what was already described in the literature. Clearly, the novelty rules in different countries will treat this fact situation differently. Generally speaking, if A's protein is considered to be a mere unimportant variation compared to that already described, then his protein would not have the requisite novelty. This means that A could not get a patent for the protein.

Inventive Step (or obviousness)

Inventiveness is also assessed against the information in the public domain. In general terms, inventiveness means that the invention would not easily be thought of by someone in the relevant field at the priority date. In other words it would not

have been obvious. In the above example, A's protein is arguably not inventive because, given the teachings of the paper published by A's colleagues, it would have been routine to isolate the protein from mice. However, it should be noted that the tests for obviousness in different countries can be quite different.

In Europe the test appears to be whether the steps leading up to production of the invention were inventive. For example, if the invention is defined in terms of a DNA molecule encoding a protein, the question is whether the steps leading up to production of that DNA molecule were inventive. In contrast, in the USA they will ask whether the DNA sequence itself is obvious. In the USA, the existence of a general method of isolating DNA molecules is essentially considered irrelevant to the question of whether a specific molecule itself would have been obvious. Thus, in some respects the test for obviousness in the USA is narrower than that applied in Europe.

The Australian Patent Office has been careful to avoid explicitly following either the European or US analysis of obviousness. However, in recent decisions, the Australian Patent Office seems to be following the European approach.

How Is Patent Protection Obtained?

A Provisional Application

A provisional application for a patent is a means to establish a date known as a priority date. This date is used in assessing novelty and inventiveness of an invention, described in an accompanying document or specification, against that which is already known from information in the public domain in the same or a related, technological area (the prior art).

In Australia and other countries where a provisional application may be lodged, the specification must describe the invention such that it foreshadows the monopoly that will eventually be claimed in a complete patent application. In Australia, this has been made clear in a series of recent decisions handed down by the Federal Court. A trend has emerged that requires the invention described in a provisional to reflect very closely what is claimed later.

Thus, in order to make full use of a provisional application to secure priority, it is necessary to ensure that the invention is described fully and in a manner which can support a subsequent, complete application further down the time line. This often requires some strategic planning and insight into how the invention may develop, as well as careful drafting of a provisional specification.

A provisional may also be used as an incentive for interested parties to provide funding to further develop or commercialise the invention. This is because a complete patent application may be filed up to 12 months later but which retains the priority date obtained by filing of the provisional. However, disclosure to third parties needs to be approached with care. Filing of a provisional that does not properly describe the invention and subsequent disclosure without confidential agreements may jeopardise the novelty of a claim in a complete application. Furthermore, in some instances, the twelve month period following the filing of a provisional may not be sufficient time for development of the invention. In such a case, it is possible to "roll over" the first provisional by refileing the application twelve months and one day later, thus obtaining a new priority date for the invention. However, this is only advisable if there have been no disclosure of the

invention within the twelve month period because a new, later priority date is accorded. If there has been disclosure in the 12 month period of the first provisional, this will pre-date the priority date of the "roll over" provisional application.

A Complete Application

In a complete patent application, there must be a specification. This is a document which has two main parts. The first part or body of the specification normally includes background information, a summary of the invention and a detailed description of the invention, followed by a description of experiments which are incorporated as examples. The second part comprises at least one claim which sets out in words the monopoly sought. A claim is a single sentence which defines the invention and the scope of the monopoly.

If there is a provisional which adequately describes, or provides sufficient basis for the invention claimed as discussed in the previous section, then the claims can derive priority from the provisional. When the claims are examined for novelty and inventive step by the respective national patent office in which an application has been filed, it is the priority date which is used to determine the validity of the invention. If these requirements are satisfied and if no other issues are raised or remain to be addressed by the applicant, then a patent is normally granted. The term of the patent varies with each country but is generally 20 years from the date of filing the complete specification.

In a complete specification, a best method or mode of performing the invention known by the applicant at the time of filing must be given, in addition to a full description. In a hypothetical example, an invention pertains to a new and potent insulin having a specific activity higher than insulin which is commercially available anywhere. The insulin can be made by chemical synthesis or by recombinant technology. The experimental data show that this potency is more consistent when the insulin is produced by the recombinant method.

Failure to disclose the recombinant method (i.e., the best method) at the time of filing the application can be fatal to the validity of an application. Similarly, a patent which does not disclose the best method can be revoked on the grounds of invalidity.

Routes for Obtaining Patent Protection

There are a number of alternative ways in which a complete application can be filed if patent protection in several countries throughout the world is required. These include filing of an application under the Paris Convention, The Patent Cooperation Treaty (PCT) and the European Patent Convention (EPC), the three main modes for filing applications. Several countries throughout the world are signatories or members of each of these.

Under the Paris Convention, a resident or citizen of a member country who has made an earlier application in that country (the "home" country) can, 12 months later, file a complete application in a country which is also member of the Convention, and claim priority from the earlier application. Thus, an Australian applicant can file a provisional and should it prove worthwhile 12 months later, file an application in USA without losing priority in that country. A complete application filed under the PCT and EPC can similarly claim priority from an

earlier application filed in a country which is signatory to the Paris Convention, the PCT or the EPC.

The advantages and disadvantages of filing an application under each of these routes are beyond the scope of the present article. In general, an application made via the PCT or EPC enables one single application at a central, receiving office to be filed. This may save time and some costs as translations of the specification are not required at this stage, fees can be paid using one currency and only one agent need be engaged.

Furthermore, under the PCT, an applicant receives preliminary advice on the novelty and inventiveness of his or her invention by virtue of the International Search Report and on request, the International Preliminary Examination Report. These are issued by an appropriate patent office acting in its capacity as an international search or examination authority under the PCT. If the reports are adverse, amendments can be made or the application abandoned.

Eventually, applications initially filed via the PCT or EPC become a bundle of national applications. In this way, the applicant is spared the need to separately file an application in each country where patent protection is sought, until a later stage. Thus, although it can be time saving, the PCT and EPC does not automatically result in the grant of a "world-wide" or international patent. Each has rules which govern prosecution of an application.

Inventors And What Determines Ownership

Correctly identifying an inventor is an important step in obtaining patent protection, because it affects ownership of a patent. This may also have other implications for example, in the USA incorrect identification of someone as an inventor may be considered as fraud on the Patent Office.

Authorship and inventorship are commonly confused. Authorship may be achieved by someone who contributed money or materials to a research project whereas inventorship is an entirely different consideration. Not everyone who has worked on an invention is an inventor. This is because inventorship is a legal status determined by the facts of the individual situation. An inventor is someone who has inventively contributed to the production of an invention.

Most inventions can be viewed in terms of a problem and solution. The invention may reside in identification of the problem, or providing a solution, or in a combination of both steps.

The problem is the concern to be addressed, such as how to treat cancer. The solution, such as a method of treatment involving administering a drug, is the invention. In this case, only someone who has contributed to the identification or generation of a solution to the problem in question is an inventor. The person who has just provided "skilled hands" without any input into this solution is not an inventor. An example of such a person is a laboratory technician who conducts routine tests on samples obtained from subjects undergoing trials.

If a person is an inventor, then that person or their employer is entitled to rights in the patent. This is in the absence of any agreements to the contrary, such as contractual agreements with third parties. Clearly, if a person is incorrectly identified as an inventor on a patent application and that person happens to work

for another institution, a very undesirable situation could result. For example, the other institution could claim to have a stake in your patent.

Determining who is an inventor is an important consideration which needs attention when a patent application is being prepared. Correct identification of inventors will assist in preventing problems concerning ownership.

Conclusion

This article provides a broad overview of the role of patents in protecting inventions, and the mechanisms for obtaining patent protection. While this article provides a general overview, it is not intended to be a substitute for proper advice from a patent attorney in a given situation. Individual situations should be reviewed by your patent attorney so that appropriate advice can be provided.

Julie M Wilkie and Susan S H Wong of
Griffith Hack & Co
Patent and Trade Mark Attorneys
509 St Kilda Road Melbourne

National Scientific Conference 1996

Venue: ANA Hotel Gold Coast.

Room Charges: \$125 per room

\$150 share triple

Travel: Regular Flights to Brisbane / Gold Coast with bus transfers to Hotel

Firkin Oration: Professor Ralph Bradshaw

AWT Edwards: Professor John Mattick,

Symposia: Apoptosis, Signal Transduction and the Cell Cycle Mapping Human Genome Disorders, Photobiology and Skin Cancer, The Brain and Psychiatric Disorders, Cytokines, Fibrogenesis and Liver Injury, Advances in Vaccine Technology

Organisation for the 35th National Scientific Conference on the Gold Coast in Queensland on 24-27 November is progressing at a feverish pace. The scientific programme has now been finalised and includes a splendid array of national and international plenary speakers, symposia, The Great Debate as well as free communication and poster sessions. The venue for the conference is the splendid ANA Hotel which in addition to its excellent conference facilities and comfortable accommodation is located in the beautiful coastal resort of Surfers Paradise. The ANA Hotel has offered the organisers very competitive rates for accommodation during the conference and as all the social functions will be held in the hotel it clearly makes sense to take advantage of this offer and reserve your accommodation sooner rather than later. The local organising committee looks forward to seeing you all on the Gold Coast in November.

Some of the plenary speakers and international contributors to symposia are:

Professor John Mattick - AWT Edwards Orator

Director, Centre for Molecular and Cellular Biology
The University of Queensland
AUSTRALIA

John Mattick was appointed Professor of Molecular Biology and Foundation Director of the Centre for Molecular Biology and Biotechnology at the University of Queensland in 1988. The Centre was subsequently awarded the status of a Special Research Centre of the Australian Research Council, and is primarily concerned with the molecular genetics of mammals and their diseases, including genome mapping, gene regulation, and developmental and cell biology. In 1994 it was renamed the Centre for Molecular and Cellular Biology. It presently has ten core research groups with over 120 staff and research students involved in 3 major programs: Genomics, Differentiation & Development, and Cell Biology.

Professor Mattick was responsible for the development of one of the first genetically engineered vaccines, and was the 1989 recipient of the Pharmacia-LKB Biotechnology Medal from the Australian Biochemical Society. His work on the architecture and function of the fatty acid synthetase complex is now the standard treatment in biochemistry textbooks. He is an advocate of research into the information content of genes, including the Human Genome Project. His research interests include genes expressed during host colonisation by bacterial pathogens, genes expressed during mammalian embryogenesis, and the role of complex gene structure, especially introns and RNA processing, in the development of multicellular organisms. He has recently proposed a radical new theory on the structure of genetic systems, which may explain the origin of multicellular life.

Professor Ralph Bradshaw - Firkin Orator

Department of Biological Chemistry
University of California, Irvine
USA

Ralph Bradshaw was born and raised in Boston, Massachusetts, and received his bachelor and doctoral degrees from Colby College in Waterville, Maine, and Duke University in Durham, North Carolina, respectively. Following postdoctoral training at Indiana University and the University of Washington, he joined the faculty at Washington University School of Medicine, in St. Louis, as an assistant professor and remained at that institution, rising to the rank of full professor, for thirteen years. In 1982, he moved to the University of California, Irvine, as Professor and Chair. He served in the latter capacity for 11 years, retiring as Chair in 1993. He has served in a number of advisory capacities, including over a dozen editorial boards, and is presently an Associate Editor of the Journal of Biological Chemistry and Growth Factors. He is a member of many societies and is presently President of the Federation of American Societies for Experimental Biology and Treasurer of the American Society for Biochemistry and Molecular Biology. He is also Chairman of the U.S. National Committee for the International Union of Biochemistry and Molecular Biology (IUBMB), a member (and past Chairman) of the Executive Committee of the Keystone Symposia in Molecular and Cellular Biology, and a member of the Executive Committee of the IUBMB. In addition, he was a founder and the first President (pro tem) of the Protein Society. He has authored nearly 300 scientific articles, mostly dealing with the structure and function of various proteins with a strong focus on polypeptide growth factors and their receptors.

Professor Douglas Green - Programmed Cell death: Role of Proteases

La Jolla Institute for Allergy and Immunology
San Diego
USA

Douglas Green is from the Division of Cellular Immunology, La Jolla Institute for Allergy and Immunology, California. He is well renowned for his work on apoptosis, particularly in the immune system. His major contributions have been on the role of the *myc* oncogene in activation-induced apoptosis in T cells, the regulation of Fas-mediated apoptosis and the role of proteases in the execution of the apoptotic programme. Professor Green's lecture will present a broad overview of the current knowledge on apoptosis and its' role in cancer.

Professor Peter Herrlich - Photobiology of Skin Cancer

University of Karlsruhe
GERMANY

Peter Herrlich is the Professor of Genetics at the University of Karlsruhe and is also the Director of the Institute of Genetics and Toxicology at Forschungszentrum Karlsruhe, Germany. He is published extensively in the areas of gene expression, signal transduction pathways and the effect of UV exposure on these processes. He postulated the mammalian genetic stress response (MGSR) which is observed in cells exposed to genotoxic agents. In MGSR there is a transcriptional activation of genes with subsequent increased translation and formation of proteins in the cell. The upregulation of cell surface proteins after UV exposure may be part of the MGSR response. His laboratory is currently investigating the effect of UV on the intracellular signalling pathways activated by the binding of growth factors to their receptors on the cell membrane.

Professor Elspeth McLachlan

Prince of Wales Medical Research Institute
Sydney
AUSTRALIA

Elsbeth McLachlan is a neuroscientist working in the autonomic nervous system. She is currently a Senior Principal Research Fellow of the National Health & Medical Research Council at the Prince of Wales Medical Research Institute in Sydney. She studied Physiology at the University of Sydney and obtained a doctorate in Neurobiology in 1973. She was awarded a D.Sc. from the same university in 1994. She has previously held teaching positions at Sydney, Monash and Queensland Universities and research positions at the Baker Medical Research Institute and the University of New South Wales. She was Professor and Head of the Department of Physiology & Pharmacology at the University of Queensland from 1988- 1993. Her current research spans the cellular and synaptic properties of autonomic pathways with a more recent interest in the interactions between the autonomic and sensory systems, particularly after nerve injury. With Wilfrid Jänig of Kiel in Germany, she received a Max Planck Research Award from the Humboldt Foundation in 1993 and is currently President of the Australian Neuroscience Society.

Professor Jurg Ott - Human Genome Disorders

Department of Genetics and Development
Columbia University,
New York
USA

Jurg Ott received a PhD in Zoology from the University of Zurich in 1967 and an MS in Biomathematics from the University of Washington in 1972. He is a Professor in the Department of Genetics and Development and the Department of Psychiatry at Columbia University, and a research scientist at the New York State Psychiatric Institute. He serves on various editorial boards, is editor-in-chief of Human Heredity, and is a member of HUGO. He wrote the first generally available computer program on linkage analysis (LIPED) as well as the "bible" Human Genetic Linkage.

Professor Axel Gressner - Cytokines, Fibrogenesis and Liver Injury

Department of Clinical Chemistry
Philipps University, Marburg
GERMANY

Prof. Axel Gressner from the Department of Clinical Chemistry and Central Laboratory, Philipps University, Marburg, Germany, is the most published investigator in the field of fibrosis, extracellular matrix and hepatic stellate cell biology in recent years. Hepatic stellate cells, formerly known as either lipocytes, Ito cells or fat-storing cells, are responsible for fibrogenesis and also partially for fibrinolysis in numerous different forms of liver disease leading to fibrosis and cirrhosis. Prof Gressner's work has identified a number of cytokines, growth factors and pathways involved in the transformation of quiescent hepatic stellate cells to a proliferative, highly profibrogenic "myofibroblast-like" cell. Prof. Gressner has also recently established a role for hepatic stellate cells in the apoptotic process of hepatocyte cell death. These studies have provided invaluable information about the complex inter-relationship that exists between the cells of their perisinusoidal regions of the liver, i.e., the hepatocyte, Kupffer cell and hepatic stellate cell.

Further Information

Contact Dr Paul Bates, Faculty of Science and Technology, Griffith University, NATHAN, 4111, Ph. 07 3875 5358, Fax 07 3875 7656, Email P.Bates@sct.gu.edu.au

Research Careers Subcommittee Report

We are preparing a discussion paper on the challenges faced by hospital scientists doing medical research in Australia. This important subset of Australian medical researchers are in a relatively unique situation as their infrastructure and funding are provided by numerous state and federal bodies, as well as private enterprise. We are seeking input from all the professional bodies associated with hospital scientists. These include the Australian Association of Clinical Biochemists and the Australian Institute of Medical Scientists. ASMR members that would like to contribute to the discussion paper should contact Dr. Peter O'Loughlin or Dr. Judy Halliday. Contact can be made via the ASMR Home page.

We are continuing to compile data from the "brain drain" questionnaire that was initially distributed last year. To date we have received 33 replies from expatriate Australians in the USA, 14 from those in the UK, 8 from Canada and 5 from other countries. The questionnaire will soon be on the ASMR home page, so please encourage any Australian Biomedical researchers that you know in overseas labs to fill in a copy and send it to us. We need replies from as many people as possible so that we can collate some meaningful data about the factors influencing Australian Biomedical researchers to go/stay overseas. In the replies received so far there are

some interesting trends showing up. For example, researchers going to the USA tend to be better paid than their counterparts in Australia and have better career path options, whilst those in the UK seem to be paid the same as or less than their Australian counterparts. We need more replies to actually quantitate the anecdotal similarities and differences. These data will be useful in providing evidence to support examination of the career path options available to biomedical researchers in this country.

Peter O'Loughlin and Judy Halliday

FINANCE REPORT

At the close of the 1995/6 financial year the ASMR is in reasonably good shape financially. The income for this year exceeds expenditure, and the society has been able to invest some excess funds in a high interest, medium term account. It is the objective of the society to have the equivalent of three years' running expenses invested as a capital reserve: at present we have one year's expenses in this account, and in order to build up the required capital we have planned to raise our income to at least 20% above expenditure for the next several years.

The response to the call for renewals of ASMR subscriptions has been very good, and the number of new members is also increased. Currently there are over 1,100 financial members of the Society, a record high!

Julie Mercer

MEMBERSHIP

The society continues to attract new members, there have been 61 new members since the last newsletter report. Of our existing members a significant number have responded to the subscription notice, and we are hopeful the rest will respond soon to avoid the need to send a reminder notice.

The Email addresses supplied with membership subscriptions have been extremely useful, so it was encouraging to see 516 subscription with Email addresses. In addition we were given 571 electoral addresses.

Steve Wesselingh

WELCOME TO NEW MEMBERS OF ASMR

NSW

Mr David Adams
A/Professor Nihal Agar
Professor Peter Barry
Mr Matthew Bidgood
Mr Ian Blair
Ms Tracy Bryan
Dr Katherine Bryant
Ms Jane Butler
Dr Jennifer Byrne
Ms Rachel Cameron-Smith
Dr Juleen Cavanaugh

Ms Teresa Collins
Mr Tim Cushway
Mrs Nicola Elliott
Dr Kaneez Fatima-Shad
Dr Lloyd Graham
Dr Nicholas Hawkins
Ms Sheridan Henness
Dr John Holland
Miss Kylie Hotchkiss
Dr Sybille Hunt
Mrs Eleanor Kablev
Dr Marina Kennerson
Dr Gary Leong
Dr G Lyons
Ms Lisa Matthias
Mr George McKelvey
Miss Julie McMullen
Ms Ann Mitrovic
Ms Yvette Morcos
Ms Retno Murwaniv
Dr Najah Nassif
Ms Renee Poropat
Miss Debra Ranger
Mr Paul Stathakis
Ms Maria Sukkar
Miss Kate Sunn
Dr Patrick Tam
Miss Kellie Tinworth
Ms Caitlin Van Holst Pellekaan
Dr Robyn Ward
Dr Ze Yan Yu
Dr David Y Zhang

QLD

Dr Georgia Chenevix-Trench
Mr John Hooper
Dr Michael Jennings
Ms V Gopinathan Nair

SA

Mr Gray Robertson
Mr Jacob Ross
Ms Vicki Taylor

WA

Dr Cassandra Lawson

TAS

Mr Paul Adlard

VIC

Dr Marc Achen
Ms Teresa Bisucci

Miss Diem Thuy Dinh
Dr Maurice Fabiani
Ms Marisa Gallicchio
Dr Anthony S Harvey
Dr Duncan MacGregor
Dr Anne Murphy
Dr Susan Sawyer

PUBLIC RELATIONS

One of the highlights of recent months has been Medical Research Week (featured elsewhere in this issue). We were delighted with the publicity received throughout the various States for the very broad range of activities occurring during the week. Many State Branches now have in place very effective ways of advertising their activities and generate significant media involvement. We hope to maintain the interest of these media contacts, particularly in the lead up to the next budget, when the importance of medical research and the need for adequate funding, is a message to be strongly reinforced whenever possible. We are also very pleased to find that so many people are now familiar with the Newspoll recently commissioned by ASMR, showing such positive community support for research and its funding. The key findings are also now on the ASMR home page. We are continually looking for new ways of "spreading the word" to the community of the importance and quality of medical research being carried out in Australia. For example, you can help by identifying regional/local newspapers and newsletters which would be interested in profiling research activity in your local area. They are actually read, and are particularly useful for catching the attention of local MP's (there are a lot of new federal parliamentarians!). We are very keen to hear of any ideas you may have on new ways in which we can enhance the public and political profile of medical research and ASMR, so feel free to contact me at any time with your thoughts.

Janet Keast

STATE REPORTS

Victoria

Seven major activities were hosted by ASMR-Vic: AMGEN Award and media luncheon, The Premier's Award, ASMR MRW lecture (Dr. Peter Colman), Medical Research Careers for Secondary Students and a separate night for University Students and the MRW dinner. Dr Glenn Begley (Walter & Eliza Hall Institute and Royal Melbourne Hospital) was the recipient of the AMGEN award from a field of a number of other high calibre scientists. Likewise, the Premier's Award for current or recent Ph.D. graduates was extremely competitive and Dr Vasso Apostolopoulos (Austin Research Institute) was the award winner for her work developing new methods of immunotherapy for the treatment of breast cancer. Commendations were also given to Drs Karen Anderson (Department of Medicine, Box Hill Hospital), Helen MacLean (Department of Endocrinology, Royal Children's Hospital) and Kenneth Smith (Walter & Eliza Hall Institute). A new inception this year was a careers night for university students which was a great success and we will continue with this venture. Further initiatives undertaken at the dinner included a comedian guest speaker as well as an "achievements" slide show

reiterated throughout the dinner. We will expand this latter idea to include video footage for 1997. Our thanks are extended to Mike Pickford of the Australian Science Network and the members of the committee which was chaired by Nick Deacon and included Mark Hedger, Maree Overall, Brian Oldfield and Rob Ramsay. The committee, with the assistance of the Australian Science Network, secured further sponsorship support for future MRWs.

The Economic Development Committee of the Victorian Parliament relating to Medical and Public Health Research in Victoria has been reformed following the March State election. ASMR-Vic provided a written submission (see ASMR home page) addressing the Terms of Reference. Public hearings will be conducted later in the year. If you wish any points to be addressed or have further comments, please contact Julie Mercer or Matthew Gillespie.

Matthew Gillespie and Julie Mercer

Tasmania

Medical Research Week 1996 was most successful, kicking off on the Thursday prior to MRW itself with a literary luncheon at the Hotel Grand Chancellor. Our guest speaker, Dr. Karl Kruszelnicki, kept the 190 strong audience entertained with his multi-media presentation "Great Moments in Medical Science".

MRW was officially launched the following Monday by the Vice-Chancellor of the University of Tasmania, Professor Don McNichol, who stressed that medical research was alive and well in Tasmania. Gillian Biscoe, in her capacity of Secretary of the Tasmanian Department of Community and Health Services, gave her firm support for higher education in Tasmania and local medical research, saying that excellence in research did not depend on the size of the place, but rather co-operation, local support and interaction within the international community. The opening of MRW received considerable media coverage.

Around 90 posters were submitted for display at the University of Tasmania's Menzies Centre. Judging the prizewinning entries was a major task for the panel, however the overall winner was a poster entitled "P-glycoprotein is involved in the secretion of cytotoxic factors during the terminal phase of NK cell cytotoxicity", by Christina Trambas and Greg Woods, of the University of Tasmania's Division of Pathology. The prize was a \$1500 contribution towards conference attendance.

A number of public lectures throughout the week covered topics such as Alzheimer's Disease, Glaucoma and Blood Pressure Monitoring, as well as more unusual topics such as Arachnophobia!

During July and August, a number of local medical researchers are giving a series of presentations to year 11 and 12 college students to provide a more direct interface with the community.

Plans are already under way for 1997....

Bruce Lyons

NSW

Medical Research Week was a busy time as usual. Three main events were organized for the week. On Wednesday was the NSW ASMR Annual Scientific Meeting, which was held at the Holiday Inn Coogee Beach, Sydney. There were 110 registered participants and 52 submitted abstracts. The day was divided into 18 oral presentations and 34 poster presentations. Professor Nick Hunt from the University of Sydney was our plenary speaker. His presentation, "Confessions of a Basic Researcher", was thoroughly entertaining as well as providing some insight into what it takes to be a successful medical researcher. This event was a great success and is gaining popularity with each year. All credit is due to Alaina Ammit, who was helped by Janelle Hoskins, Francine Kelly and Peter Johnson.

Following the scientific meeting was the Medical Research Week Dinner at the same venue. This event was enjoyed by junior and senior NSW medical researchers as well as representatives from the government and media. Professor Jessica Milner-Davies from the University of NSW gave the after-dinner presentation "Laughter is the Best Medicine" which was intriguing and very well received. Andrew McLachlan, Geraldine O'Neill and Caroline Salom worked hard to make this event the success it was.

On Thursday was the very popular Schools Seminars which were held at the NSW State Library in Sydney and attracted high-school students from all over the city. They were entertained by presentations from both junior and senior researchers. This forum provides an ideal opportunity for us to inform teenagers what medical research is about and how it can be a very rewarding career. This day was once again organised by Suzanne Ollerenshaw. Many thanks also go to Levon Khachigian who handled public relations for the week and Siiri Iismaa who chairs our membership committee.

Philip Hogg

QUEENSLAND

After a very successful Medical Research Week the activities of the QLD branch of the ASMR are focused on the upcoming NSC.

We held two major events during MRW. The first event was the 1996 AMP Queensland Biomedical Research Awards presentation night. This event was very well organized by Dr. Nigel McMillan with help from Dr. Greg Anderson. The three finalists in both the pre-doctoral and post-doctoral categories gave excellent presentations to an appreciative audience at the Bancroft Centre (QIMR). The pre-doctoral category included presentations from David Whiteman (QIMR: Risk factors for childhood melanomas in Queensland), Paul Hodges (UQ: Identification of a motor control deficit in low back pain) and Marie Pantaleon (UQ: Glucose transport expression and function in blastocyst formation). The post-doctoral presenters were Scott Rowlinson (UQ: An induced conformational change in the growth hormone receptor regulates signaling), Kelli MacDonald (UQ/PA Hospital: Expression of CD40-ligand in Rheumatoid arthritis) and Bernd Kalinna (QIMR: Cloning and engineering of the gene for paramyosin, a major candidate vaccine antigen against human schistosomiasis). The awards were presented to the winners, Paul Hodges and Scott Rowlinson, by Mr Don Luke (AMP Queensland) and Mrs. Judith Gamin (MLA, Burleigh).

The annual MRW dinner was again held at Denisons restaurant, Brisbane Sheraton. Rumors of the success of last years dinner had got around as we had more than 120

people attend. Representatives from all groups involved with Medical Research were present including politicians, academics, clinicians, industry, research foundations and the Health Department. Janet Keast (ASMR Director QLD) highlighted the role of ASMR and the challenges that face medical researchers in their search for funding before introducing the guest speaker Prof. Graham Mitchell (Research Director, CSL). Prof. Mitchell gave a very entertaining speech that broadly covered the industry/academia interaction, liberally interspersed with anecdotes.

Janet Keast and Judy Halliday

WA

Medical Research Week was a great success this year. In conjunction with the Raine Medical Research Foundation, we were able to have for the first time an invited speaker from interstate, who this year was Professor John Funder, Director of the Baker Medical Research Institute. Professor Funder gave an outstanding and entertaining after-dinner speech at a packed Medical Research Week dinner (200 people), and was also the keynote speaker at a Raine Medical Research Foundation mini-symposium the day before. With the support of the Cancer Foundation of WA, we held the first School's night which was attended by approximately 250 high school students, parents, teachers and medical researchers. ASMR organised for a hands-on display for the first hour, followed by several informal presentations about careers in medical research. The Cancer Foundation had organised for ~60 students from three country towns to be transported by bus to Perth for the evening, and the students were then shown around some laboratories on various campus' the next day. The entire venture was extremely successful, and augers well for a bigger and better effort in 1997. ASMR also organised four open public forums on medical research topics (transplantation, asthma, schizophrenia and vaccination) that were well attended in general, expertly presented and stimulated much discussion and questions from the public. The week's activities received good coverage from the press with several interviews (TV and radio) on the topics contained within the forums, and Professor Funder talking on the ABC concerning the current state of funding for medical research. This year the WA branch is grateful to its major (Cancer Foundation of WA, Faculty of Medicine and Dentistry at UWA, Lotteries Commission of WA and Raine Medical Research Foundation) and several minor sponsors who lent support for the week's activities. Invaluable work to make the week a success was provided by Katrin Both, Rosalie McCauley, Betty Hart and Peter Klinken. We look forward to further new initiatives and another successful week in 1997.

The next major event on the local calendar is the Combined Biological Sciences Meeting being held on Friday, August 16, at the New Esplanade Hotel in Fremantle. This is the single largest scientific meeting of researchers in Perth annually and this year boasts an impressive array of national and local speakers. The attendance in previous years has been over 300 and a similar number is expected gain this year. ASMR will again sponsor a student prize for an outstanding poster presentation at the meeting.

Peter Leedman

ASMR HOME PAGE

The ASMR home page currently covers the goals and general information about ASMR, a detailed listing of ASMR directors, a calendar of forthcoming events, a discussion paper on research assistants, previous newsletters and results of an opinion poll relating to attitudes to health and medical research in Australia. Additions to this home page will include career information (overseas employment questionnaire in email format) and state branch activities. Any further additions to the home page or notification of material for inclusion on the home page, please advise Matthew Gillespie (email: m.gillespie@medicine.unimelb.edu.au).

The home page can be accessed via the following address:

<http://www.medstv.unimelb.edu.au/ASMR>

QUEEN'S BIRTHDAY HONOURS FOR MEDICAL RESEARCHERS

ASMR congratulates the following medical scientists who recently received Queen's Birthday Honours. Professors Ruth Bishop (AO), Lou Landau (AO), Jack Martin (AO), Ian McCloskey (AO), John Shine (AO) and Fiona Stanley (AC) and Dr John Kerr (AO).

3M PHARMACEUTICALS

Clinical Research and Medical Affairs Australia, Asia, New Zealand and South Africa

Sydney Based Regional Role

Medical Graduate with Research Experience

3M Pharmaceuticals (ACN 000 100 096) is a wholly owned division of 3M Company (Minnesota Mining and Manufacturing) and is part of 3M's Life Sciences Sector. 3M Company, established in 1902, is a transnational organisation based in St. Paul, Minnesota, USA. 3M develops, produces and markets thousands of product lines in many diverse markets and engages in many areas of research and development. It has a reputation globally for being a very innovative company. Since its inception, 3M has diversified into many business sectors in healthcare such as medical products and devices, dental and orthodontic, occupational health and pharmaceuticals.

Over 20 years ago 3M Company acquired Riker Pty Limited, a company with expertise in respiratory medicine responsible for developing and manufacturing the world's first metered dose aerosol in 1956 leading to development of the Medihaler ranger of inhaled medications. 3M is a leading global manufacturer of metered dose inhalers (MDI) with over 40% of the total global market in 1995 and the first company to successfully develop, manufacture and market a CFC-free MDI. Currently 3M Pharmaceuticals has established positions in the respiratory, cardiovascular, anti-inflammatory and OTC (cough and colds) market segments.

3M Pharmaceuticals is an expanding global organisation based in St. Paul, Minnesota, with significant R & D and manufacturing operations in United States, Europe and in Sydney, Australia. The Sydney site is headquarters for the Asian region which includes all of Asia (except Japan), and Australia, New Zealand and South Africa.

3M Pharmaceuticals is experiencing ongoing growth and key to this growth is our commitment to continuing research and development. To support this expansion

throughout the region, we are currently seeking a talented and dedicated person to lead and direct the clinical research and medical affairs activities for the region.

This position requires a high calibre individual who has completed medical training, with this degree recognised in Australia, and a successful resume of research achievements. Advanced training in Respiratory or Cardiovascular medicine would be highly regarded. Significant leadership skills, communication and presentation skills are required to reflect the global strategic importance of this role.

If you would like a new career challenge and the opportunity to contribute in a dynamic and significant role, this position will provide the vehicle. To ensure this role is attractive the salary package will comprise an attractive salary, together with a fully maintained company vehicle, defined benefits superannuation plan and a health allowance.

Written applications, in confidence, should be forwarded to:

Janine Brown
Group Human Resources Manager
3M Healthcare
9-15 Chilvers Road
Thornleigh NSW 2217

Supporting Members of ASMR

AMRAD Pharmacia Biotech
Biota Holdings Limited
Bristol-Myers, Squibb Pharmaceuticals Pty. Ltd.
CSL Diagnostics
CSL Limited
Eli Lilly Australia Pty. Ltd.
Johnson & Johnson Research Pty. Ltd.
Pfizer Pty. Ltd.
Roche Products Pty.Ltd.
Sandoz Australia Pty. Ltd.
Servier Laboratories (Aust.) Pty. Ltd.
Westpac Banking Corporation
World Courier Australia Pty Ltd.

Affiliate Members of ASMR

Association of Australian Medical Research Institutes
Australasian Association of Clinical Biochemists
Australasian Menopause Society
Australasian Society for HIV Medicine Inc.
Australasian Society for Immunology
Australasian Society for Infectious Diseases
Australasian Society for the Study of Hypertension in Pregnancy
Australasian Society of Blood Transfusion
Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists
Australasian Society of Clinical Immunology & Allergy

Australian and New Zealand Bone and Mineral Society
Australian and New Zealand Society for Cell Biology
Australian and New Zealand Society of Nephrology
Australian Association of Neurologists
Australian Diabetes Society
Australian Perinatal Society
Australian Physiological and Pharmacological Society
Australian Rheumatology Society
Australian Society for Biochemistry and Molecular Biology
Australian Society for Psychiatric Research
Australian Society for the Study of Obesity
Cardiac Society of Australia and New Zealand
Clinical Oncology Society of Australia
Endocrine Society of Australia
Fertility Society of Australia
Gastroenterology Society of Australia
High Blood Pressure Research Council of Australia
Human Genetics Society of Australia
Paediatric Research Society of Australia
Thoracic Society of Australia and New Zealand
Transplantation Society of Australia and New Zealand

Calendar of Forthcoming Events

Endocrine Society of Australia / Australian Society for Reproductive Biology,
September 29-October 2, 1996, Manly Pacific Hotel, Sydney, NSW

Seven Transmembrane Domain Receptor Meeting, October 2-3, 1996, Manly Pacific
Hotel, Sydney, NSW. Contact Dr. Patrick Sexton ph 03-9288 2480, fax 03-9416 2676,
email U5636655@ucsvc.ucl.ac.uk

AIMS National Scientific Conference, October 7-11, 1996, Adelaide Convention
Centre, Adelaide, SA. Contact SAPMEA Conventions ph 08-239 1515, email
conv@sapmea.asn.au

35th Annual ASMR National Scientific Conference, November 24-27, 1996, Gold
Coast, Qld Contact Dr. Paul Bates ph 07-3875 5358, fax 07-3875 7656, email
P.Bates@sct.gu.edu.au

9th Annual Lorne Cancer Conference, February 13-16, 1997, Lorne, Vic. Contact Dr.
John Zalberg ph 03-9496 2852, fax 03-9496 2095, email
jacqui@austin.unimelb.edu.au

Further information relating to these meetings can be obtained from the ASMR
homepage:

<http://www.medstv.unimelb.edu.au/ASMR>

ASMR BOARD

Graham Mann (NSW),
President
Tel: 02 845 6494/6954

Fax: 02 891 6035
email: gmann@extro.ucc.su.oz.au
Department of Medical Oncology
Westmead Hospital
Westmead, NSW 2145

Kieran Scott (NSW),
President-elect
Tel: 02 295 8402
Fax: 02 295 8401
Email: kieran.scott@unsw.edu.au

Peter Leedman (WA), Hon Secretary
Tel: 09 224 3124
Fax: 09 224 0246 / 3155
Email: peterl@uniwa.uwa.edu.au

Julie Mercer (Vic),
Hon Treasurer
Tel: 03 9550 5392
Fax: 03 9550 5389
Email: julie.mercer@med.monash.edu.au

Janet Keast (Qld),
Convenor-Public Relations
Tel: 07 3365 3334
Fax: 07 3365 1766
Email: Keast@plpk.uq.oz.au

Peter O'Loughlin (SA),
Convenor-Research Careers
Tel: 08 222 3514
Fax: 08 222 3538

Bruce Lyons (Tas),
Research Careers
Tel: 002 354 806
Fax: 002 354 833
Email: bruce.lyons@path.utas.edu.au

Matthew Gillespie (Vic),
Convenor-Publications
Tel: 03 9288 2480
Fax: 03 9416 2676
Email: m.gillespie@medicine.unimelb.edu.au

Susanne Ollerenshaw (NSW),
Public Relations
Tel: 02 385 5709
Fax: 02 385 5981
Email: slo@newt.phys.unsw.edu.au

Judy Halliday (Qld),
Research Careers

Tel: 07 336 52134
Fax: 07 3365 1990
Email: j.halliday@mailbox.uq.oz.au

Steve Wesselingh (SA),
Convener-Membership
Tel: 08 204 4284
Fax: 08 276 8658
Email: mislw@gamgee.cc.flinders.edu.au

ASMR OFFICE NEW ADDRESS

ASMR Office
Catherine West,
Administrative Secretary
145 Macquarie Street,
Sydney 2000
Tel: 02 256 5450
Fax: 02 252 0294
Email: asmr@world.net

[go back](#)