

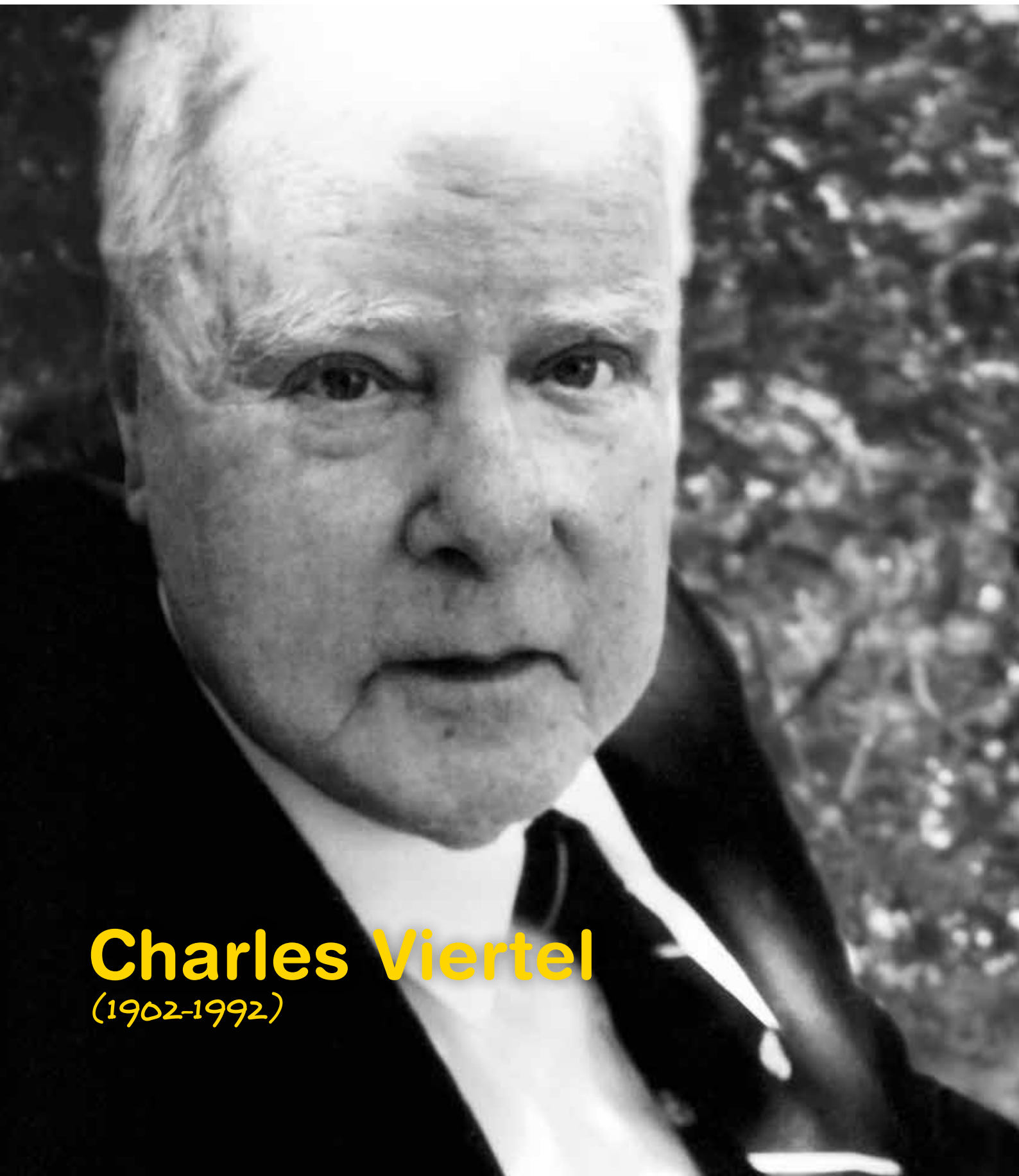


*Beating cancer*  
**through research**

**Annual  
Report  
2014**



**Viertel  
Cancer Research Centre**



# Charles Viertel

(1902-1992)



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The Sylvia and Charles Viertel Charitable Foundation was established in 1992, following the passing of Mr Charles Viertel, prominent Queensland investor and philanthropist.

In 2004, the Foundation made a significant and ongoing commitment to Cancer Council Queensland in support of the Viertel Cancer Research Centre.

Cancer Council Queensland gratefully acknowledges the generous support of the Sylvia and Charles Viertel Charitable Foundation and its Chairman, Mr George Curphey OAM.



# Message from the CEO



**Thanks to generous support from the Sylvia and Charles Viertel Charitable Foundation and the community, in 2014 we delivered cutting-edge research to solve complex challenges in cancer control.**

Highlights included launch of the CancerCope project to develop and test online psychological interventions to improve the mental health of distressed cancer patients. This four-year international study is being conducted jointly with Griffith University and the University of Virginia in the United States, continuing on our track record for innovation and collaboration. The project has the potential to provide 'on-demand' online psychological support to reduce cancer-related distress, at a minimal cost and with high community accessibility.

Our focus on improving quality of life for cancer patients also included the 1000 Survivor Study, an in-depth examination of the everyday experiences of cancer survivors. Analysis of the data will continue in 2015, broadening our knowledge of how a cancer diagnosis can impact a person's emotional, physical, practical, and psychological wellbeing.

Investigations into prostate cancer continued with the start of a large clinical trial of a group-based mindfulness intervention to assist men who experience distress related to diagnosis of advanced disease. We also published the findings of our long-term ProsCan for Couples project, which will be used to inform the development of customised supportive care interventions.

In the area of childhood cancer, our scientists informed the work of two international panels, the first to identify key research priorities and potential international collaborations in childhood cancer and the second to develop the first consensus-based classification system for the collection of paediatric cancer stage in cancer registries. Both initiatives are a demonstration of our global leadership in this field, through management of the Australian Paediatric Cancer Registry.

A strategic program of work continued to examine inequalities in cancer survival, designing new statistical methods to better understand poorer outcomes observed in specific geographic regions and demographic groups. This important program of work is vital to cancer control in Queensland and will help to inform the development of lifesaving programs and services into the future.

Of particular significance, we continued to build our research focus on the subject of community engagement, to better understand how we can improve community-based cancer control and accelerate our progress to eliminate the burden of cancer on the community.

## Ten year Research highlights

Our goal is to conduct **collaborative investigation** in cancer control with a focus on questions of importance to Queenslanders, **research excellence** and community impact.



**30+**  
research  
grants  
awarded

**\$10**  
million  
research grant  
income

Evidence of these and many more achievements are outlined in this report.

I extend my thanks to the Sylvia and Charles Viertel Charitable Foundation and its Chairman, Mr George Curphey OAM, for their ongoing support of our work. I also acknowledge and thank the members of the Viertel Centre's Executive Committee, Professor Frank Gardiner AM, Professor Ian Frazer AC, and Professor David Shum, for their support and guidance during this year.

I gratefully acknowledge Cancer Council Queensland's Board of Directors and Chairman, Mr Graham Gibson QC, our staff, and our network of distinguished research collaborators for their contributions to excellence in medical and scientific discovery.

Finally, I must acknowledge with deepest appreciation the thousands of community members who fund our work and volunteer their time so that we can deliver on our mission to one day beat cancer.

Thank you.

**Professor Jeff Dunn AO**  
CEO

Accreditation by the **National Health and Medical Research Council**



**330+**  
peer-reviewed  
publications

**6000+**  
citations of our research



**100,000+**  
Queenslanders took part in our research

# Key program areas







## **Epidemiology** research program

Aims to understand patterns and trends in cancer incidence, prevalence, mortality and survival with a view to identifying areas of improvement or need, and to **investigate factors that impact** on diagnosis, clinical management, health service delivery and **cancer outcomes**.

## **Psycho-oncology** research program

Aims to **identify and understand impacts** on psycho-social and survivorship outcomes for people with cancer, to **undertake applied research** to understand how to improve those outcomes, and to **translate the results into improved cancer services** and supportive care.

## **Community engagement research program**

Aims to develop Cancer Council Queensland's capacity to realise its **cancer control goals** through community engagement and **community-based action**. This program of research **informs** community activities in relation to public health, fundraising and volunteering, and **helps us better understand** the community's aspirations and expectations of non-government organisations in **cancer control**.



# Supportive care for cancer patients

The diagnosis and treatment of cancer is a major life stress that is followed by a range of psychological, social, physical and spiritual difficulties. Our supportive care studies aim to identify the needs of those whose lives are affected by cancer and help to determine the best programs and services to support them.

## The CancerCope Project

- Through CancerCope, a research collaboration with Griffith University and the University of Virginia in the USA, we are developing and evaluating an innovative online psychological intervention to improve the mental health of distressed cancer patients.

Phase 1 was completed this year, involving the development of the online intervention CancerCope. Developed by a multi-disciplinary team of psychologists, eHealth researchers, instructional designers, and software developers, CancerCope is a 7-week interactive program containing information on stress management, relaxation exercise, managing unhelpful thoughts, problem-solving, decision making and self-care (including exercise, sleep, fatigue and nutrition). CancerCope was piloted with the help of 21 people diagnosed with cancer who were recruited through our 13 11 20 service.

Phase 2 is currently underway, involving a randomised controlled trial among patients with colorectal cancer or melanoma. The trial is comparing CancerCope to a static website containing patient education materials.

- The CancerCope project has the potential to improve health outcomes for Australian cancer patients by providing an 'on-demand' online psychological intervention, specifically designed

to reduce cancer-related distress, at a minimal cost and with high community accessibility. CancerCope will not replace or duplicate currently available services, but has the potential to provide a valuable adjunct to existing services and an Internet option where this is either the patient preference; or where no other service is available. This is particularly important for rural and regional cancer patients as this online intervention can overcome geographical barriers associated with access to currently available face-to-face psychosocial care.

## The 1,000 Survivor Study

- An in-depth study of over 1,000 cancer survivors was completed in collaboration with the LIVESTRONG Foundation, an international leader in cancer survivorship research. The study aimed to build knowledge and understanding of the experiences of people following treatment for cancer. An online survey asked about the physical, emotional and practical issues and concerns associated with diagnosis and treatment, and whether support was sought or received for these concerns.
- Analysis currently underway will help to identify what support mechanisms are needed for cancer patients, to improve the quality of life of the growing number of cancer survivors. Visit [www.survivorstudy.org.au](http://www.survivorstudy.org.au)



# Melanoma and other skin cancers

Skin cancer is the most common cancer in Australia and Queensland has the highest rate of skin cancer in the world. In 2012, more than 3,400 people were diagnosed with melanoma, one of the most serious forms of skin cancer and over 300 died from this disease



## Melanoma

- Research this year showed that people diagnosed with melanoma have a high risk of being diagnosed with a second primary melanoma and that this risk is increased regardless of whether the first melanoma is invasive or in situ. There is a particularly high risk of being diagnosed with a second primary invasive melanoma on the same part of the body where the first melanoma occurred, especially if this was on the head. Results were presented to a national conference in August, where the importance of ongoing clinical surveillance in melanoma patients was highlighted.
- Most melanomas diagnosed in Queensland are detected at an early stage when survival rates are very good. Despite this, a proportion of patients with early melanomas will die from their disease and, in fact, the largest number of people who die of melanoma in Queensland die as the result of an “early” melanoma. This finding highlights the continuing importance of melanoma prevention in our highly sun-exposed population.
- Melanoma is the most common cancer in Australians aged 15-44 years and improving sun protection behaviours is critical to reducing the incidence of this cancer in young people. Providing health promotion programs using short message service (SMS) has been successfully trialled for various health behaviours. Recognising the potential of this method, a randomised-controlled trial was conducted to test the impact of an SMS-delivered intervention targeting sun protection and skin self-examination behaviours. The trial involved over 500 participants, half of

whom received weekly text messages over 12 weeks followed by monthly messages for the next nine months. The remaining half formed the study control group. Text messages were found to improve sun protection and skin self-examination behaviours among the intervention group. The use of text messaging coupled with other forms of multimedia have the potential to further improve sun protection behaviours and ultimately help to reduce the incidence of melanoma and other forms of skin cancer.

## Merkel Cell Carcinoma

- Merkel cell carcinoma is a rare but very dangerous type of skin cancer that is not well known in the general community. We showed that Merkel cell carcinoma is at least twice as common in Queensland as anywhere else in the world, supporting the hypothesis that exposure to sunlight is a major cause. Survival from Merkel cell carcinoma is generally poor and people diagnosed with this cancer have a significantly increased risk of being diagnosed with a second cancer. These findings highlight the need for the development of clinical practice guidelines to aid in the more timely diagnosis and management of Merkel cell carcinoma.

A concerted media awareness campaign was released to coincide with National Skin Cancer Action Week and promote the importance of regular skin checks.







# Prostate cancer

Approximately 35,000 Queensland men are currently living with a diagnosis of prostate cancer and greater than 4,000 Queensland men are diagnosed each year. Prostate cancer can be a challenging diagnosis for men and their partners with many experiencing significant levels of distress and psychological difficulties due to the many side-effects of treatment. Understanding the nature and impact of this disease is a key area of research for the Centre.

- Couples experiencing prostate cancer are often challenged by the impact of the side-effects of treatment on their relationship. This year, we published the findings of our ProsCan for Couples study - the largest trial in the world to target the concerns of couples experiencing prostate cancer. It is also the first to compare peer support with nurse-delivered support and self-management.
- Overall, couples viewed the interventions provided as highly positive. Although peer support and nurse-delivered support offered different types of expertise, each was equally acceptable to couples. We are now considering how to tailor these support interventions, potentially combining peer-delivered and nurse-delivered support, as each appears to be helpful to couples in a different way.
- Other research showed that a man's level of masculine self-esteem is a driver of psychological distress after a prostate cancer diagnosis, and that younger men with prostate cancer are more likely to experience distress compared to older men. Focus groups and in-depth interviews with health professionals and patients revealed that men's responses to diagnosis and treatment appear to be influenced by their life stage (for example, work status, family responsibilities, and sexual relationships) and how they see themselves as men, that is, being physically strong, competitive, sexually-active and having a stoic mindset. We are continuing to examine these concepts and how they may influence supportive and psychosocial healthcare after prostate cancer.
- Men diagnosed with advanced cancer experience high levels of distress. To address this, we began a large clinical trial of a group-based mindfulness intervention that we hope will be effective in reducing distress and improving quality of life for these men.
- We are completing the data analysis phase of a randomised clinical trial investigating the effectiveness of a peer support and physical activity intervention for men with localised disease to improve their psychosocial outcomes.





# Breast cancer

**Breast cancer is one of the most common cancers affecting Australian women. In 2012 more than 3,100 Queensland women were diagnosed with breast cancer and over 500 died from this disease. While survival from breast cancer has improved markedly over the past few decades, these improvements have not been observed in all population groups. Currently we have limited understanding of the underlying causes of these differences, and this in turn, limits our ability to improve outcomes for all women with breast cancer.**

## **Breast Cancer Outcomes Study**

- This ongoing five-year project will identify the factors that impact treatment and clinical and psycho-social outcomes following a diagnosis of breast cancer, and compare these between metropolitan and non-metropolitan patients. Over 3500 women newly diagnosed with breast cancer are participating, with more than 45 per cent of these women living outside the Brisbane metropolitan area.
- Some early results show that just under half the women in the study had their breast cancer detected through a routine screening examination and about 47% had detected their own breast cancer. The time between the first symptoms of breast cancer, or a positive mammogram, to the time a diagnosis of breast cancer is confirmed is significantly longer for women who live in rural and regional Queensland.
- The study has shown that women in rural and regional areas seem to have fewer treatment options, highlighting the need to develop and evaluate tailored resources to assist women to understand all treatment choices that are available to them, no matter where they live.



# Childhood cancer

Ongoing development and management of the Australian Paediatric Cancer Registry (APCR) is a major undertaking for the Viertel Cancer Research Centre. The APCR is Australia's only national register of childhood cancer, containing almost 20,000 individual records. It is one of only a few national childhood cancer registries in the world.

## **Australian Paediatric Cancer Registry (APCR)**

- In 2014, we released the latest summary reports of childhood cancer occurrence and survival in Australia. This information is vital for paediatric specialists, patients and their families. Work has begun to develop an online system that will make key cancer statistics from the APCR freely available to clinicians and the general public on an ongoing basis.
- New information on the epidemiology and outcomes for acute myeloid leukaemia among children in Australia were presented to the Australian and New Zealand Children's Haematology/Oncology Group (ANZCHOG) annual conference in Sydney, highlighting that acute myeloid leukaemia continues to cause a disproportionate number of childhood cancer deaths and has a significant impact on paediatric health services.
- Representatives from the Viertel Cancer Research Centre were invited to join two international panels on childhood cancer to (1) identify key research priorities and potential international collaborations in childhood cancer and (2) develop the first consensus-based classification system for the collection of paediatric cancer stage in cancer registries. These two initiatives are ongoing and the Centre is delighted to be involved in international leadership in this field.







# Inequalities in cancer outcomes



The Cancer Research Centre this year has continued its strategic program of work focussed on improving knowledge and understanding of inequalities in cancer outcomes between metropolitan and non-metropolitan Queensland. This includes an ongoing longitudinal cohort study comparing the management and outcomes from breast cancer in urban and regional areas and research to understand differences in prostate cancer outcomes by region.

- Methodology for the analysis of spatial data is evolving rapidly. This year, in partnership with national and international research institutions working in the field of spatial statistical analysis, we explored the manner in which the geographical variations in cancer incidence and survival in Queensland are changing over time. We compared two common methods of analysing geographical variation in cancer survival – multilevel models and Bayesian spatial models – and found that while the main estimates varied only slightly, the choice of approach depends on the available data structure and importance of correlations between small areas.
- We have continued to develop new statistical methods to appropriately deal with the small numbers and inconsistencies between adjacent geographical areas, and to assess the changes in spatial variation in cancer outcomes over time.
- In collaboration with researchers in New South Wales, we reported that men diagnosed with prostate cancer while living in rural and remote areas of that state had poorer survival, even after accounting for spread of disease at diagnosis. As part of a national collaborative study, we found that cancer survival continues to be significantly lower for Indigenous than for non-Indigenous Australians.
- While we have built evidence about geographical inequalities in cancer outcomes, significant gaps in knowledge remain. We still have limited understanding of why such large geographic inequalities exist or how to address them. In the coming year, we will be developing a significant academic partnership with The University of Southern Queensland to address the reasons underlying regional and socio-demographic differences in cancer survival.

# Descriptive epidemiology of cancer

By describing the patterns of cancer across Queensland and beyond, the Descriptive Epidemiology Research Program seeks to inform the community, researchers, clinicians and other stakeholders on the key existing and emerging priorities in Queensland and beyond, with a particular focus on understanding how cancer-related outcomes depend on where people live.

- Analysis of data from the Queensland Cancer Registry and BreastScreen Queensland showed that women diagnosed with breast cancer during the time interval between routine mammograms were 59% more likely to die from their cancer than those with a screen-detected breast cancer. The results highlight the need for Queensland women everywhere to continue to participate in routine screening and carefully monitor their breast health between screenings.
- Further analysis utilising data from the Queensland Cancer Registry linked with Queensland hospital administration data found that prophylactic hysterectomy combined with removal of both ovaries halved the risk of death within 10 years of diagnosis among premenopausal women with breast cancer. Replication of the results in clinical trials is required, but this finding could eventually lead to important changes in current treatment recommendations.
- This year, we consolidated our national and international collaborations in cancer epidemiology with researchers from Ireland, United States, England and China, and undertook a number of analyses of the epidemiology of cancer in our region. We reported that breast cancer was the most common type of cancer among females in the Asia-Pacific region and the fourth most common cause of cancer-related death. Although Australia and New Zealand have the highest incidence rates in the region, rapid rises in recent years were observed in several Asian countries, and these are expected to continue.
- A comparison of oropharyngeal and oral cavity squamous cell cancer incidence and trends in New Zealand and Queensland found that incidence rates were 50-70% higher in Queensland. This descriptive study confirmed a substantial increase in oropharyngeal cancer in the two regions while rates of oral cavity cancer were stable or reducing. These different aetiologies have important clinical and public health implications, including the administration of the human papilloma virus (HPV) vaccination.







# Community engagement

**Our community engagement research program aims to develop understanding of the important role of volunteering, fundraising and other forms of community-based support and action to prevent and reduce the impact of cancer.**

Our volunteers contribute their time generously to a range of activities that are critical to the Cancer Council Queensland's cancer control efforts including peer support, prevention programs, research participation, and fundraising. There are key things we need to understand about our volunteers to ensure that now and in the future, people who volunteer for Cancer Council Queensland have the best experience possible.

- This year we published the results of a state-wide, cross-sectional survey of 340 Relay For Life (RFL) Team Captains, examining their motivations, experiences and future plans to support the event. Overall, we found that RFL volunteers who were more satisfied with their experience, felt a strong sense of loyalty and connection to CCQ and its values and experienced more support from family and friends were more likely to attend RFL in future. Motives for volunteering for new RFL volunteers included socialising and enjoyment, whereas providing financial support to CCQ motivated more experienced RFL volunteers. Based on this work, we have developed a world-first theoretical model to explain episodic volunteering which we will go on to test in future research.
- In-depth face-to-face or telephone interviews have been conducted with a sample of CCQ's long-serving volunteers from around the state. Results are now being analysed to help us to understand how these people developed a life-long commitment to volunteering for cancer control.
- In other research, we interviewed 15 newly recruited Breakthrough campaigners about their face-to-face fundraising motivations and experiences, revealing common themes including that face-to-face fundraisers are attracted to this role through their social networks, by the opportunity to help others or make a difference in the community, or to contribute to the cause given a personal experience with cancer.





# Collaborations and partnerships

**The Viertel Cancer Research Centre was privileged to welcome noted visiting national and international visitors including Professor Chris Nelson from Memorial Sloan Kettering Cancer Center in New York, Professor Rob Newton and Daniel Galvão from Edith Cowan University in Western Australia, and Assistant Professor Mark Lazenby from Yale University in Connecticut.**

At two symposia in Brisbane and two masterclasses at the Union for International Cancer Control World Cancer Congress in Melbourne, these experts discussed the cognitive impacts of cancer treatments, exercise as medicine for cancer patients, and peer support and distress screening in oncology care.

The Centre enjoyed collaborations with Edith Cowan University in Perth, Griffith University, Prostate Cancer Foundation of Australia, Australian and New Zealand Urogenital and Prostate Cancer Trials Group, Northern Section of the Urological Society of Australia and New Zealand, Yale University, Gold Coast University Hospital, and the University of Virginia.



# Appendices



# Appendices A

## Publications

1. Chambers SK, Zajdlewicz L, Youlden DR, Holland JC, Dunn J. The validity of the distress thermometer in prostate cancer populations. *Psycho-Oncology* 2014; 23(2): 195-203.
2. Chambers SK, Hutchison S, Clutton S, Dunn J. Intervening to Improve Psychological Outcomes after Cancer: What Is Known and Where Next? *Australian Psychologist*. 2014. 49: 96-103.
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6. Chambers SK, Occhipinti S, Schover L, Nielsen L, Zajdlewicz L, Clutton S, Halford K, Gardiner RA, Dunn J. (in submission). A randomised controlled trial of a couples-based sexuality intervention for men with localised prostate cancer and their female partners. *Psycho-Oncology*. 2014. E-pub 8 December.
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# Appendices B

## Grants & Awards

### Research grants held during 2014

**Chambers SK, Dunn J, Ritterband L, Aitken J, Scuffham P, Morris B, Baade P & Youl P.**

Improving access to psychological services for people with cancer: A randomised controlled trial of an interactive web-based intervention (CancerCope). NHMRC Partnerships Grant #1056756 (2013-17: \$587,270)

**Chambers S, Smith D, Berry M, Lepore S, Foley E, Occhipinti S, Frydenberg M, Gardiner R.**

A randomised controlled trial of a mindfulness intervention for men with advanced prostate cancer. NHMRC Grant # APP1024989 (2011-15: \$706,243)

**Youl P, Baade P, Garvey G, Aitken J.**

Addressing variations in outcomes for non-metropolitan women with breast cancer. Cancer Australia (2014-15: \$122,425)

### Research Fellowships

**Youl P.**

The impact of geographical location and socioeconomics on outcomes from breast cancer. NHMRC Early Career Fellowship #1054038 (2013-16: \$299,564)

**Baade P.**

How and why do cancer outcomes depend on where you live? NHMRC Career Development Fellowship (2011-14: \$424,920)

### Other collaborative research grants

**Jordan S, Pandeya N, Bain C, Youl P, Baade P.**

Understanding causes of the rising incidence of thyroid cancer – What can mutations in the BRAF oncogene tell us about causes and diagnostic pathways for thyroid cancer? NHMRC Grant #104773 (2013-15: \$584,521)

**Kimlin M, Whiteman D, Lucas R, Sinclair C, Neale R, Ebeling P, Youl P, Gordon L, Janda M.**

Sun Exposure and Health. NHMRC Centre of Research Excellence Grant #1001456 (2011-15: \$2,500,000)



# Appendices C

## Scientific Presentations 2014

### **Aitken J**

*Using cancer registry data to improve cancer outcomes: The Atlas of Cancer in Queensland*

International Association of Cancer Registries Conference, July 2014, Ottawa, Canada

### **Aitken J**

*The Australian Paediatric Cancer Registry*

46th Congress of the International Society of Paediatric Oncology, October 2014, Toronto, Canada

### **Aitken J**

*Update from The Australian Paediatric Cancer Registry*

Australian Association of Cancer Registries Annual Scientific Meeting, September 2014, Melbourne

### **Aitken J**

*Recent news on the epidemiology of melanoma in Queensland*

4th Annual University of Queensland Skin Cancer Conference, August 2014, Sunshine Coast

### **Aitken J**

*Understanding differences in cancer outcomes in Queensland: The Atlas of Cancer in Queensland*

Queensland Cancer Clinical Network Forum, July 2014, Brisbane

### **Aitken J**

*The Australian Paediatric Cancer Registry*

7th General Assembly of the Asia Pacific Organisation for Cancer Prevention, March 2014, Taipei, Taiwan

### **Chambers S**

*Proscare: A psychological care model for men with prostate cancer*

26th Annual Scientific meeting for Trans Tasman Radiation Oncology Group, April 2014, Mudjimba

### **Chambers S**

*Proscare: A psychological care model for men with prostate cancer*

7th General Assembly of the Asia Pacific Organisation for Cancer Prevention, March 2014, Taipei, Taiwan

### **Chambers S**

*A program of Australian survivorship research in prostate cancer*

Faculty of Medicine in Psychiatry Grand Rounds, University of Ferrara, February 2014, Ferrara, Italy

### **Chambers S**

*Defining young in the context of prostate cancer*

American Psycho-Oncology Society 11th Annual conference, February 2014, Tampa, USA

### **Chambers S**

*A program of Australian survivorship research in prostate cancer*

Psychiatry Ground Rounds, Memorial Sloan Kettering Cancer Center, February 2014, New York, USA

### **Cramb S**

*As time goes by: exploring cancer survival differences across small areas and time periods.*

UICC World Cancer Congress, December 2014, Melbourne

**Cramb S**

Late cancer diagnosis: a multivariate smoothing approach

Bayes on the Beach, November 2014, Gold Coast

**Cramb S**

The Editor's Perspective: Publishing, Reviewing and Joining the Ranks

IMS-ASC, July 2014, Sydney

**Cramb S**

Estimating relative survival using Bayesian flexible parametric models with spatial frailties

IMS-ASC, July 2014, Sydney

**Dunn J**

Cancer Burden in the Asia Pacific Region – Trends and Future Challenges

9th International Conference of Anticancer Research, October 2014, Sithonia, Greece

**Dunn J**

Role of Civil Society Organisations in Cancer Control

9th International Conference of Anticancer Research, October 2014, Sithonia, Greece

**Dunn J**

Integrating Psychosocial Oncology into Mainstream Cancer Care: From Research to Action

16th World Congress of Psycho-Oncology and Psychosocial Academy, October 2014, Lisbon, Portugal

**Dunn J**

A Randomised Controlled Trial of Psychological Intervention for High Distress Cancer Patients and Carers

APOS 11th Annual Conference, February 2014, Florida, USA

**Dunn J**

Translating Research in Cancer Control to the Community

Memorial Sloan-Kettering Cancer Center, February 2014, New York, USA

**Hyde M**

Translating distress screening into cancer care: Phase 1 of an implementation case study at Gold Coast University Hospital

Gold Coast Health & Medical Research Conference, December 2014, Gold Coast

**Hyde M**

Relay For Life...or a few years? Episodic volunteer retention in the cancer control context

UICC World Cancer Congress, December 2014, Melbourne

**McDowall R**

Baseline characteristics of the participants in a telephone-delivered mindfulness intervention for men with advanced prostate cancer

15th Asia-Pacific Prostate Cancer Conference, August 2014, Melbourne

**McDowall R**

Baseline characteristics of the participants in a telephone-delivered mindfulness intervention for men with advanced prostate cancer

ANZUP Annual Scientific Meeting, July 2014, Melbourne

**Youlden D**

Multiple primary cancers associated with skin cancer: what, when, where and why

4th Annual University of Queensland Skin Cancer Conference, August 2014, Sunshine Coast

**Zajdlewicz L**

Psychological distress and advanced prostate cancer

15th Asia-Pacific Prostate Cancer Conference, August 2014, Melbourne

**Zajdlewicz L**

Psychological distress and advanced prostate cancer

ANZUP Annual Scientific Meeting, July 2014, Melbourne

**Zajdlewicz L**

The 1000 Survivor Study

UICC World Cancer Congress, December 2014, Melbourne

# Appendices D

## Professional & Community Activities

### **Expert advisory committees, scientific panels & working groups**

#### **ANZUP Cancer Trials Group, Quality of Life Committee**

#### **Asia Pacific Organisation for Cancer Prevention**

- President
- Regional Chairperson Australasia
- Executive Committee member

#### **Australasian Association of Cancer Registries, Executive Committee**

#### **Cancer Australia**

- Communications Advisory Committee, Chair
- Expert Reference Group, Healthy Living Interactive Tool

#### **Cancer Council Australia**

- CEO Forum
- National Cancer Research Grants Steering Committee

#### **Centre for Prostate Cancer Survivorship Research**

- Lead Advisory Group member

#### **Co-operative Research Centre for Spatial Information (CRCSI) Health Program, Program Board**

#### **German National Skin Cancer Screening Program Steering Committee**

#### **International Association of Cancer Registries**

- Board member
- Elected representative for Oceania

#### **International Psycho-Oncology Society**

- Director and Board member
- Board Secretary

#### **International Population Data for Childhood Cancer Steering Committee**

#### **Queensland Cancer Control Safety and Quality Partnership**

#### **Queensland University of Technology: Faculty of Health Advisory Committee**

#### **Union for International Cancer Control (UICC)**

- Director and Board member
- Asia Pacific Cancer Society Training Grant Program (APCASOT) Chair
- Reach to Recovery International Breast Cancer Support Service Chair
- World Leaders Forum member



### **Conference organising committees**

- Host Committee, 2014 Union for International Cancer Control World Cancer Congress, Australia 2014
- Organising Committee , IPOS/APOS 17th World Congress of Psycho-Oncology jointly with the 12th Annual Conference of the American Psychosocial Oncology Society World Congress, United States, 2015
- Chair of the Board of Management Committee, 18th Reach to Recovery International breast Cancer Support Conference, Beijing, China 2015
- Chair, Executive Organising Committee, 8th General Assembly and International Conference of the Asian Pacific Organisation for Cancer Prevention (APOCP8), Australia 2016
- Co-Chair, World Congress on Melanoma, Australia 2017

### **Professional memberships**

Andrology Australia  
Australasian Epidemiological Association  
Australia and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP)  
Australian Psychological Society  
Australian Society for Medical Research  
Clinical Oncological Society of Australasia (COSA)  
International Epidemiology Association  
International Psycho-Oncology Society (IPOS)  
Multinational Association of Supportive Care in Cancer  
Psychologists Board of Australia  
Psycho-Oncology Co-operative Research Group (PoCoG)  
Queensland Epidemiology Group  
Urological Society of Australia and New Zealand

### **Reviews and editorial activities**

#### **Editorial boards and panels**

Australasia – Asia Pacific Journal of Cancer Prevention  
European Journal of Cancer Care  
Psycho-Oncology  
Frontiers in Public Health

## Reviews for journals

American Journal of Clinical Dermatology  
American Journal of Preventive Medicine  
Annals of Behavioural Medicine  
Annals of Oncology  
Archives of Dermatological Research  
Australian Family Physician  
Australian and New Zealand Journal of Public Health  
Australasian Journal of Dermatology  
Australian Journal of Psychology  
BioPsychoSocial Medicine  
BMC Cancer  
BMC Dermatology  
BMC Family Practice  
BMC Public Health  
BMJ Open  
BMJ Supportive & Palliative Care  
Breast Cancer Research and Treatment  
British Journal of Cancer  
British Journal of Dermatology  
British Journal of Health Psychology  
British Journal of Sports Medicine  
British Journal of Urology International  
Cancer Causes and Control  
Cancer Epidemiology (formerly Cancer Detection and Prevention)  
Cancer Epidemiology Biomarkers and Prevention  
Clinical and Experimental Dermatology  
Dermatology  
European Journal of Dermatology  
European Journal of Cancer Care  
Frontiers in Public Health  
Health Education Research  
Health Promotion Journal of Australia  
Health Psychology  
JAMA Dermatology  
Journal of Applied Social Psychology  
Journal of European Academy of Dermatology  
Venereology  
Journal of Health Psychology  
Journal of Psychosomatic Research  
Journal of Surgery  
Leukemia and Lymphoma

Melanoma Management  
Nature Scientific Reports  
Netherlands Organisation for Scientific Research  
Patient Education and Counselling  
PLOSOne  
Preventive Medicine  
Psychology & Health  
Psychology, Health and Medicine  
Psycho-Oncology  
Quality of Life Research  
Social Science & Medicine  
Supportive Care in Cancer

## Reviews for funding bodies

Cancer Council Western Australia Epidemiology Initiative  
Cancer Research UK  
Hong Kong SAR Government  
Icelander Center for Research  
International Cancer Research Education Technology Transfer Program, UICC  
National Health and Medical Research Council  
Queensland Nursing Council  
Victorian Cancer Agency







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