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NHMRC – three months young!

he NHMRC became a new organisation on July 1st this year. The revised NHMRC Act created an independent NHMRC, one that is no longer a part of the Department of Health and Ageing. What's more, NHMRC received almost \$700 million extra in the May budget to invest in research and fellowships over the next 5 years (the total NHMRC expenditure will be approximately \$2.68 billion over that period). A new, more streamlined Council has been appointed, there are new Chairs of the NHMRC Principal Committee (Research, Australian Health Ethics, National Health Committees) and almost entirely new memberships of these committees, and of course a new CEO.

All this is a strong signal to the NHMRC; it is time to grow and become an even more important body in providing evidence as the basis for better health, for funding the development of that evidence, for encouraging innovation and industry development from new discoveries, and for developing and guarding the ethical framework for health and medical research. I am determined to build a revitalised NHMRC and develop a vision for the future growth and development of the organisation and its sweep and impact on society. NHMRC has advantages over most, perhaps all, of our sister health research funding bodies around the world. Unlike them, we have research plus advice plus ethics in our portfolio, and so NHMRC has a real role (and one that could be expanded much more) to ensure that research findings make their way into better advice, policy and practice. This triennium, Research Committee and the new National Health Committee will work together to achieve this and will have the help of the National Institute for Clinical Studies, which will join the NHMRC in its Melbourne location.

There is much to do, as we pursue the Virtuous Cycle. We need to ensure that our granting processes fund the best research, grow Australia's health research capacity, improve the implementation of evidence into practice and policy development, be more responsive to government and society's needs for evidence based advice, ensure an effective and efficient ethical framework for research and health. I intend to ensure that we open ourselves to scrutiny, both of our achievements and of our processes. We will need to set realistic and achievable objectives and performance



Professor Warwick Anderson, NHMRC CEO

indicators, to convince government that the new NHMRC is capable of serving society powerfully and effectively, like never before. The Office of NHMRC will be structured and staffed to help the organization, and Australian health and medical researchers, to achieve this new vision.

But the NHMRC is also 70 years old, and in that time has built an unequalled reputation for many qualities — for excellence, quality, a commitment to ethical research, and to "gold standard" guidelines. In the development of the new NHMRC, these qualities will be retained and valued. One of these qualities is NHMRC's support for investigation of the basics of life, the fundamentals of disease processes, and the unfettered pursuit of knowledge, in research devised and driven by investigators themselves. These core values have largely built Australia's research eminence in so many fields. But this cannot be all we do, and the NHMRC also has a record of sponsoring emerging areas. There is a need now for attention to such areas as policy and practice focussed research, in the development of innovative industries, and in the



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development of the stronger multidisciplinary "Request for Applications" approaches used by others (e.g. NIH, EU Frameworks).

The NHMRC will not be able to achieve its hopes for service to the future health of Australia without the active help and input of the many thousands of people who are part of the larger NHMRC family – those in receipt of research, fellowships and scholarships support, who serve on our many Committees and working groups, who make submissions to our consultative documents, and who use our guidelines and advice. We commit to being better at communicating with you all.

Finally, I would like to mention what a great year it has been for the recognition of Australian health and

medical researchers. Congratulations to Dr. Tien Wong, the Commonwealth Health Minister's Prize winner for 2006, to Ian Fraser, Australian of the Year, to Robin Warren and Barry Marshall for their Nobel Prize (the second to Australians in a decade, and both times for work done here) and to David De Kretser, now Governor of Victoria! It is astounding how many stars we have in health and medical research.

Professor Warwick Anderson NHMRC Chief Executive Officer

Outcomes of the NHMRC grant evaluations round for grants commencing 2007 will be known in October.

ASMR Reception

ASMR directors meeting in Melbourne last month hosted a reception for stakeholders at the Menzies Foundation. Professor Khachigian took the opportunity to brief guests on the national health and medical research landscape, and on ASMR plans and activities.

Right ASMR President Professor Levon Khachigian with the Chair of the NHMRC Research Committee,
Professor James Best at the ASMR reception.



Electionof ASMR Directors

Three nominations were received to fill vacancies occurring in November 2006. The three nominees will fill the available vacancies without the requirement for election by ballot. **Directors re**appointed and newly appointed effective from the conclusions of the **November 2006 AGM are Dr Sarah** Meachem (Vic), Dr **Sandra Nicholson** (Vic) and Dr Emma Parkinson-Lawrence (SA).

Right: A/Prof Len Kritharides, representing CSANZ, with Prof. Colin Masters, the Chair of the NHMRC National Health Committee, at the ASMR reception.



Left: A/Prof Rob Ramsay with the Honorable Matt Viney, MP at the ASMR reception.



Origins of the Australian Society for Medical Research

Alan Skyring and Barry Firkin founded ASMR in Sydney in 1960. What follows is Alan's personal account of how the Society came to be.





Alan Skyring

Barry Firkin

arry Firkin and I both arrived at Royal Prince Alfred Hospital, Sydney, in early 1960, he to become Director of the Clinical Research Unit and I to be Director of Gastroenterology. We had both spent the previous two years in the United States, I was at Johns Hopkins in Baltimore he was in St Louis and we had both been struck by the multidisciplinary nature of the research being done in the departments in which we worked and in the Clinical Research Society meetings we attended in Atlantic City where scientists from all disciplines including clinical medicine followed each other on to the podium and relaxed and interacted in restaurants and coffee shops. No such society existed here so over a couple of beers one night we decided to form one, to call it the Australian Society for Medical Research and to publish abstracts in a journal to be called Medical Research.

We managed to talk Jim McRae, Rod Shearman, Gordon Archer and Arnold Hunt into joining the committee but as Barry and I were the main enthusiasts, we would have to do the legwork. I'm pretty sure we tossed a coin! I don't know who won or lost but he became the President with the main job of finding members and I became

Secretary/Treasurer with the job of raising money, organising the first meeting and publishing the journal.

The collective decision that only members under 40 years of age could be office bearers and to call the organization ASMR led to a fair bit of derision from some, who said how could a couple of upstarts have the hide to start a society with such radically new and strange ideas.

I took a week's leave and went to Melbourne to do a bit of missionary work and managed to convince Gus Nossal, Don Metcalf and a few of our more enlightened southern neighbours to join. Some of them presented papers at our first meeting later that year. We reckoned we had to get the Society up and running quickly otherwise we were dead — hence the haste to have a meeting before the end of the year. The meeting was judged a success with papers presented from a variety of disciplines.

Barry talked his family solicitor into doing the Articles of Association and my accountant became the Society's auditor, both in an honorary capacity. So in less than 9 months, we had an organisation that not only achieved its scientific goals but was a proper legal and financial entity. Forty-five years on, the Society continues to thrive!

Alan Skyring

We sincerely thank Alan for this insightful piece. The first ASMR Board comprised Barry Firkin, President-elect Gordon Archer, Hon Secretary-Treasurer Alan Skyring, and Directors Arnold Hunt, James McRae and Rodney Shearman. The age limit for elected Directors is of course now 45 - Levon Khachigian

ASMR Medallist 2007

We are delighted to announce that Professor Axel Ullrich, Director of Molecular Biology at the Max Planck Institute, will be the ASMR Medallist for 2007. He is one of the developers of the anti-cancer drug Herceptin and has founded at least three biotech companies one of which is Sugen. He has developed the first multi-targeted kinase inhibitor, SU11248/SUTENT, for the treatment of cancer, and is in the top ten of H-index of living biologists. Herceptin was listed on the PBS this month



Professor Axel Ullrich

Calender

3rd Australian Health & Medical Research Congress

26 Nov – 1 Dec, 2006 Melbourne Convention Centre www.ahmrcongress.org.au

NSC 2007 Tissue Remodelling: Current Understanding and Future Therapeutic Targets

Convenors: Alaina Ammit and Alastair Stewart 11 – 14 November, 2007 The Carrington Katoomba, NSW

International Diabetes Federation Diabetes in Indigenous People Forum

13 – 15 November, 2006 Melbourne Exhibition Centre

The 32nd Lorne Conference on Protein Structure and Function

4 – 8 February, 2007 Erskine Mantra Resort, Lorne http://www.lorneproteins.org

19th Lorne Cancer Conference

8 – 10 February, 2007 Erskine Mantra Resort, Lorne http://www.lornecancer.org

19th Lorne Genome Conference

11 – 15 February , 2007 Erskine Mantra Resort, Lorne http://www.genome-conf.net.au

4th IAS Conference on HIV Pathogenesis, Treatment and Prevention

22 – 25 July , 2007 Sydney Convention and Exhibition Centre www.ias2007.org



Materials Transfer Agreements – Traps for researchers



David Smith, Partner, Corrs Chambers Westgarth lawyers

hen a researcher needs to acquire biological materials from a third party, the third party often requires execution of a Materials Transfer Agreement (an MTA).

There are a number of traps to look out for, from the researcher's point of view. Researchers need to read MTAs carefully and be prepared to take the time and effort to negotiate amendments to them, to avoid some potentially disastrous pitfalls.

Below I refer to the researcher's home company or institution as the "recipient institution" and the supplier of the biological materials as the "materials supplier".

1. The "head on the chopping block" trap

Sometimes the researcher signs the MTA himself or herself, without specifying that she/he does so on behalf of the recipient institution. In that case the researcher's own head is on the chopping block if the MTA is breached – she/he may be personally liable for damages or other court orders if a breach occurs. Generally, the researcher should ensure that an authorised person (this may or may not be the researcher, depending on their level of delegated authority) signs the MTA on behalf of the recipient institution.

2. The "IP grab" trap

It is not uncommon for an MTA to state that any invention or discovery made with the use of the provided biological materials will be owned by, or licensed on a royalty-free basis to, the materials supplier. In most cases, this amounts to an unjustifiable "grab" for intellectual property rights. A much more reasonable position would be for any improvement a researcher makes to the materials themselves to be owned by the materials supplier, but for the recipient institution (subject to its arrangements with the researcher and third parties) to own and control any other IP created

in the research project. Where necessary, an appropriate amendment to the MTA should be sought to reflect this position. Legal advice should be obtained on the wording of the amendment.

3. The "your time's up" trap

Often MTAs state that the recipient institution's rights to use the materials last for some arbitrary period of time, such as six months or one year. The researcher should think about whether this period is likely to be long enough, or whether a longer period (perhaps expressly linked to the period of the research project) should be specified. Generally there are obligations on the recipient institution to return or destroy materials that remain in its possession when the time period expires. It is much less anxiety-inducing to get the period right from the beginning, than to have to ask the materials supplier for an extension of time (and risk this being declined).

4. The "pro forma equals no brainer" trap

MTAs are usually generated using "pro forma" document templates, which favour the materials supplier. The materials supplier often simply fills in the blanks in the template, without thinking about the applicability of the detailed terms of the MTA. They will often proffer the MTA to the researcher, saying "just sign this standard form MTA – everyone signs it". The researcher simply must read the MTA to check its applicability to the particular circumstances, and seek legal input if unsure. Otherwise, there is a good chance of the researcher falling into the above traps – and also trapping his/her colleagues and the recipient institution.

David Smith

Partner, Corrs Chambers Westgarth lawyers david.smith@corrs.com.au



Dr Gilda Tachedjian ASMR Newsletter Editor-in-Chief

ASMR - Letters to the Editor

Starting next year we will be introducing a "Letters to the Editor" section in the ASMR Newsletter. This is to provide a forum for our members to voice their concerns and opinions regarding issues pertinent to health and medical researchers. The best "Letter to the Editor" received during 2007 will receive a \$100 prize.

Please submit letters by email to the ASMR Newsletter Editor (gildat@burnet.edu.au) by 26th of January 2007 for inclusion in the March 2007 issue. Letters must be no longer than 100 words in length. Contributors should include their name, position and affiliation for publication. The Editor has the right to edit the content for clarity, publication is entirely at the discretion of the Editor and no correspondence will be entered into.



Work Force Survey

Dear Colleagues

The Australian Society for Medical Research will be calling upon you to complete the forthcoming Workforce Survey (survey open on 9th October). The Society has commissioned the Survey in order to better understand and improve the career structures and conditions of Australian health and medical researchers.

ASMR is committed to promoting and fostering career structures for Australian health and medical researchers and is well placed to undertake this vital task in collaboration with Professor Paul Boreham, Director of The University of Queensland Social Research Center (UQSRC).

The web-based survey is anonymous and confidential, with results examined only at the aggregated level. You will be allocated an individualised ID and password with which to access the survey. The ID cannot be matched by UQSRC to you in any way and are solely designed for authorised ASMR staff to send reminder emails regarding the survey.

The Survey is designed specifically to collect quantitative data on workforce issues such as brain drain/gain, missed opportunities, career prospects/

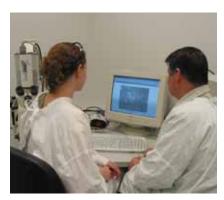
perceptions to name a few. In formulating the survey, we have sought input from Chairs and Former Chairs of the NHMRC Fellowships Committee, Training Awards Committee, Institute and Centre Heads, current fellows, awardees, and postdocs, as well as unsuccessful applicants. Dr Sarah Meachem of the ASMR National Executive (Sarah.Meachem@princehenrys.org), is coordinating the Survey.

The Minister for Health and Ageing, Tony Abbott has expressed his interest in the findings and we are anxious to uncover data

not previously available for the sector. We have every confidence the published results will increase political leverage and public awareness. Your participation is critical to its success.

The web-based survey will take 15–20 minutes — and it is time well spent. Please visit http://uqsrc.sbs.uq.edu.au/surveys/loginform.asp?cl=24 to access the web-based survey.

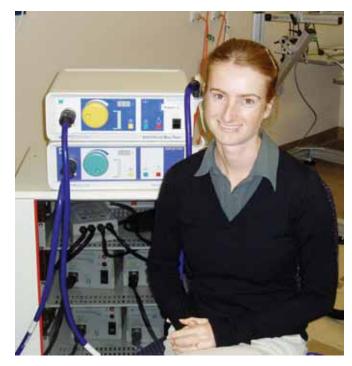
Professor Levon Khachigian ASMR President





ASMR Research Award Winner — Gabrielle Todd

am grateful for the opportunity to broaden my research knowledge with the ASMR Research Award. The award enabled me to visit Professor Mark George and Dr Daryl Bohning at The Centre for Advanced Imaging Research in South Carolina, USA. Here, I learnt how to interleave transcranial magnetic stimulation with functional magnetic resonance imaging. This technique allows direct visualization of stimulation-induced changes in brain activity at high spatial and temporal resolution. I aim to adapt their technique to study stimulation-induced reorganization within the human motor cortex. The focus of my research is to induce persistent changes in the excitability of the motor cortex in a manner that will improve motor function and motor learning in normal subjects and in subjects with brains damaged by stroke.



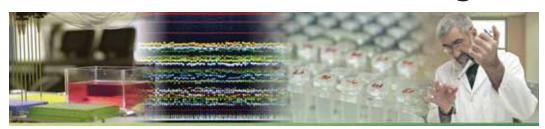
Gabrielle Todd, winner of 2005 ASMR Research Award



Australian Health & Medical Research Congress



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elbourne is the host city for the 3rd bi-annual Australian Health & Medical Research Congress (AH&MRC). The Melbourne Convention Centre (November 26 to December 1st 2006) will see thirty medical research societies and groups joining together to generate an exceptional, multi-disciplinary scientific program, crossing from cytokines and disease through to stem cells and cancer, with a strong emphasis on the translational and cutting-edge technologies. ASMR is proud to have initiated what is now the biggest meeting of its kind in Australia. The Congress has gone from strength to strength and this year sees a record number of international speakers taking part in an exciting mix of disciplines, which will promote the cross-fertilisation of ideas and stimulate the collaborative process.

ASMR is delighted that the following organisations are holding their full annual scientific meetings during the Congress: the Clinical Oncology Society of Australia (COSA), The Australasian Society of Clinical & Experimental Pharmacologists and Toxicologists (ASCEPT), the Mutagenesis & Experimental Pathology Society of Australia (MEPSA), the Australasian Proteomics Society (APS), the Matrix Biology Society of Australia and New Zealand (MBSANZ), the Australian Microarray and Associated Technologies (AMATA) and the Australian Stem Cell Centre.

Star speakers include:

Richard Flavell: Regulation of Inflammation and Immunity

Flavell has made seminal contributions to a number of important immunological problems, including the function of toll-like receptors in innate and adaptive immunity, the signalling pathways involved in T cell activation and the gene regulatory mechanisms involved in the differentiation of T cells. The later studies have led to the remarkable discovery that regulatory elements on one chromosome can directly interact with elements on another chromosome to regulate the expression of gene clusters.

Jean-Paul Thiery: Cell Adhesion in Development and Disease

Thiery's postdoctoral studies with Gerald Edelman led to the discovery of N-CAM, the first identified intercellular adhesion molecule and his pioneering work defined the role of cell adhesion in early embryogenesis. He has defined the morphoregulatory roles of growth factors and cell adhesion signalling in epithelial mesenchymal transitions and branching morphogenesis, with recent work focussed on unravelling the genetic and epigenetic controls of cell adhesion.

Rudi Jaenisch: Stem Cells, Therapeutic Cloning and Gene Methylation in Cancer

A pioneer in transgenic science and embryonic stem cell cloning, Jaenisch's mouse models have produced important advances in understanding cancer, neurological disorders, connective tissue diseases, and developmental abnormalities. One of the most intriguing models, involving an enzyme called DNA methyltransferase, has led to a potential new strategy for cancer therapy.

Joe Nevins: Genomics, Molecular Pathways and Cancer Treatment

Nevins has a long-standing interest in cell cycle regulation, which is perturbed in the vast majority of human cancers. His work has recently identified subsets of human lung cancers where genomics can predict response to classical cytotoxic adjuvant therapy and also identify molecular pathways that are susceptible to new, targeted therapies. Has the clinical promise of genomic technology finally arrived?

John Bergeron:

Proteomics as a Paradigm for the Systems Biology Study of Disease

Bergeron has made key discoveries on protein maturation, trafficking and function and has brought us significantly closer to understanding exactly how proteins are folded and how a particular molecular machine, known as the calnexin cycle, actually "chaperones" the activity. His discoveries have begun to delineate new molecular machines involved in organellar processes and are leading to the definition of new functions for established organelles.

Full program information is available from www.ahmrcongress.org.au

Sandra Nicholson 2006 AH&MRC Convenor, AHMRC@wehi.edu.au

Invitation

The ASMR Annual
General Meeting
will be held at the
Australian Health
and Medical
Research Congress,
Melbourne
Convention Centre
on Wednesday 29th
November 2006 at
12:30pm. All
members are
welcome.



Upcoming ASMR National Scientific Conference:

Tissue Remodelling: Current Understanding and Future Therapeutic Targets

The Carrington, Katoomba

11th - 14th November 2007

Convenors:

Alaina Ammit and Alastair Stewart

issue remodelling is associated with both normal and abnormal processes. Tissue injury by thermal, mechanical, ischaemic or primary inflammatory mechanisms may resolve with tissue structure intact and cellular phenotype unchanged. As the intensity and duration of these insults increases, regenerative healing gives way to a fibroplasia, angiogenesis and persistent changes in the population of cell phenotypes

within the parenchymal tissue, a phenomenon widely recognised as scarring. These tissue structural changes have a broad impact on neuronal and visceral tissues, leading to chronic morbidity associated with loss of function and persistent inflammation. The aim of the conference is to bring together researchers working in diverse disease areas in which tissue remodelling is a key feature, such as asthma, cancer, rheumatoid arthritis, hepatic fibrogenesis and cardiovascular disease, to share their perspectives on the molecular and cellular mechanisms that control tissue remodelling and to elucidate future therapeutic targets to combat these diseases.



The historic Carrington Hotel in Katoomba is the venue for the 2007 NSC.

The ASMR Member Directory

The ASMR Member Directory is a new initiative to promote communication and collaboration between health and medical researchers in Australia. The Directory is a web-based search engine that will include individuals' position(s) and professional contact details, degrees, membership of other societies, website and four keywords/phrases (research interests). You will be able to update your information via password access to the Directory. It is to be openly available to the public, be searchable by surname and by research interest.

ASMR members will receive a consent form for listing in the Directory. **It is important that you complete and sign it, and return it to the Executive Office as soon as possible.** The form can also be downloaded from http://www.asmr.org.au/about/membership.html.Don't miss this opportunity to be included in this important networking resource. We look forward to receiving your forms.

Professor Levon Khachigian ASMR President



UNSW UNSW Faculty of Medicine

Research Strengths

During the years 2003–2004, the Faculty undertook a large-scale review of its research activities with a view to planning more rationally to better support and grow these activities over the coming decade. A major outcome of this activity was the identification of our areas of research strength as well as areas of emerging strength within the Faculty. The point of this exercise was not in any way to discourage research activity in areas beyond those identified, but to recognise the fact that research is an expensive exercise both in terms of dollars and in terms of personnel, and that sensible investment of these scarce resources requires knowledge of what we do well and careful decision making about future strategies.

Existing Strengths

Brain Sciences Cardiovascular Research Infection/Immunity/Inflammation

Emerging Strengths

Health Informatics Policy and Practice Interface in Health Practice Cancer Research

Postgraduate Research Programs

The postgraduate research programs offered by the Faculty involve a student undertaking an investigative project under the supervision of an academic. The investigation will culminate in the submission of a thesis that amongst other things, records the student's research methods, findings and results.

For more information, please refer to the following link:

http://www.med.unsw.edu.au/medweb.nsf/page/Postgraduate+Research+Programs



ASMR Directors 2006

Professor Levon Khachigian — President

Assoc. Prof. Maria Kavallaris — President Elect,

Treasurer and Business Development

Dr Alaina Ammit — Honorary Secretary

Dr Mark Hulett— Careers Convenor, Membership Co-convenor

Dr Sandra Nicholson — 2006 AHMRC Convenor

Assoc. Prof. J Alejandro Lopez — Membership Convenor

Dr Sarah Meachem — Public Relations Convenor, Careers Co-convenor

Dr Gilda Tachedjian — Newsletter Editor

Dr Alison Butt — ASMR MRW Convenor

Assoc. Prof Peter Eastwood— Coordinator State Committees

Assoc. Prof Martin Delatycki— Clinical Issues

Dr Steven Polyak — Board Liaison Representative for SA

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Australasian Society of Clinical Immunology and Allergy

Australian and New Zealand Society for Blood Transfusion

Australasian Gene Therapy Society Inc

Australasian Society for HIV Med Inc

Australasian Society for Infectious Diseases

Australasian Society for Psychiatric Research

Association of Australian Medical Research Institutes

Australian and New Zealand Bone and Mineral Society Australasian Society of Clinical and Experimental

Pharmacologists and Toxicologists

Australian and New Zealand Society of Nephrology

Australian Atherosclerosis Society

Australian Physiology and Pharmacology Society

Australian Society for the Study of Obesity

Australasian Menopause Society

Australasian Society for Immunology

Australian and New Zealand Association of Neurologists

Australian Diabetes Society

Australian Neuroscience Society Inc

Australian Rheumatology Association

Australian Sleep Association Inc.

Australian Society for Parasitology

Australian Vascular Biology Society

Cardiac Society of Australia and New Zealand

Clinical Oncological Society of Australia

Endocrine Society of Australia Fertility Society of Australia

Haematology Society of Australia and New Zealand

High Blood Pressure Research Council of Australia

Human Genetics Society of Australasia

National Association of Research Fellows

Paediatric Research Society of Australia and New Zealand

Perinatal Society of Australia and New Zealand

Society for Free Radical Research (Australasia)

Royal Áustralasian College of Physicians

Royal College of Pathologists of Australasia

RANZ College of Obstetricians and Gynaecologists The Society for Reproductive Biology

The Australian Medical Students Association Ltd.

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