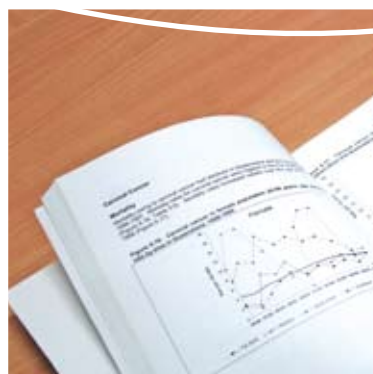


Viertel Centre for Research in **Cancer Control**

advances to the future



2006 Annual Report

Viertel Centre for Research in Cancer Control

The generosity of Queenslanders and the Sylvia and Charles Viertel Charitable Foundation makes this research possible

The Queensland Cancer Fund is an independent, community-based charity and is not government funded

For information and support contact our Cancer Helpline on 13 11 20, Monday to Friday 8am to 8pm





Contents



Charles Viertel
1902 - 1992

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

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

The Queensland Cancer Fund gratefully acknowledges the support of the Sylvia and Charles Viertel Charitable Foundation and its Chairman Mr George Curphey.

Message from the Executive Director	2	Research by Post-Graduate Students.....	14
Report from the Directors.....	3	The experience of gynaecological cancer survivors: Supportive care needs and use	14
8th Biennial Behavioural Research in Cancer Control Conference.....	4	Quality of life and genetic markers in men with prostate cancer	14
Research in Profile	5	The effect of evaluation type on the quality of men's preferences for prostate specific antigen screening ..	14
Descriptive Epidemiology Research Program.....	5	Physical activity and quality of life following a diagnosis of colorectal cancer.....	14
The Queensland Cancer Risk Study	5	Decision-making about testing for the early detection of prostate cancer for men with a family history	15
Patterns of Cancer Care Evaluation	5	Detection and diagnosis of skin cancer in South East Queensland: The role of primary care skin cancer clinics and general practice.....	15
Health status of long-term cancer survivors	6	Queensland Co-operative Oncology Group	16
Occupational Intelligent Database Exposure Assessment System	6	Staff Members and Associates during 2006	17
Patterns of diagnosis and treatment of ovarian cancer in Queensland	6	Publications: 2006	18
The Queensland Pancreatic Cancer Study	7	Reports	18
Trends in incidence and risk factors for testicular cancer.....	7	Peer-reviewed Publications	18
Survivorship and Quality of Life Research Program ..	8	Books	20
Colorectal Cancer and Quality of Life	8	Conference Presentations	20
Changing Gears - A peer support adventure for young breast cancer survivors.....	8	Research Grants and Awards	24
Cognitive and psychosocial functioning, and support needs of those affected by brain tumour	9	Funding to Viertel Centre for Research in Cancer Control.....	24
Evaluation and Development Program	9	Other Collaborative Research Grants.....	24
Community attitudes to passive smoking in private places	9	Professional and Community Activities	25
Financial strain after a diagnosis of cancer: Review of the Financial Assistance Program	9	Committee Memberships	25
The HELP Project.....	10	The Cancer Council Australia	25
Pool Cool pilot project	10	International Union Against Cancer	25
Psychosocial care needs of people diagnosed with cancer in The Townsville Hospital	10	Queensland Health.....	25
Prostate Cancer Research Program.....	11	Conference Organising Committees	25
The ProsCan Program: Patterns of care and health-related outcomes for men newly diagnosed with prostate cancer in Queensland.....	11	Expert Advisory Committees.....	25
The ProsCan Program: Development and evaluation of a new support program for men diagnosed with prostate cancer	12	Scientific Panels and Working Groups	25
The early detection of prostate cancer in general practice: a GP training program supporting informed choice.....	12	Reviews and Editorial Activities.....	26
Skin Cancer Research Program	13	Editorial Panels	26
Investigating the use of the utility of primary care skin cancer clinics in Queensland.....	13	Reviews for Journals.....	26
Melanoma diagnosis and skin screening in Queensland	13	Reviews for Funding Bodies	26
		Academic Appointments.....	27
		Post-Graduate Students	27

Message from the Executive Director



More than 19,000 Queenslanders were diagnosed with cancer in 2004. This equates to one in three people being diagnosed with cancer in their lifetime. While the incidence of cancer overall has remained relatively stable over the past five years, encouragingly mortality from cancer has decreased by approximately 6 per cent over the same period. However, despite these positive signs, in 2004 more than 7000 Queenslanders lost their lives due to cancer, demonstrating that significantly more work needs to be conducted in the area of cancer control in our state.

To this end the Viertel Centre for Research in Cancer Control has continued to make a key contribution to the cancer research effort, an effort that will have a direct impact on the lives of those affected by cancer. The original vision for the Centre was to build a collaborative epidemiology and psycho-oncology research program to enhance and develop current knowledge and practice in cancer control. This vision has been achieved. Since its inception, the Centre has consistently produced high quality academic outputs that have translated readily into the cancer control programs of the Queensland Cancer Fund and other cancer control groups across Australia. As an example, work conducted by the Centre in 2005 identified the problem of decreased survival from cancer for those living in rural and remote areas. Following on from this seminal work the Centre is now conducting large scale studies in colorectal, prostate and other cancers to better understand and, from this, address the reasons for these differences.

Similarly, an important part of our research effort has been to examine the causes, prevention and early detection of skin cancer, and in particular melanoma. Each year, more than 2300 Queenslanders are diagnosed with melanoma, the most lethal form of skin cancer, and deaths from melanoma are continuing to rise. While it is well-known that the unusually high rates of skin cancer in Queensland are due to our high sun exposure, recent research conducted by the Centre has found that over two-thirds of Queenslanders under the age of 40 reported they were sunburnt two or more times within the past 12 months. Additionally, more than one-third of those under 40 do not practice any sun protective behaviours when outdoors. This research provides us with a valuable platform to further develop and refine our SunSmart messages.

This research could not be carried out without the generous financial support of our community, the many individuals who support our work tirelessly, and the ongoing foundation support of the Sylvia and Charles Viertel Charitable Foundation. Together we can make a real difference in our community. We thank you.

A final note that from May 2007, the Queensland Cancer Fund has continued its vital work in research, patient support and education under a new name, The Cancer Council Queensland. I commend the 2006 Annual Report of the Viertel Centre for Research in Cancer Control to you.

Jeff Dunn PhD
Executive Director
Queensland Cancer Fund

Adjunct Professor, School of Social Science,
University of Queensland.
Associate Professor, School of Population Health,
University of Queensland.

Report from the Directors



2006 was a productive year for the Viertel Centre for Research in Cancer Control, a year which has seen the expansion of our research programs and a continuing emphasis on the translation of research results into real benefits for Queenslanders. The Viertel Centre for Research in Cancer Control, as part of the Queensland Cancer Fund, is a National Health and Medical Research Council accredited research institute. The Centre, incorporating an Epidemiology Unit and a Psycho-Oncology Research Unit, conducts collaborative research in cancer control with a focus on issues of importance to the community. Research programs across these units include: Descriptive Epidemiology, Survivorship and Quality of Life, Evaluation and Development, Prostate Cancer Research and Skin Cancer Research. Our goals are to improve our understanding of how to prevent cancer, improve the earlier diagnosis of cancer, improve survival after cancer treatment, and understand better how to meet the support needs of people diagnosed with cancer and their carers. Armed with the scientific evidence from studies conducted here in Queensland, an important part of our role is to put that knowledge to practical use through improved clinical practice, public health interventions and improved behaviour to reduce cancer risk.

The analysis of routinely collected data from the Queensland Cancer Registry and other population-based sources provides important information about the patterns of cancer in Queensland and geographical differences in cancer outcomes that might point to inequalities in cancer services and support in some areas. Building on the previous work on urban/rural differences for prostate cancer and melanoma, in 2006 we began an investigation of the reasons for the lower survival from colorectal cancer in regional and remote areas of Queensland compared to the south-east corner. We completed a study of the health of long-term cancer survivors and began a comprehensive study of lung cancer in Queensland, again highlighting geographical differences.

The early detection and management of skin cancer continues to be a vital area of research. An important investigation in 2006 looked at the ability of Queensland general practitioners and doctors within skin cancer clinics to identify and diagnose skin cancer. The results from this study will, for the first time, provide evidence we need to advise the public where to go if they are concerned about a skin spot. In regard to sun protection and skin cancer prevention, the Viertel Centre in collaboration with the Community Services department has initiated the Pool Cool study, a

pilot of a sun-safety education program designed for use at swimming pools. The study's main objective is to increase awareness of sun protection practices among children five to ten years, and to provide motivation to follow them.

The final report of the Queensland Cancer Risk Study was released during 2006, giving for the first time a comprehensive overview of cancer risk factors, including lifestyle and behavioural factors, in the Queensland population. This study involved more than 10,000 participants throughout the state, and looked at risk factors including smoking, alcohol and diet, physical activity, sun exposure and obesity, as well as cancer screening behaviour and knowledge of and attitudes towards cancer in our community. Key findings showed that a surprising 70 per cent of Queenslanders reported being sunburned and 12 per cent reported attempting to get a suntan in the past year. More than half the participants were overweight and less than half consumed the recommended levels of fruit and vegetables. These and other results will be invaluable in assisting the Queensland Cancer Fund to develop targeted cancer prevention programs and to refine our existing programs for improved effectiveness.

Among a suite of projects focusing on the psychosocial and support needs of cancer patients, a major ongoing research program is the 'Prostate cancer supportive care and patient outcomes project: ProsCan'. This project aims to describe the management of prostate cancer with a particular emphasis on patterns of care and psychological and functional outcomes for men diagnosed with prostate cancer in Queensland. As part of this project, more than 550 participants are involved in a trial of a supportive care intervention designed to help them through their diagnosis and treatment. Preliminary analyses indicate that the intervention is effective in reducing uncertainty and distress about treatment decisions for men recently diagnosed with prostate cancer.

Report from the Directors (cont.)

The Colorectal Cancer and Quality of Life study is documenting the course of recovery and problems faced in coming to terms with a diagnosis of colorectal cancer. The study is examining in detail the factors that improve recovery and quality of life, including support and information from health care providers, knowledge and uptake of support care services and stress and coping factors. Early results indicate that while many patients cope well with diagnosis, treatment and recovery, others suffer significant distress and may benefit from enhanced support. In the coming year, we plan to develop and test a rehabilitation program to assist these patients.

A new project was undertaken in 2006 to examine the psychosocial support needs, barriers to support and psychosocial outcomes of people seen through the Townsville Hospital Cancer Centre, a major regional treatment centre for cancer in North Queensland. The results of this initiative will help us identify the additional support needs of people diagnosed with cancer in regional Queensland, leading to improved support programs in those areas.

The following pages highlight these and other projects in more detail, and outline our contribution to national and international cancer control research through our 54 published scientific papers and competitively-awarded research grants.

We would like to thank the staff of the Viertel Centre for their dedication to the highest quality research, our research collaborators and partners, the volunteers who assist us so well in the work of the Centre and the cancer patients and their families who have provided their time and effort to participate in our research.

Joanne Aitken PhD
Director
Epidemiology and Cancer Registries
 Associate Professor, School of Population Health,
 University of Queensland.
 Adjunct Associate Professor, School of Public Health,
 Queensland University of Technology.

Suzanne Steginga PhD
Director
Community Services and Psycho-Oncology Research
 Adjunct Associate Professor, School of Psychology,
 Griffith University.

8th Biennial Behavioural Research in Cancer Control Conference

The Viertel Centre for Research in Cancer Control's Psycho-Oncology Unit was proud to host the 8th Biennial Behavioural Research in Cancer Control (BRCC) Conference in September 2006. The conference was supported by The Cancer Council Australia through its Public Health Committee and participants included national and international behavioural scientists, program staff, evaluation staff and management working on cancer control issues in Australia.

Two international keynote speakers presented at the conference:

Professor Neil Weinstein from the Arizona Cancer Centre presented 'Challenges in Understanding Risk Perception and Risk Communication'. Professor Weinstein's interests focus on risk perception, risk communication, theories of health behaviour and the connections among these topics. Dr Weinstein was the first behavioural scientist appointed to the US Armed Forces Epidemiological Board and serves as the Director of the Theories Project of the National Cancer Institute (US).

Professor Rob Sanson-Fisher presented 'Problems with the use of randomised controlled trials for the evaluation of complex interventions: Possible alternatives'. Professor Sanson-Fisher is internationally recognised as a leader in health behavioural research and successfully combines behavioural and public health approaches to health promotion, health service evaluation and cancer control. He is a consultant to the United States Centers for Disease Control and Prevention and National Institutes of Health and currently serves as an external consultant to the Australian National Institute of Clinical Studies.

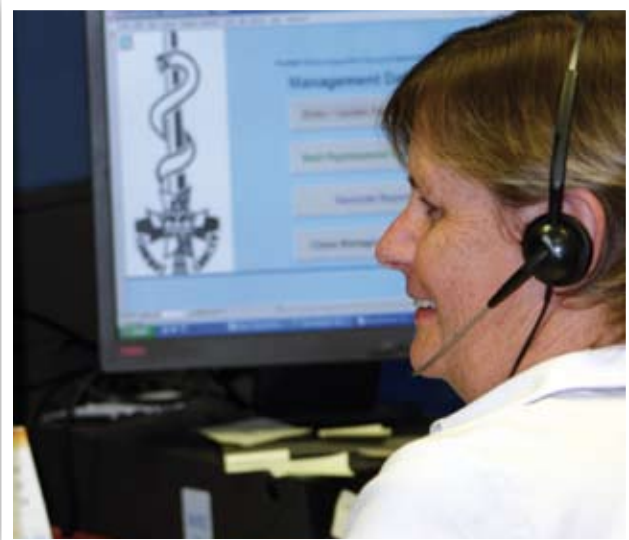


Research in Profile

Descriptive Epidemiology Research Program

The Descriptive Epidemiology Research Program analyses population-based data to provide information on patterns of cancer in Queensland, including cancer incidence, survival, mortality, prevalence and treatment, and geographical differentials in cancer survival.

The Queensland Cancer Risk Study



The Queensland Cancer Risk Study is the first comprehensive, state-wide survey of cancer risk factors, cancer screening activity, and knowledge and attitudes towards cancer in Queensland. There were more than 10,000 residents of Queensland who completed a telephone interview.

One of the objectives of the study was to describe the distribution of behavioural risk factors for cancer in the Queensland population, including smoking, alcohol consumption, diet, physical inactivity, overweight, sunburn, sun protection and solarium use. The summary report of results was published in 2006, and showed that, overall, the prevalence of risk factors for cancer among Queensland adults is high. Many cancer risk behaviours are more prevalent among men, those aged 20-39 years and those living in remote/very remote areas of Queensland. For example, when compared to women, men are more likely to smoke on a daily basis, drink alcohol regularly, drink alcohol in excessive quantities, eat less than two serves of fruit a day, eat less than five serves of vegetables a day, be overweight or obese and to have been sunburned or severely sunburned at least once in the past 12 months. In contrast, women are more likely than men to be inactive and to use solaria.

Analysis and reporting of this large body of information is ongoing. Key findings from this study showed just over half (54 per cent) of Queenslanders are at least moderately confident that there will be cures for the most common forms of cancer within their lifetimes; most Queenslanders (97 per cent) believe that treating cancer in the early stages increases a person's chance of survival; most Queenslanders (98 per cent) are able to name one or more actions they can take to reduce their risk of getting cancer with the most common being "protection from sun exposure" and "eating well"; almost one quarter (24 per cent) of Queenslanders who had not had cancer thought they had a "high" to "certain" risk of getting skin cancer and 14.6 per cent thought they had a high or certain risk of getting a cancer other than skin cancer. Results from this study will help develop new cancer prevention programs and refine existing programs.

Steering Committee: Ian Frazer, Ross Young, Brian Cole, Jeff Dunn.
Project Committee: Joanne Aitken, Beth Newman (Queensland University of Technology), David Whiteman (Queensland Institute of Medical Research), Elizabeth Eakin (University of Queensland).
Staff Involved: Carla Rogers, Tracey DiSipio, Lin Fritschi.
Collaborators: Neville Owen, Wayne Hall.
Contact: carlarogers@cancerqld.org.au

Patterns of Cancer Care Evaluation

A new study, Patterns of Cancer Care Evaluation, began in 2006. The traditional method of determining which of the various cancer treatments are being used to treat cancer patients is to individually extract information from medical records. While this method is the gold standard, it is extremely time-consuming and expensive. This study is utilising data from routine collections such as the Queensland Cancer Registry and Queensland Hospital Admitted Patient Data Collection to assess cancer treatment services in Queensland, and how they compare against the established clinical guidelines for the surgical management of cancer.

The research will concentrate on systems issues and health inequalities, particularly the delivery of cancer services to patients living in rural areas. We know that for many cancers rural residents have higher case fatality rates than their urban counterparts. Variation in treatment is potentially an important contributing factor. Until now, our ability to quantify these treatment differentials in Queensland has been limited. We hope that the methods we are using in this study, if they prove successful, may be used in the future on a routine basis to assess cancer treatment services across the state.

Research in Profile (cont.)

The results of this study will have important policy implications regarding the quality of cancer treatment care in Queensland, particularly in rural and remote areas and, for example, whether hospitals in the provincial cities should be providing comprehensive cancer services or referring patients to tertiary cancer centres.

Funded by: Golden Casket Foundation.

Staff involved: Peter Baade, Joanne Aitken, Lin Fritschi, Bridie Thompson

Collaborators: Michael Coory (Queensland Health), Euan Walpole (Princess Alexandra Hospital).

Contact: bridie.thompson@cancerqld.org.au

Health status of long-term cancer survivors

Despite considerable knowledge about the effect of cancer during the early stages of treatment and survivorship, understanding the longer-term effect of cancer has only recently become a priority. This study is investigating the health implications of longer-term cancer survivorship in an Australian, population-based sample.

Using the Australian National Health Survey, 968 longer-term cancer survivors were identified, along with 5808 age- and sex-matched respondents without a history of cancer. Four measures of health effect were compared (quality of life, health status, days out of role and mental well-being). Compared with respondents without cancer, long-term cancer survivors reported significantly lower health status, more days out of usual roles, and lower mental well-being. Their self-reported quality of life was similar to that of the rest of the population. Respondents with other chronic conditions in addition to cancer had significantly worse outcomes. These results support the importance of ongoing surveillance of the growing number of cancer survivors with increased attention to interventions to improve health outcomes.

Staff involved: Danny Youlden, Peter Baade, Lin Fritschi, Marina Reeves.

Collaborators: Jane Heyworth (University of Western Australia), Elizabeth Eakin (University of Queensland), Sheleigh Lawler (University of Queensland).

Contact: peterbaade@cancerqld.org.au

Occupational Intelligent Database Exposure Assessment System

In Australia, about 5000 invasive cancers and 34,000 non-melanoma skin cancers each year are caused by exposure to carcinogens in the workplace. About 1.5 million workers are currently exposed to known carcinogens.

This project aims to improve the retrospective assessment of exposure of workers to chemicals using a combination of human expertise, empirical data and new computing power and capabilities. The Occupational Intelligent Database Exposure Assessment System (OccIDEAS) is the first attempt to use the cutting edge technologies of intelligent databases and artificial neural networks to improve assessment of occupational exposure to chemicals. There are two phases to the project: Phase A is the development of a stand-alone intelligent data management program to make the process of assessing occupational exposures accessible. Phase B is the collection of occupational data from volunteers in order to pilot test and refine each stage of the intelligent database; carry out reliability studies of the exposure assessment; and develop and test the artificial neural networks. The OccIDEAS project will provide researchers with a cost-effective way to study the role of occupation in cancer.

Funded by: National Health and Medical Research Council.

Staff Involved: Jodie Jetann, Lin Fritschi.

Collaborators: Geza Benke (Monash University), Deborah Glass (Monash University), Amitava Datta (University of Western Australia).

This project moved to the University of Western Australia in July 2006.

Patterns of diagnosis and treatment of ovarian cancer in Queensland

While the incidence of ovarian cancer appears to be decreasing in Queensland, it is still the sixth most common cause of cancer death among women. This project is examining detailed incidence trends for ovarian cancer within birth cohorts and will assess patterns of diagnosis and treatment of ovarian cancer across Queensland. We are particularly interested in the percentage of patients currently treated within specialist gynaecological oncology services, as is recommended in the National Health and Medical Research Council's clinical practice guidelines for the management of women with epithelial ovarian cancer, and whether this varies between urban and regional rural areas.

Staff involved: Monika Janda, Peter Baade, Lin Fritschi.

Collaborators: Andreas Obermair (Royal Brisbane and Women's Hospital).

Contact: peterbaade@cancerqld.org.au

The Queensland Pancreatic Cancer Study

Pancreatic cancer is the fourth most common cause of cancer death in developed countries. In Queensland, about 350 people are diagnosed with pancreatic cancer each year and there are a similar number of deaths due to its extraordinarily high case-fatality rate. The five-year survival is less than 5 per cent and the majority of patients die within the first year. Surgery is frequently not possible due to the advanced stage of disease at diagnosis and chemotherapy is largely ineffective. A better understanding of the causes, symptoms and patterns of treatment for pancreatic cancer is essential if we are to develop strategies to reduce the impact of this lethal cancer in the community. This will be one of the first large studies of pancreatic cancer in Australia.

The causes of pancreatic cancer are poorly understood. It has been suggested recently that one possible cause may be the body's response to infection of the stomach with *Helicobacter pylori* (*H. pylori*), the organism now known to be responsible for stomach ulcers. This study will test the hypothesis that infection with *H. pylori* increases the risk of pancreatic cancer among people with a particular genetic makeup. Building on the Viertel Centre for Research in Cancer Control's 2005 study: Geographical differentials in cancer incidence and survival in Queensland, this project will also investigate possible reasons for the lower survival of pancreatic cancer cases in rural and regional versus urban areas.

Staff involved: Rachel Neale, Lauren Krnjacki, Lin Fritschi, Philippe Carrière.

Collaborators: David Whiteman (Queensland Institute of Medical Research), Joanne Young (Queensland Institute of Medical Research), Jonathon Fawcett (Princess Alexandra Hospital), Penny Webb (Queensland Institute of Medical Research).

Contact: research@cancerqld.org.au

Trends in incidence and risk factors for testicular cancer

There is considerable evidence that incidence of testicular cancer has been increasing in developed nations for several decades, particularly in younger men.

The aims of this study are to describe recent and long-term trends in the incidence of testicular cancer using data available from the state/territory cancer registries over the past 20 years, to investigate any variations in the incidence of testicular cancer in different age groups, over certain periods of time, and in different generations, and to identify any geographic differences in the incidence rates and trends by state/territory.

Specific questions being addressed include: What are the risk factors for testicular cancer, especially during foetal development? Are proxy measures for gestational oestrogen excess valid and reliable? What are the genetic factors associated with testicular cancer? Is being a twin a risk for testicular cancer?

As the causes of testicular cancer are largely unknown, these results may guide future hypotheses concerning environmental exposures that may be associated with incidence trends.

Staff involved: Peter Baade, Philippe Carrière, Lin Fritschi, Rachel Neale, Monika Janda.

Collaborators: Mary-Anne Kedda (Queensland University of Technology).

Contact: research@cancerqld.org.au



Research in Profile (cont.)

Survivorship and Quality of Life Research Program

The Survivorship and Quality of Life Research Program undertakes epidemiological and psychosocial research to improve health outcomes for people diagnosed with cancer, their carers and the broader community. This includes assessing patterns of cancer care and patient and carer needs and outcomes; developing and trialling innovative psychosocial and lifestyle interventions for people affected by cancer; and developing and trialling interventions to reduce cancer risk and chronic disease.

Colorectal Cancer and Quality of Life

Colorectal (bowel) cancer is the most common invasive cancer in Australia, with latest figures showing 12,619 new cases and 4686 deaths in 2001. The risk of developing colorectal cancer increases with age, and is greatest in those over 50. As the Australian population ages, the number of people diagnosed with colorectal cancer will rise accordingly. Little is known about the long-term outcomes, needs and concerns of the 60 per cent of patients who survive colorectal cancer.

The Colorectal Cancer and Quality of Life study examines in detail how patients fare after their treatment, and identifies the factors that influence quality of life in the years after diagnosis. More than 2000 people have been recruited to take part in this study, making it the largest colorectal cancer study of its type to be undertaken. Participants complete a telephone interview and a written questionnaire on an annual basis, over five years.

One of the aims of the study is to uncover how lifestyle factors, particularly physical activity, may improve quality of life and reduce the risk of developing other chronic diseases that cancer survivors are prone to, such as heart disease and diabetes.

This information will help the Queensland Cancer Fund to properly design and target lifestyle interventions to help improve the health and well-being of the growing number of colorectal cancer survivors in our community.

Staff involved: Brigid Lynch, Monica West, Joanne Aitken, Jeff Dunn.

Collaborators: Beth Newman (Queensland University of Technology), Barbara Leggett (Royal Brisbane and Women's Hospital), Ken Pakenham (University of Queensland), Neville Owen (University of Queensland).

Contact: brigidlynch@cancerqld.org.au

Changing Gears – A peer support adventure for young breast cancer survivors

Over the past decade there have been an increasing number of high profile events where, in response to the experience of breast cancer, women take on adventure activities to raise awareness and/or funds for breast cancer. These activities range from mountain climb challenges to Dragon Boat racing and offer physical and psychological challenges within a social support group setting. This study aims to investigate this phenomenon, entitled *Changing Gears*, a 1200 kilometre Harley Davidson motorcycle ride from Sydney to Noosa.

The ride was undertaken by 22 young women who have survived breast cancer, ranging in age from 38 to 56 years. Analysis of qualitative data suggests that *Changing Gears* represents a challenging context within which peer support acts as a catalyst for benefit finding. When peer support expectations were met, women reported inner peace, accomplishment, self learning, perspective shift and feeling supported.

Adventure events such as this ride are increasing worldwide. This study demonstrates ways in which these activities can be helpful for breast cancer survivors. It is suggested that such events can be conceptualised as a psychosocial support intervention where women seek to achieve a behavioural goal that involves emotional and physical challenges in an environment of group peer support, open disclosure and discussion of their cancer experience.

Staff Involved: Suzanne Steginga, Danielle Penn, Jeff Dunn.

Collaborators: Meredith Campbell (Amazon Heart), Megan Dwyer (Amazon Heart).

Contact: suzannesteginga@cancerqld.org.au



Tamara Ownsworth and David Shum - School of Psychology and Applied Cognitive Neuroscience Research Centre, Griffith University, Brisbane, Australia with staff in the Viertel Centre.

Cognitive and psychosocial functioning, and support needs of those affected by brain tumour

More than 1100 Australians die each year from malignant brain tumours, and the number of new cases of malignant brain tumours in Australia increased by 22 per cent during 10-year period from 1993 to 2003. Furthermore, survival after five years for both males and females is 24 per cent.

Brain tumours impact significantly on functioning and self-identity, quality of life, relationships, return to work and everyday life; and yet rehabilitation and psychological support interventions are not part of routine care.

Research has focused on survival and physical outcomes, and relatively little is known about the adjustment of people with brain tumours in terms of associated cognitive and emotional changes, or the support that people with brain tumours or their families receive. The study team aims to investigate the cognitive and emotional functioning and support needs of individuals with primary brain tumour and their families, by recruiting 100 adults with brain tumours and their families through the Queensland Cancer Fund's Brain Tumour Support Service and a local neurosurgical practice. A combination of qualitative and quantitative research methods will be used including in-depth semi-structured interviews, standardised questionnaires and neuropsychological functioning tests.

This study will provide much needed detailed and integrated information about the neuropsychological effects, as well as the main adjustment and support issues for individuals with brain tumours and their families. This study will contribute to the development of support services for people with brain tumours and their families through organisations such as the Queensland Cancer Fund and beyond.

Co-funded by: Griffith University.

Staff involved: Anna Hawkes, Louisa Gordon, Suzanne Steginga.

Collaborators: David Shum (Griffith University), Tamara Ownsworth (Griffith University), David Walker (Brizbrain and Spine Centre).

Contact: annahawkes@cancerqld.org.au

Evaluation and Development Program

The Evaluation and Development Program evaluates Queensland Cancer Fund programs and services across all departments and assists in the implementation of recommendations and management of change.

Community attitudes to passive smoking in private places

It is now well established that passive smoking is a direct cause of death and disease, including several types of cancer. Children are particularly vulnerable to passive smoke and exposure can lead to a number of illnesses and diseases in both the unborn and born child. Currently, 40 per cent of Queensland children aged 0-14 live in a home with at least one smoking parent. This exposure to passive smoke results in 21 children under the age of five dying and 380 children under the age of five being hospitalised in Queensland each year.

In collaboration with the University of Queensland, we are undertaking a population survey of community attitudes and behaviours in regard to passive smoking in private places. Data obtained from these surveys will provide the Queensland Cancer Fund with Queensland specific data on current community attitudes and behaviours with regard to passive smoking in private places. This data will inform educational programs, as well as advocacy goals and provide a baseline for ongoing monitoring to further develop these areas.

Staff involved: Jeff Dunn, Suzanne Steginga, Susan Greenbank, Catherine Mahony, Michelle McDowell, Alan Inglis.

Collaborators: Paul Mazerolle (University of Queensland), Stefano Occhipinti (Griffith University).

Contact: susangreenbank@cancerqld.org.au

Financial strain after a diagnosis of cancer: Review of the Financial Assistance Program

The Queensland Cancer Fund's Financial Assistance Program (FAP) provides vital support for cancer patients experiencing financial difficulties as a result of a cancer diagnosis. Feedback indicates that the program is highly valued by clients and health professionals working in cancer care. People with cancer or their carers are referred to the FAP by health professionals in the community, having been previously identified as experiencing financial strain. This project is designed to describe what factors health professionals consider when referring patients to the FAP, describe the profile of applicants to FAP, highlight factors that cause particular financial disadvantage, and provide more detailed information to Queensland Cancer Fund administrators on the operation and equity of this service.

Staff Involved: Louisa Gordon, Anna Hawkes, Leisa Brown, Danielle Penn, Suzanne Steginga.

Contact: annahawkes@cancerqld.org.au

Research in Profile (cont.)

The HELP Project

Over time most people diagnosed with cancer go on to adjust effectively to their changed life circumstances without clinical intervention, however from 30-45 per cent report clinically significant distress. Responsive and well targeted psychosocial care and distress screening is essential to assist people coping with cancer and their families to successfully negotiate and manage these events, and to be well prepared and supported for any future health threats.

There are a number of available valid measures that can be used to screen for distress, but in general these measures require time commitments that can limit their use in practice. Nurse-led telephone advice services (or Helplines) have emerged throughout the world. The Cancer Helpline provides community-based psychosocial assessment and support, followed by referral if necessary, for people with cancer or their carers. The Queensland Cancer Fund has a Cancer Helpline that uses a tiered model of psychosocial intervention for callers with cancer or their carers. The aim of this study is to validate the psychosocial assessment or screening and triage process provided by the Queensland Cancer Fund's Cancer Helpline, by recruiting Helpline callers with cancer or their carers, recording the screening and triage process and then following up the participants to validate the psychosocial assessment conducted by the Helpline.

Participants will be recruited to this study from September to November 2006. Data will be collected at baseline, within one to two weeks, and at three, six and 12 months follow-up. The results of this study will indicate whether the Queensland Cancer Fund's Cancer Helpline effectively screens callers with cancer, or their carers, for distress and then provides appropriate psychosocial care and/or referral to other services to have a positive impact on their lives. To our knowledge, this will be the first study to validate Helpline psychosocial assessment both nationally and internationally.

Staff involved: Anna Hawkes, Suzanne Steginga, Jane Masters, Sandy Hutchison, Leisa Brown, Brigid Hanley.
Contact: annahawkes@cancerqld.org.au

Pool Cool pilot project

There is strong evidence that sun exposure during childhood and adolescence plays an important role in the aetiology of skin cancer. Most skin cancers can be prevented by reducing sun exposure: seeking shade, using sunscreen properly, and wearing protective hats and clothing. Prevention programs for children in outdoor aquatic settings may influence youth, their parents and swimming pool environments. They can achieve significant public health benefits if they are widely disseminated and successfully adopted, maintained and continued.

The main objective of the Queensland Pool Cool pilot study is to increase awareness, motivation and sun protection practices among children aged 5-10 who take swimming lessons, their parents, pool staff (lifeguards, pool managers and swim instructors) and other pool users, such as families or individuals at free or recreational swims. Specific interventions include a swim instructor training module; a 10-lesson curriculum on sun safety that is presented by swim instructors as part of their classes; sun protection messages, educational materials and reminders for children and parents; and provision of environmental supports including policy implementation, sunscreen provision and signage.

This study is based on the Pool Cool program in the United States, which is a sun safety program conducted by the Rollins School of Public Health at Emory University in partnership with the National Recreation and Park Association based on social cognitive theory. Our study differs from the original Pool Cool program in that it is randomised, controlled cohort study with blocked randomisation (using geography and pool size) of skin cancer prevention and active healthy living in outdoor pools in Queensland (rather than injury prevention). Two rural and two urban pools are participating in this pilot, with the co-operation of swim instructors, pool managers and parents. The program is ongoing, with data collection continuing into early 2007.

Staff involved: Susan Greenbank, Lisa Naumann, Danielle Penn.
Collaborators: Karen Glanz (Emory Prevention Research Center, Atlanta).
Contact: susangreenbank@cancerqld.org.au

Psychosocial care needs of people diagnosed with cancer in The Townsville Hospital

The diagnosis and treatment of cancer is a major life crisis that often causes significant emotional distress to patients and their families. Health professionals at The Townsville Hospital and the community have recognised that their patients need psychosocial support, however as it is a regional hospital that services a large geographical area, access to and provision of psychosocial resources is difficult. Research consistently highlights the disparity in psychosocial support care between urban, and regional and rural areas.

There is a critical need to develop a model of psychosocial care that can be widely implemented in Queensland, and in particular a model of care that is acceptable to regional and rural Queensland where resources and specialist services are scarce.

Before such a model can be developed information is needed about the types of support services accessed by cancer patients during their diagnosis; treatment and follow-up medical care in regional Queensland; the barriers these patients experience to receiving care; patients' unmet supportive care needs; and their consequent adjustment outcomes. This project is addressing this question by assessing the psychosocial care experienced by people with cancer treated at The Townsville Hospital from 2004 to 2005. In addition, assessments of unmet supportive care needs and adjustment outcomes of these patients will be conducted.

Townsville has a population of about 160,000 and The Townsville Hospital delivers primary and secondary level medical services for a population of some 300,000. The Townsville Cancer Centre also provides tertiary cancer treatment for the 650,000 people who live in northern Queensland and so is an ideal location for this study. Information gained from this project is vital to underpin the improvement of psychosocial care for cancer patients in northern Queensland, and will inform the development of a model of psychosocial care that is able to be widely implemented throughout regional Queensland.

Staff involved: Megan Ferguson, Lorraine Caesar, Michelle McDowell, Jeff Dunn, Suzanne Steginga.
Collaborators: Will Cairns (The Townsville Hospital, Queensland Health), Alistair Campbell (James Cook University), Melissa Walls (The Townsville Hospital, Queensland Health), Allison Beeden (The Townsville Hospital, Queensland Health).
Contact: meganferguson@cancerqld.org.au



Prostate Cancer Research Program

The Prostate Cancer Research Program undertakes epidemiological and psychosocial research to improve health outcomes for men diagnosed with the disease and their families and reduce the impact of prostate cancer in our community. This includes research on individual and community attitudes and behaviours with regards to the early detection of prostate cancer in the community; and supportive care from diagnosis of cancer onwards for both men and their families.

The ProsCan Program: Patterns of care and health-related outcomes for men newly diagnosed with prostate cancer in Queensland

Prostate cancer is well documented as a major issue in men's health. Most recent figures indicate that one in eight Queensland men are at risk of developing prostate cancer in their lifetime. At present in Queensland, there is little information available on how men are diagnosed and treated for prostate cancer and how their diagnosis and treatment impacts on their lives.

Accordingly, the Viertel Centre for Research in Cancer Control is working in collaboration with urologists in Brisbane, Townsville and Mackay and with the Royal Brisbane, Princess Alexandra, Mater (Brisbane), Greenslopes Private, QEII, Ipswich, Redlands, Redcliffe and Townsville General Hospitals and Mackay Urology Department to recruit 800 men with prostate cancer from across Queensland to take part in the ProsCan program.

The study will follow men with prostate cancer for two years to document their patterns of care and better understand the resulting impact on their health and quality of life. This is one of the first Australian large-scale studies to track men with prostate cancer from the point of diagnosis and to follow them over time.

Staff involved: Suzanne Steginga, Megan Ferguson, Sheila Deuchars, Susan Gledhill, Sylvia Milner, Samantha Clutton, Joanne Aitken.
Collaborators: David Nicol (Princess Alexandra Hospital), Frank Gardiner (Royal Brisbane and Women's Hospital, University of Queensland), David Thomas (Consultant Radiation Oncologist), Spence Broughton (Community Representative), Stefano Occhipinti (Griffith University), The Northern Section of the Urological Society of Australasia.
Contact: meganferguson@cancerqld.org.au

Research in Profile (cont.)

The ProsCan Program: Development and evaluation of a new support program for men diagnosed with prostate cancer

Over the past few years, the Queensland Cancer Fund has undertaken a program of research on the supportive care needs and quality of life outcomes of men with prostate cancer. This research has indicated a need for easily accessed psychosocial interventions targeting support for decision making about medical treatments and helping men to think about their cancer in more positive ways, as well as practical advice on coping with treatment effects.

All men in the ProsCan program who are diagnosed with localised prostate cancer are offered the opportunity to take part in this randomised controlled trial of a support intervention. The ProsCan intervention is a telephone-based psychosocial support program, designed to be flexible in order to meet the specific needs of the individual man. The intervention focuses on providing men with support for treatment decision making, coping, and stress management, as well as information and support around managing treatment side-effects. The ProsCan intervention employs a unique nurse counsellor model and is the first targeted support intervention of this kind in Australia. About 700 men will take part in this component of the ProsCan Project.

ProsCan is being conducted in collaboration with the Northern Section of the Urological Society of Australia and New Zealand, Queensland University of Technology and Griffith University and is the first study internationally to assess this type of supportive care intervention.

If the telephone service is found to be successful, it may provide a model for effective delivery of cancer support services that could be used across Queensland to provide support to patients with other types of cancer.

Staff involved: Suzanne Steginga, Megan Ferguson, Sheila Deuchars, Sylvia Milner, Samantha Clutton, Susan Gledhill, Joanne Aitken.

Collaborators: David Nicol (Princess Alexandra Hospital), Frank Gardiner (Royal Brisbane and Women's Hospital, University of Queensland), David Thomas (Consultant Radiation Oncologist), Spence Broughton (Community Representative), Stefano Occhipinti (Griffith University), The Northern Section of the Urological Society of Australasia.

Contact: meganferguson@cancerqld.org.au

The early detection of prostate cancer in general practice: a GP training program supporting informed choice

Prostate cancer testing is controversial, but widespread in general practice. Clinical practice guidelines recommend that while population-based screening should not be offered, individual patients should be informed about their own risk as well as the pros and cons of testing before making the decision themselves. However currently GPs are not well resourced to undertake this complex discussion and few men are informed. This project will translate an evidence-based and previously well evaluated GP education workshop into an online program in partnership with GenesysEd, Australian Prostate Cancer Collaboration and Andrology Australia. The program will address prostate cancer epidemiology, the pros and cons of testing and shared decision-making, with this data integrated into three case studies and linked to a practice resource.

Funded by: Andrology Australia.

Staff involved: Suzanne Steginga, Peter Baade.

Collaborators: Carol Pinnock (Australian Prostate Cancer Collaboration), Frank Gardiner (Royal Brisbane and Women's Hospital, University of Queensland), Mark Frydenberg (Monash University), Anita Green (University of Queensland), Michael Johnston (GenesisEd).

Contact: suzannesteginga@cancerqld.org.au



Skin Cancer Research Program

The Skin Cancer Research Program conducts epidemiological research into risk behaviours for and diagnosis and treatment of skin cancer in Queensland.

Investigating the use of the utility of primary care skin cancer clinics in Queensland

Australia has the highest incidence of both melanoma and non-melanoma skin cancer in the world and the rate is increasing. The financial costs to the Australian community are high. Traditionally skin examinations and excisions of potential skin cancers have, to a large extent, been carried out in general practice. More recently we have seen a growth in the number of dedicated primary care skin cancer clinics staffed by general practitioners. There has been some considerable debate in the medical field about the emergence of these clinics and the role that computer imaging is playing in the diagnosis of skin cancer.

Concern about the lack of data regarding the case mix, volume and diagnostic accuracy within these clinics has been expressed at a national level. This is the first prospective study in Australia that will provide data on primary care skin clinics including comparisons with general practitioners.

The results of this study will also provide participating doctors with clinical audit data to facilitate more targeted training where required, and hence improve the service they are able to offer the community. Results will also assist the Queensland Cancer Fund in advising the public on how to best manage skin cancer in the community.

Funded by: National Health and Medical Research Council.

Staff involved: Pip Youl, Carla Shield, Peter Baade, Monika Janda, Joanne Aitken.

Collaborators: David Whiteman (Queensland Institute of Medical Research), Chris Del Mar (Bond University).

Contact: piyoul@cancerqld.org.au

Melanoma diagnosis and skin screening in Queensland

Queensland has the highest rates of melanoma in the world and early detection of melanoma is vital. Currently, education programs are aimed at encouraging the public to see a doctor if they notice any change in a mole or spot or the sudden appearance of a new spot or mole. Regular full-body skin examinations may result in melanoma being diagnosed at an earlier stage. This case-control study conducted interviews with about 4000 Queenslanders diagnosed with melanoma over a three-year period. Analysis of the data collected in this study was ongoing in 2006 and has provided a comprehensive picture of patterns of melanoma diagnosis in Queensland and information to support the continued refinement of early detection messages to the community.

Funded by: National Health and Medical Research Council.

Staff involved: Joanne Aitken, Peter Baade, Pip Youl.

Collaborators: Mark Elwood (National Cancer Control Initiative), Dallas English (The Cancer Council Victoria).

Contact: piyoul@cancerqld.org.au



Research by Post-Graduate Students

The experience of gynaecological cancer survivors: Supportive care needs and use

A mail survey of 802 Queensland gynaecological cancer survivors, three months to five years post-diagnosis, was conducted in 2004. The main aim of this study was to assess supportive care needs and use. Results showed 43 per cent of gynaecological cancer survivors reported having at least one moderate or high level unmet supportive care need. The three issues that concerned the group most were “fear about cancer spreading”, “concerns about the worries of those close” and “uncertainty about the future”. More than half (54 per cent) of survivors reported using a support service or organisation and 29 per cent reported using complementary therapies for coping with their cancer. The results highlight the need for additional support in coping with the uncertainties of cancer survivorship.

PhD candidate: Vanessa Beasley (Queensland University of Technology).

Supervisors: Diana Battistutta (Queensland University of Technology), Elizabeth Eakin (University of Queensland), Joanne Aitken, Jeff Dunn.

Quality of life and genetic markers in men with prostate cancer

Some men with prostate cancer experience worse quality of life (QoL) after treatment than others. Biomarkers – the fingerprints of genes that can be assessed via simple blood sampling - could be used to identify those men before treatment. Interventions could then be directed to those men to maintain or improve their QoL. A number of biological markers are altered in people with cancer and may be associated with QoL. This research will investigate if there are genetic markers associated with QoL in men with prostate cancer. Research into these biological markers could lead to the development of a DNA test that can predict QoL outcomes in men with prostate cancer based on genetic predisposition. This would better enable an individualised approach to care, to maintain or improve QoL through the use of effective pharmacological and psychosocial interventions, in these men throughout and beyond their cancer treatment.

PhD candidate: Kimberly Hinze (Queensland University of Technology).

Supervisors: Mary-Anne Kedda (Queensland University of Technology), Monika Janda (Queensland University of Technology), Suzanne Steginga.

The effect of evaluation type on the quality of men’s preferences for prostate specific antigen screening

The efficacy of prostate specific antigen (PSA) screening has not been established, and consequently men are faced with significant uncertainty when making screening decisions. Although PSA screening may reduce prostate cancer mortality, it may also lead to significant treatment morbidity as a result of the detection of harmless cancer. Consequently, screening decisions may result in significant subsequent regret and thus impact negatively on men’s psychological health. Research suggests that this negative impact of a decision is reduced if the decision was consistent with the decision maker’s values. Many decision aids have been developed to elicit such decisions, but their success is limited. The current study aims to identify the type of information evaluation that elicits preferences that are consistent with decision makers’ values. In this regard, the current research will assist the Queensland Cancer Fund to develop decision aids that reduce the potential negative impact of PSA screening decisions on men’s psychological health.

PhD Candidate: Andrea Kittila (Griffith University).

Supervisors: Stefano Occhipinti (Griffith University), Frank Gardiner (University of Queensland), Suzanne Steginga.

Physical activity and quality of life following a diagnosis of colorectal cancer

There is growing evidence that physical activity can reduce cancer symptoms and treatment side-effects and improve cancer survivors’ physical and psychological well-being following treatment, however there have been no well-designed, descriptive studies investigating this association. This research is investigating the associations between physical activity, including past and current exercise history, and quality of life for people who have been diagnosed with colorectal cancer. Outcomes from this research will help the Queensland Cancer Fund to develop exercise interventions for cancer survivors, as a means of improving the quality of life for people during and following cancer treatment.

PhD candidate: Brigid Lynch (University of Queensland).

Supervisors: Neville Owen (University of Queensland), Joanne Aitken, Jeff Dunn.

Decision-making about testing for the early detection of prostate cancer for men with a family history

The first-degree male relatives of men with prostate cancer are at higher risk of developing prostate cancer than are general population men. However, owing to the lack of efficacious early-detection screening practices for prostate cancer the current prostate cancer screening guidelines do not recommend population-based screening for asymptomatic men in Australia. These same screening guidelines apply to the first-degree relatives of men with prostate cancer despite their being at higher risk of developing prostate cancer. There has been limited research on how the first-degree relatives of men with prostate cancer reconcile their risk information and use their family history to guide their screening decisions. This research will examine the current screening practices of men with a family history of prostate cancer in Queensland and examine prostate cancer risk perceptions and the psychosocial factors associated with family history risk (for example, cancer-specific worry) to help establish how having a family member with prostate cancer affects the decision to participate in prostate cancer screening. Outcomes from this research will help TCCQ to develop evidence-based support and information services and educational materials to assist men with a family history of prostate cancer in understanding their heightened risk of prostate cancer and making appropriate, quality decisions about early detection testing.

PhD candidate: Michelle McDowell (Griffith University).

Supervisors: Stefano Occhipinti (Griffith University), Suzanne Steginga.

Prostate Cancer Queensland™

Leading the fight against prostate cancer

Detection and diagnosis of skin cancer in South East Queensland: The role of primary care skin cancer clinics and general practice

Early detection of skin cancer, particularly melanoma, affords the patient the best possible outcome in relation to morbidity and mortality. Examinations of the skin have traditionally been conducted within general practice, however more recently, primary care skin clinics have emerged as an alternative for patients wishing to have a skin examination and/or treatment for suspicious skin lesions. This study is examining the characteristics of patients who choose to attend a primary care skin cancer clinic compared to those attending general practice, particularly in relation to sociodemographics and perceived access to services. This study will also examine the costs (both direct and indirect) of diagnosis, treatment and management of skin excisions in the two settings. The results of this project will provide valuable information on factors associated with attendance at skin cancer clinics compared to those in general practice.

PhD candidate: Pip Youl (University of Queensland).

Supervisors: Peter O’Rourke (University of Queensland), David Whiteman (Queensland Institute of Medical Research), Joanne Aitken.



Queensland Co-operative Oncology Group

The Queensland Co-operative Oncology Group, established through the support of the Queensland Cancer Fund, is open to all cancer clinical specialists in Queensland. Its aim is to improve access and outcomes for patients with cancer in Queensland, and specifically to maintain a forum for clinical specialists in cancer to promote co-operative measures to optimise cancer treatment in Queensland; to promote access for patients in Queensland to optimal cancer treatment by participation in multi-centre clinical trials; to facilitate participation of clinicians in multi-centre cancer clinical trials by providing data management and administrative support; to advise the Queensland Cancer Fund on clinical aspects of cancer control, including research, prevention, screening, diagnosis, treatment and supportive care; to work with the Queensland Cancer Fund to publicly promote rapid access to cancer care facilities of the highest quality; and to liaise with other state co-operative oncology groups to improve access and outcomes.

The Cancer Clinical Trials Register

The Cancer Clinical Trials Register continues to record all clinical trials being conducted in Queensland institutions that treat patients with cancer. The Register documents the level of current and planned clinical trial activity in Queensland. Information collected on each trial includes the cancer type being studied, the phase of the trial, whether the trial is local, national or international, patient accrual, sources of funding and the need for additional data management support.

Special Interest Groups

Special interest groups have been established to provide a forum for specialist physicians, surgeons and oncologists to meet and discuss proposals for clinical research and other developments in cancer treatment. Throughout 2006, special interest groups in breast cancer, colorectal cancer and lung cancer met at the Queensland Cancer Fund.

Newsletters

A regular Queensland Co-operative Oncology Group newsletter is distributed twice a year to clinicians and interested stakeholders.

Cancer Clinical Trial Data Manager Grants

The Cancer Clinical Trial Scheme, established by the Queensland Cancer Fund with the support of the Queensland Co-operative Oncology Group, has been providing grants to research institutes and hospitals for the appointment of data managers to participate in the initiation and conduct of cancer clinical trials since 2000.

The aim is to support participation in cancer clinical trials, in particular, prospective, randomised, national or international, collaborative multi-centre, phase III cancer clinical trials that are not initiated or funded by industry.

The funding provided to hospitals by the Queensland Cancer Fund is for the sole purpose of paying salaries of clinical trial research nurses and data managers. The role of these staff is to undertake those tasks essential for the day-to-day conduct and management of cancer clinical trials, including patient screening, administrative correspondence, completion of case report forms and source data verification.

Financial support for Data Management Grants is closely linked to demonstrated levels of clinical research activity and productivity by trial investigators and therefore is competitive. The Management Committee of the Queensland Co-operative Oncology Group will determine the criteria of assessment for new grants and continued funding.

During 2006, 10 grants were awarded to 10 different research organisations or departments in seven different hospitals in Queensland. A total of 10.8 fulltime equivalent Data Manager positions were funded through grants totalling \$598,744. The hospitals receiving grants were:

- Princess Alexandra Hospital
- Radiation Oncology Services - Mater Centre
- Royal Brisbane and Women's Hospital
- Toowoomba Hospital
- Royal Children's Hospital
- Mater Children's Hospital
- Townsville Hospital

Since the Cancer Clinical Trials scheme commenced in 2000, there has been a significant increase in the level of clinical trial activity in hospitals that have received funding. During the past 12 months there have been 339 patients recruited into eligible phase III co-operative group studies, with more than 450 patients on active follow-up. This represents an increase of 30 per cent compared to the previous year.

Cancer clinical trials add to the knowledge base of cancer treatment, palliation and prevention. Through the Cancer Clinical Trials Scheme, the Queensland Co-operative Oncology Group and Queensland Cancer Fund are actively supporting cancer research, improving cancer treatments and supporting cancer patients. The Cancer Clinical Trials Scheme plays an important role in increasing the awareness, positive perception and funding of cancer clinical trials in Queensland.

Staff involved: Heather Day.
Contact: heatherday@cancerqld.org.au

Staff Members and Associates during 2006

Joanne Aitken, BSc (Hons), SM, PhD
Suzanne Steginga, RN, BA, BBehSci (Hons), PhD
Peter Baade, BSc, BApplSc(Hons), MMedSc, PhD
Ann Burbidge, RN, BNSc
Lorraine Caesar
Philippe Carrière, HonBSC, MD, MSc
Janelle Cross
Heather Day, BSc (Hons)
Sheila Deuchars, Grad Dip Nursing
Tracey DiSipio (nee Round), B.HlthSc(Hons)
Megan Ferguson, BSc (Hons Psych)
Lin Fritschi, MBBS, FAFPHM, PhD
Susan Gledhill, RN, RM, BHA, MHA
Louisa Gordon, Bec, MPH, PhD
Katrin Hausdorf, PhD
Anna Hawkes, BSc(Hons), MPH, PhD
Kelli Holland, RN
Jan Howell
Monika Janda, PhD, MPhil
Jodie Jetann, RN, BSN
Lauren Krnjacki, BA, MPH
Brigid Lynch, BSc, MScs Comm
Francene Marshall, BSc
Jane Masters, BSc (Hons Psych)
Helen Maxwell
Katherine Melville
Sylvia Milner, RN
Kari Mudie, RN, DipHighEdu
Rachel Neale, BVsc, PhD
Danielle Penn, BBiomedSc, MSc, MPH
Marina Reeves, PhD, APD
Carla Rogers, BA (Hons Psych)
Carla Shield, BBus BHlthSc
Nicole Shively
Roy Stapleton, BSc (Psych)
Jafar Tabrizi, MPH
Bridie Thompson, BSc, MPH
Monica West
Pip Youl, RN, MPH
Danny Youlden, BSc

Associate: **Samantha Clutton**, BA (Hons), MCP
Associate: **Susan Greenbank**, BAppSci
Associate: **Marg Hegarty**, EN, Ass. Dip CommWelf, Masters in Counselling
Associate: **Sandy Hutchison**, BA (Hons), MCP

Director, Epidemiology and Cancer Registries
Director, Community Services and Psycho-Oncology Research
Senior Biostatistician
Project Officer
CATI Interviewer
Senior Research Officer
Senior Research Assistant
Professional Officer – Queensland Co-operative Oncology Group
Project Officer
Project Officer
Project Manager
Head, Epidemiology Unit
Project Officer
Health Economist
Project Officer
Manager, Psycho-Oncology Research Unit
Project Officer
Research Support Officer
Research Fellow
Project Manager
Project Officer
Project Manager
Project Officer
Project Officer
CATI Interviewer
Research Assistant
Nurse Counsellor
Project Officer
Epidemiologist
Program Evaluation and Development Officer
Senior Research Officer
Project Manager
Project Officer
Research Administration Officer
Database Manager
Project Manager
Project Manager
CATI Interviewer
Senior Research Officer
Biostatistician

Publications: 2006

Reports

Queensland Cancer Risk Study. Brisbane, Viertel Centre for Research in Cancer Control, Queensland Cancer Fund. December 2005.

Sex After Treatment, Prostate Cancer (Patient Resource). Brisbane, Viertel Centre for Research in Cancer Control, Queensland Cancer Fund. July 2006.

Peer-reviewed Publications

Aitken JF, Janda M, Elwood M, **Youl PH,** Ring IT, Lowe JB. Clinical outcomes from skin screening clinics within a community-based melanoma screening program. Journal of the American Academy of Dermatology 2006; 54(1):105-114.

Aitken JF, Youl PH, Janda M, Lowe JB, Ring IT, Elwood M. Increase in skin cancer screening during a community-based randomized intervention trial. International Journal of Cancer 2006; 118(4):1010-1016.

Baade PD, Fritschi L, Freedman DM. Mortality due to ALS and Parkinson's disease among melanoma patients. Neuroepidemiology (in press).

Baade PD, Stanton WR. Determinants of stages of smoking uptake among secondary school students. Addictive Behaviors. 2006; 31(1):143-148.

Baade PD, Fritschi L, Eakin EG. Non-cancer mortality among people diagnosed with cancer. Cancer Causes and Control 2006; 17:287-297.

Baade PD, English DR, **Youl PH,** McPherson M, Elwood JM, **Aitken JF.** The relationship between melanoma thickness and time to diagnosis in a large population-based study. Archives of Dermatology 2006; 142:1422-1427.

Bhatia M, Howard SC, Clark TG, **Neale R,** Qizilbash N, Murphy MF, Rothwell PM. Apolipoproteins as Predictors of Ischaemic Stroke in Patients with a Previous Transient Ischaemic Attack. Cerebrovasc Dis 2006; 21(5-6):323-328.

Bouwes Bavinck JN, Euvrard S, Naldi L, Nindl I, Proby CM, **Neale RE,** Abeni D, Tessari G, Feltkamp MCW, Claudy A, Stockfleth E, Harwood CA, EPI-HPV-UV-CA group. Keratotic skin lesions and other risk factors are associated with skin cancer in organ-transplant recipients: A case-control study in The Netherlands, United Kingdom, Germany, France and Italy. Journal of Investigative Dermatology (submitted).

Butler GJ, **Neale R,** Green AC, Pandeya N, Whiteman DC. Nonsteroidal anti-inflammatory drugs and the risk of actinic keratoses and squamous cell cancers of the skin. Journal of the American Academy of Dermatology 2005;53(6):966-972.

Carrière P, Baade P, Newman B, **Aitken J, Janda M.** Cancer screening in Queensland men. Medical Journal of Australia (submitted).

Carrière P, Baade P, Fritschi L. Population-based incidence and age distribution of spermatocytic seminoma. Journal of Urology (submitted).

Coory M, **Baade PD, Aitken JF,** Smithers M, McLeod GRC, Ring I. Trends for in-situ and invasive melanoma in Queensland, Australia, 1982-2002. Cancer Causes Control 2006; 17(1):21-27.

Coory M, Smithers M, **Aitken J, Baade PD,** Ring I. Urban-rural differences in survival from cutaneous melanoma in Queensland, Australia. Australian and New Zealand Journal of Public Health. 2006; 30(1):71-4

DiSipio T, Rogers C, Newman B, Whiteman D, Eakin E, **Fritschi L** and **Aitken JF.** The Queensland Cancer Risk Study: Behavioural risk factor results. Australian and New Zealand Journal of Public Health 2006; 30:375-82.

Dunn J, Lynch BM, Rinaldis M, Pakenham K, McPherson L, Owen N, Leggett B, Newman B, **Aitken J.** Dimensions of quality of life and psychosocial variables most salient to colorectal cancer patients. Psycho-Oncology 2006; 15:20-30.

Eakin EG, **Youlden DR, Baade PD,** Lawler SP, **Reeves MM,** Heyworth JS, **Fritschi L.** Health status of long-term cancer survivors: results from an Australian population-based sample. Cancer Epidemiology, Biomarkers and Prevention 2006; 15(10):1969-1976.

Fritschi L, Day LM, Shirangi A, Robertson ID, Lucas M, Vizard AL. Injury in Australian veterinarians. Occupational Medicine 2006; 56(3):199-203.

Fritschi L, Driscoll T. Cancer due to occupation in Australia. Australia and New Zealand Journal of Public Health 2006; 30(3):213-219.

Fritschi L, Dye SA, Katris P. Validity of melanoma diagnosis in a community-based screening program. American Journal of Epidemiology 2006; 164(4):385-390.

Hall L, Struijk L, **Neale RE,** Feltkamp MCW. Re: Human Papillomavirus infection and incidence of squamous cell and basal cell carcinomas of the skin. Journal of the National Cancer Institute 2006; 98(19):1425-1426.

Hawkes A, Nowak M, Bidstrup B, Speare R. Outcomes of coronary artery bypass graft surgery. Journal of Vascular Health and Risk Management 2006; 2(4):477-484.

Hawkes A, Mortensen O. Up to one third of individual cardiac patients have a decline in quality of life post-intervention. Scandinavian Cardiovascular Journal 2006; 40(4):214-218.

Hutchison S, Steginga SK, Dunn J. A tiered model of psychosocial intervention in cancer: Translating psychosocial care practice guidelines into action. Psycho-Oncology 2006; 15: 541-546.

Janda M, Lowe JB, Elwood M, Ring IT, **Youl PH, Aitken JF.** Do centralised skin screening clinics increase participation in melanoma screening? Cancer Causes and Control 2006; 17(2):161-168.

Janda M, Youl PH, Lowe JB, **Baade PD,** Elwood M, Ring IT, **Aitken JF.** What motivates men 50 years and over to participate in a screening program for melanoma? Cancer 2006; 107:815-823.

Janda M, GebSKI V, Forder P, Jackson D, Williams G, Obermair A for the LACE Trial Committee. Total laparoscopic versus open surgery for stage 1 endometrial cancer: the LACE randomized controlled trial. Contemporary Clinical Trials 2006; 27(4):353-363.

Janda M, Eakin E, Bailey L, Troy K. Supportive care needs of people with brain tumours and their carers. Supportive Care Cancer 2006; 14(11):1094-1103.

Janda M, Kimlin MG, Whiteman DC, **Aitken JA, Neale RE.** Sun protection messages, vitamin D and skin cancer: out of the frying pan and into the fire? Cancer Causes and Control (In press).

Karipidis KK, Benke G, Sim M, **Fritschi L,** Yost M, Armstrong BK, Hughes AM, Vajdic CM, Grulich AE, Milliken S, Kaldor J, Kricker A. Occupational exposure to power frequency magnetic fields and risk of non-Hodgkin lymphoma. Occupational and Environmental Medicine (In Press).

Krum H, Jelinek M, Sindone A, Stewart S, **Hawkes A** on behalf of the National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand Chronic Heart Failure Clinical Practice Guidelines Expert Writing Panel. Guidelines for the Prevention, Detection and Management of People with Chronic Heart Failure in Australia 2006. Medical Journal of Australia 2006; 185(10): 549-556.

Laky B, **Janda M,** Bauer J, Vavra C, Cleghorn G, Obermair A. Malnutrition amongst gynaecological cancer patients. Eur J Clin Nutrition. (In press)

Lawler SP, Kvaskoff M, **DiSipio T,** Whiteman D, Eakin EG, **Aitken JF, Fritschi L.** Solaria Use in Queensland, Australia. Australian and New Zealand Journal of Public Health 2006; 30(5):479-482.

Leavy J, **Fritschi L,** Ambrosini G. Vietnam military service history and prostate cancer. BMC Public Health 2006; 6:75.

Lim HS, Roychoudhuri R, Peto J, Schwartz G, **Baade P,** Møller H. Cancer survival is dependent on season of diagnosis and sunlight exposure. International Journal of Cancer 2006; 119(7):1530-1536.

Lynch BM, Owen N, Newman B, Pakenham K, Leggett B, **Dunn J, Aitken JF.** Reliability of a measure of prediagnosis physical activity for cancer survivors. Medicine and Science in Sports and Exercise 2006; 38(4):715-719.

McAvoy B, **Steginga SK,** Pinnock C. The early detection of prostate cancer: supporting patient choice. New Zealand Family Physician 2006; 33(1), Feb.

McBride P, **Neale RE,** Pandeya N, Green A. Sun-related factors, beta papillomavirus and actinic keratoses: a prospective study. Archives of Dermatology (in press).

McPherson M, Elwood M, English D, **Baade PD, Youl P, Aitken J.** Presentation and detection of invasive melanoma in a high-risk population. Journal of the American Academy of Dermatology 2006; 54:783-792.

Murphy M, **Neale R,** Hey K, Seagroatt V, Goldacre M, Vessey M, Willis B, Ellis J, Barlow D. Pregnancy outcome amongst twins conceived after subfertility treatment compared with natural twins: a population based study. Twin Res Hum Genetics 2006; 9(2):279-284.

Neale RE, Davis M, Pandeya N, Whiteman DC, Green AC. Basal cell carcinoma on the trunk is associated with excessive sun exposure. Journal of the American Academy of Dermatology (in press).

Pekmezovic T, **Baade PD.** Trends and patterns in prostate cancer mortality in Belgrade, Serbia: a join-point analysis. European Journal of Cancer Prevention 2006;15(1):51-56.

Penn DL, Simpson LE, Leggett S, Edie G, Wood L. The Development of a Website to Promote the Mental and Physical Health of Sons and Daughters of Vietnam Veterans of Australia, Journal of Consumer Health on the Internet, volume 10, Issue 4, 2006.

Steginga SK, Pinnock C, Smith D, Metcalfe R, Gardiner RA, **Dunn J.** Clinicians' attitudes to prostate cancer peer support groups. British Journal of Urology International 2006; 95:68-71.

Steginga SK, Occhipinti S. Dispositional optimism as a predictor of decision-related adjustment after localized prostate cancer. Health Psychology 2006; 25(2):135-143.

Steginga SK. Review of 100 questions and answers about bladder cancer. Ellsworth P & Carswell B. Jones and Bartlett Publishers Inc. British Journal of Urology 2006; 97(3):651.

Steginga SK, Hutchison S, Turner J, **Dunn J.** Translating psychosocial care guidelines into action. Cancer Forum 2006; 30(1):28-31.

Steginga SK, Baade P, Williams S, Gardiner RA, Fitzpatrick J. Making decisions about the early detection of prostate cancer. Online physician resource 'Fingertip Urology', British Journal of Urology International (In Press).

Publications: 2006 (cont.)

Struijk L, Hall L, van der Meijden E, Wanningen P, Bavinck JN, **Neale R**, Green AC, Ter Schegget J, Feltkamp MC. Markers of cutaneous human papillomavirus infection in individuals with tumor-free skin, actinic keratoses, and squamous cell carcinoma. Cancer Epidemiology Biomarkers Prevention 2006; 15(3):529-535.

van der Pols JC, Williams GM, **Neale RE**, Clavarino A, Green AC. Long-term increase in sunscreen use in an Australian community after a skin cancer prevention trial. Preventive Medicine 2006; 42(3):171-176.

Williams HA, **Fritschi L**, Reid A, Beauchamp C, Katris P. Who attends skin cancer screening in Western Australia? Results from the Lions Cancer Institute Skin Cancer Screening Program. Australian and New Zealand Journal of Public Health 2006; 30:75-80.

Williams HA, **Fritschi L**, Beauchamp C, Katris P. Evaluating the usefulness of self-reported risk factors in a skin cancer screening program. Melanoma Research 2006; 16(4):341-345.

Wilson P, Sexton W, Singh A, Smith M, Durham S, Cowie A, **Fritschi L**. Family experiences of tissue donation in Australia. Progress in Transplantation 2006;16:52-56.

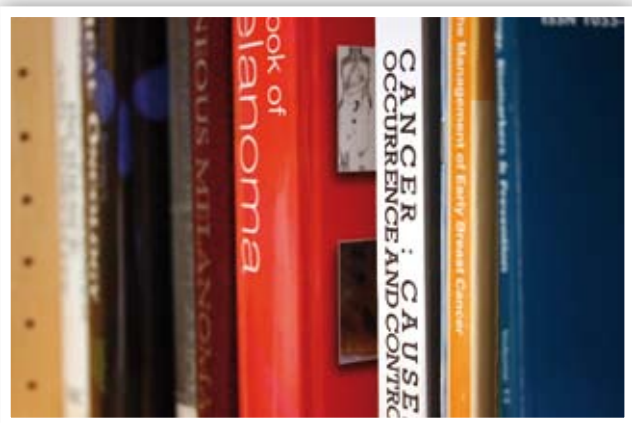
Youl PH, Janda M, Elwood M, Lowe JB, Ring IT, **Aitken JF**. Who attends skin clinics within a randomized trial of a melanoma screening program? Cancer Detection and Prevention 2006; 30(1):44-51.

Youl PH, Jackson C, Oldenburg B, Brown C, **Dunn J, Aitken JF**. Attitudes, knowledge and practice of colorectal cancer screening among general practitioners in Queensland. Australian Family Physician 2006; 35(7):547-550.

Books

Stewart S, Inglis S, **Hawkes A**. Chronic Cardiac Care, A Practical Guide to Specialist Nurse Management: Blackwell Publishing, BMJ Books, March 2006.

Burger M, **Steginga SK**, Williams S, Gardiner RA. Endotext. com ‘Your Endocrine Source’. Chapter 10: Prostate Cancer. 2006.



Aitken JF.
Case-control study of screening for melanoma, Queensland. Melanoma Research 2006, Sydney, June 2006.

Aitken JF.
Screening for melanoma. Keynote address. Advances towards a SunSmart State – from Research to Practice, Brisbane, October 2006.

Carrière P.
Prognostic factors: Concepts of cure. University of Queensland, August 2006.

Carrière P.
Critique and interpretation of epidemiologic papers. Princess Alexandra Hospital, August 2006.

Carrière P, Baade P, Neale R.
The risk of testicular cancer in twins: A meta-analysis. 15th Annual Meeting of the Australasian Epidemiological Association, Melbourne, September 2006.

Dunn J.
Improving supportive care services for men with prostate cancer: A symposium. UICC World Cancer Congress, Washington DC, July 2006.

Dunn J.
Peer support programs: The Reach to Recovery international model. UICC World Cancer Congress, Washington DC, July 2006.

Dunn J.
Fundamentals of communication. UICC World Cancer Congress, Washington DC, July 2006.

Dunn J.
Psychological support for women with breast cancer. The 10th Annual Taiwan Breast Cancer Support Group Convention ‘Reflecting on the Past, Breaking into the New’, Taipei, Taiwan, August 2006.

Dunn J.
Setting up Reach to Recovery services. The 10th Annual Taiwan Breast Cancer Support Group Convention ‘Reflecting on the Past, Breaking into the New’, Taipei, Taiwan, August 2006.

Dunn J.
Interpersonal communication skills – the Reach to Recovery approach. 3rd Asia Pacific Reach to Recovery International Breast Cancer Support Conference, Mumbai, India, November 2006.

Dunn J.
Supportive care guidelines for cancer patients. 3rd Asia Pacific Reach to Recovery International Breast Cancer Support Conference, Mumbai, India, November 2006.

Conference Presentations

Dunn J.
Volunteers in action and peer support. 3rd Asia Pacific Reach to Recovery International Breast Cancer Support Conference, Mumbai, India, November 2006.

Dunn J, Campbell M, Penn D, Dwyer M, Steginga S.
Changing Gears – a peer support adventure for young breast cancer survivors. 6th Annual Health and Medical Research Conference of Queensland, Brisbane, November 2006.

Ferguson M, Clutton S, Gardiner RA, Nicol D, Occhipinti S, Steginga S.
The role of the prostate care nurse in supporting men with prostate cancer: The ProsCan study. 8th Biennial Behavioural Research in Cancer Control Conference, Brisbane, September 2006.

Ferguson M, Hanley B, Edwards R.
Prostate cancer supportive care and patient outcomes project (ProsCan): Update and new directions. Prostate Cancer Support Group Convenors Workshop, Brisbane, October 2006.

Ferguson M, Aitken J, Janda M, Gardiner RA, Nicol D, Kedda M-A, Occhipinti S, Steginga S.
Prostate cancer supportive care and patient outcomes project (ProsCan): New directions. Australian Prostate Cancer Collaboration 8th Annual General Meeting, Sydney, October 2006.

Ferguson M, Aitken J, Janda M, Nicol D, Gardiner RA, Kedda M-A, Occhipinti S, Steginga S.
ProsCan: Prostate Cancer Supportive Care and Patient Outcomes Project. 6th Annual Health and Medical Research Conference of Queensland, Brisbane, November 2006.

Fritschi L.
Understanding research. Queensland Cancer Fund Advocacy Training Workshop, Brisbane, March 2006.

Gordon LG.
Cancer and employment outcomes. Queensland University of Technology Cancer group workshop, April 2006.

Greenbank, S.
Behaving badly - skin cancer prevention for men under 40. Australian Health Promotion Association 16th National Conference, Alice Springs, April 2006.

Greenbank S.
The solarium industry in Queensland. Advances Towards a SunSmart State – from Research to Practice, Brisbane, October 2006.

Hausdorf K.
Primary prevention: Population health interventions. University of Queensland, Brisbane, July 2006.

Hausdorf K, Rogers C, Kvaskoff M, DiSipio T, Youlden D, Whiteman D, Aitken J, Fritschi L.
Determinants of sunburn in Queensland, Australia. 8th Biennial Behavioural Research in Cancer Control Conference, Brisbane, September 2006.

Hawkes A.
An introduction to the 2006 Cardiac Society of Australia and New Zealand and National Heart Foundation of Australia Chronic Heart Failure Guidelines. Heart Failure Nurses Meeting, Sydney, March 2006.

Hawkes A.
Development of a telephone-delivered cardiac rehabilitation program for Queenslanders. National Heart Foundation of Australia Conference, Sydney, March 2006.

Hawkes A.
Development of a telephone-delivered cardiac rehabilitation (CR) program for Queenslanders. National Heart Foundation of Australia conference, Sydney, April 2006.

Hawkes A.
Development of guidelines for the prevention, detection and management of people with chronic heart failure in Australia 2006. Heart Failure Nurses Meeting, Sydney, April 2006.

Hawkes A.
Queensland Cancer Fund pilot cancer care course for Aboriginal and Torres Strait Islander Health Workers. 8th Biennial Behavioural Research in Cancer Control Conference, Brisbane, September 2006.

Hawkes A, Hutchison S, Brown L, Hanley B, Clutton S, Steginga S.
The HELP Project, 6th Annual Health and Medical Research Conference, Brisbane, November 2006.

Hawkes A, Hutchison S, Brown L, Hanley B, Clutton S, Steginga S.
The HELP project, Queensland Oncology Nurses Group 29th Annual Conference, Brisbane, November 2006.

Janda M.
Optimal treatment of elderly patients presenting with stage III and IV ovarian cancer. Annual Conference of the Australian Society of Gynaecologic Oncology, May 2006.

Krnjacki L.
The Queensland Pancreatic Cancer Study. 15th Annual Meeting of the Australasian Epidemiological Association, Melbourne, September 2006.

Milner SE, Clutton SJ, Woolf (Ferguson) MR, Nicol D, Gardiner RA, Steginga SK.
The role of the prostate cancer nurse in supporting men through diagnosis and treatment of localised prostate cancer. 11th Annual Australasian Urological Nurses Society, Brisbane, March 2006.

(cont.)

Melanoma statistics in Queensland. Forum on Advances towards a SunSmart State – from Research to Practice, Brisbane, October, 2006.

Research Grants and Awards

Funding to Viertel Centre for Research in Cancer Control

Ongoing support: Sylvia and Charles Viertel Charitable Foundation.

Baade P, Youl P, Janda M, Aitken JF, Whiteman D, Del Mar C. Investigating the utility of primary care skin cancer clinics in Queensland.
NHMRC Grant #339100 (2005-2006: \$338,423)

Fritschi L, Benke G, Datta A. Improving occupational exposure assessment.
NHMRC Grant #353653 (2005-2007: \$330,825)

Fritschi L. Population Health Career Development Award – Five year salary package.
NHMRC Grant #254683 (2003-2007: \$467,000)

Fritschi L, Coory M, Walpole E, **Aitken J, Baade P.** Patterns of Cancer Care Evaluation.
Golden Casket Foundation (2006: \$230,000)

Janda M. Public Health (Australia) Fellowship.
NHMRC Fellowship #339101 (2006-2007: \$132,000)

Neale R. Public Health (Sydney Sax) Fellowship (part-time).
NHMRC Fellowship #241963 (2003-2008: \$332,373)

Steginga SK, Pinnock C, Jackson C, Green A, Heathcote P, Johnston M. The early detection of prostate cancer in general practice: an on line GP training program supporting informed choice.
Andrology Australia (2006: \$38,000)

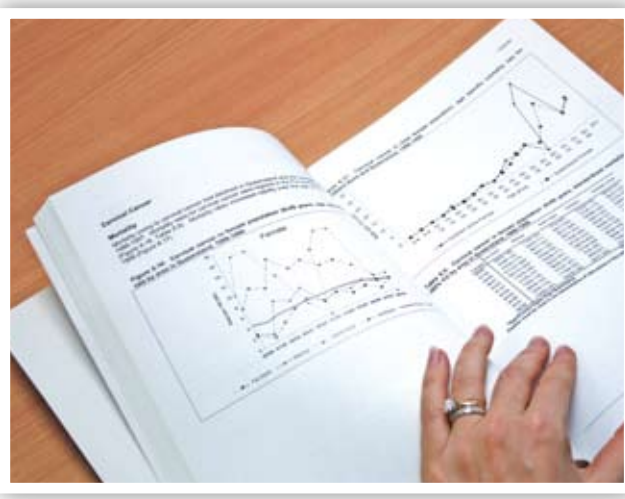
Other Collaborative Research Grants

Fritschi L, Iacopetta B, McCaul K, Crawford D, Heyworth J. Genetic and environmental risk factors for colorectal cancer: anatomic site specificity.
NHMRC Grant #353568 (2005-2007: \$552,250)

Fritschi L, Armstrong B, Milne E, Bower C, De Klerk N. Environmental and genetic factors in childhood acute lymphoblastic leukaemia: a case-control study.
NHMRC Grant #211981 (2003-2008: \$1,705,000)

Hawkes A. Addressing multiple behavioural risk factors in primary health and community care settings: a cluster randomised trial.
NHMRC (2004-2007: \$691,272)

O’Connell D, Smith D, Gattelari M, Ward J, **Steginga SK,** Pinnock C. PSA testing: a population-based longitudinal study of decision making, psychological effects and patterns of care.
NHMRC Grant # 337601 (2005-2007: \$572,601)



Professional and Community Activities

Committee Memberships

The Cancer Council Australia

CEO Forum: **Jeff Dunn**
National Skin Cancer Committee: **Pip Youl**
Nutrition and Physical Activity Committee: **Susan Greenbank**
Supportive Care Committee: **Margaret Hegarty**
Public Health Committee: **Susan Greenbank**
Bowel Cancer Screening Committee: **Susan Greenbank**
General Practice Primary Health Care Committee: **Susan Greenbank**

International Union Against Cancer

Board Member (ex-officio): **Jeff Dunn**
Asia Pacific Cancer Society Training Grants Program, Chairman: **Jeff Dunn**
Reach to Recovery International Advisory Committee, Advisor: **Jeff Dunn**
Supportive Care and Program Development, Chairman: **Jeff Dunn**

Queensland Health

Bowel Cancer Screening Quality Management Committee: **Susan Greenbank**
Breast Cancer Screening Quality Management Committee: **Susan Greenbank**
Cervical Cancer Screening Quality Management Committee: **Susan Greenbank**
Cancer Cluster Investigation Steering Committee: **Peter Baade**
Cardiac Rehabilitation Collaborative, Continuing Healthcare Improvement: **Anna Hawkes**
Queensland Cancer Control Ministerial Advisory Committee: **Jeff Dunn**
Queensland Cancer Registry Advisory Committee: **Joanne Aitken**
Queensland Cancer Registry Joint Management Committee: **Joanne Aitken**
Skin Cancer Forum Organising Committee: **Pip Youl**

Conference Organising Committees

3rd Asia Pacific Reach to Recovery International Breast Cancer Support Conference Organising Committee: **Jeff Dunn**
4th UICC World Cancer Congress Program Committee: **Jeff Dunn**
14th Reach to Recovery International Breast Cancer Support Service Conference International Advisory Committee: **Jeff Dunn**
Behavioural Research in Cancer Control 2006 Conference Organising Committee: **Anna Hawkes** (Conference Convenor), **Susan Greenbank, Tanya Raineri, Suzanne Steginga**
Queensland Tobacco Control Symposium Organising Committee: **Susan Greenbank**

Expert Advisory Committees

Australasian Association of Cancer Registries, Executive Committee: **Joanne Aitken**
Australian Prostate Cancer Collaboration National Executive Committee: **Suzanne Steginga**
Cancer Foundation of Western Australia, Medical and Scientific Advisory Panel: **Lin Fritschi**
Cancer Registry Advisory Group: **Lin Fritschi, Joanne Aitken**
Independent Review and Scientific Investigation Panel, ABC Toowong Cancer Cluster Investigation: **Joanne Aitken**
Lions Cancer Institute Scientific Advisory Committee: **Lin Fritschi**
National Health and Medical Research Council Expert Committee on Electromagnetic Energy: **Lin Fritschi**
National Heart Foundation of Australia and Cardiac Society of New Zealand Chronic Heart Failure Clinical Practice Guidelines Expert Writing Panel: **Anna Hawkes**

Scientific Panels and Working Groups

Australian Cancer Network, Working Party for the development of Clinical Practice Guidelines for the Management of Advanced Prostate Cancer: **Suzanne Steginga**
Australian Prostate Cancer Collaboration Education Sub Committee Co-Chair: **Suzanne Steginga**
Behaviour Research and Therapy Centre, School of Psychology, University of Queensland: **Sandy Hutchison**
Brisbane Prostate Cancer Research Network: **Suzanne Steginga**
Cancer Institute NSW Education Review Panel: **Suzanne Steginga**
Cardiac Society of Australia and New Zealand (CSANZ) Heart Failure Working Group: **Anna Hawkes**
IPOS 9th World Congress of Psycho-Oncology and Psychosocial Academy: **Jeff Dunn**
James Cook University – Anton Breinl Centre Consultative Committee: **Jeff Dunn**
Ottawa Health Research Institute: **Suzanne Steginga**
Prostate Cancer Foundation of Australia Public Awareness and Education Committee: **Suzanne Steginga**
Psycho-oncology Co-operative Research Group (PoCoG) Scientific Advisory Committee: **Suzanne Steginga**
Queensland Cardiac Rehabilitation Association Committee: **Anna Hawkes**
Queensland Epidemiology Group: **Pip Youl**
Queensland Public Health Forum: **Susan Greenbank**
Queensland Public Health Forum Tobacco Working Group, Chair: **Susan Greenbank**

Reviews and Editorial Activities

Editorial Panels

American Journal of Epidemiology, Associate Editor: **Lin Fritschi**
Australasian Epidemiologist, Guest Editor: **Lin Fritschi**
BMC Public Health, Editorial Board: **Lin Fritschi**
Cancer Forum: Journal of The Cancer Council Australia, Editorial Board: **Jeff Dunn**
Psycho-Oncology, Editorial Board: **Jeff Dunn**

Reviews for Journals

American Journal of Epidemiology: **Joanne Aitken, Lin Fritschi**
American Journal of Preventive Medicine: **Joanne Aitken, Peter Baade, Lin Fritschi**
Australian and New Zealand Journal of Public Health: **Peter Baade**
Australian Family Physician: **Anna Hawkes, Pip Youl**
Australian Journal of Public Health: **Peter Baade**
The Australian and New Zealand Journal of Surgery: **Suzanne Steginga**
BioMedicalCentral Nursing: **Suzanne Steginga**
British Journal of Sports Medicine: **Brigid Lynch**
The British Journal of Urology: **Suzanne Steginga**
Canadian Medical Journal: **Peter Baade**
Cancer Causes and Control: **Lin Fritschi**
Cancer Epidemiology Biomarkers and Prevention: **Lin Fritschi**
Clinical and Experimental Dermatology: **Pip Youl**
European Journal of Clinical Nutrition: **Marina Reeves**
Health Education Research: **Brigid Lynch**

Health Promotion Journal of Australia: **Susan Greenbank**
Health Psychology: **Suzanne Steginga**
International Journal of Cancer: **Peter Baade**
International Journal of Gynaecological Oncology: **Monika Janda**
Journal of the American Academy of Dermatology: **Joanne Aitken, Peter Baade**
Journal of Psychosomatic Research: **Suzanne Steginga**
The Journal of Urology: **Suzanne Steginga**
Medical Decision Making: **Suzanne Steginga**
Medical Journal of Australia: **Peter Baade, Danny Youlden** (Statistical Review)
Nutrition and Dietetics: **Anna Hawkes**
Occupational and Environmental Medicine: **Lin Fritschi**
Occupational Medicine: **Lin Fritschi**
Patient Education and Counselling: **Suzanne Steginga**
Preventive Medicine: **Suzanne Steginga**
Psychology, Health and Medicine Journal: **Monika Janda**
Psycho-Oncology: **Jeff Dunn, Suzanne Steginga**
Respirology: **Peter Baade, Suzanne Steginga**

Reviews for Funding Bodies

Cancer Institute of New South Wales: **Lin Fritschi**
National Health and Medical Research Council: **Joanne Aitken, Lin Fritschi, Monika Janda, Marina Reeves, Suzanne Steginga**
National Heart Foundation of Australia: **Anna Hawkes**
Swiss Cancer League: **Suzanne Steginga**
Sydney Cancer Centre: **Anna Hawkes**



Academic Appointments

Joanne Aitken:
Associate Professor, School of Population Health, University of Queensland.
Adjunct Associate Professor, School of Public Health, Queensland University of Technology.
Peter Baade:
Adjunct Senior Lecturer, School of Psychology, Griffith University.
Jeff Dunn:
Adjunct Professor, School of Social Science, University of Queensland.
Associate Professor, School of Population Health, University of Queensland.
Lin Fritschi:
Adjunct Associate Professor, School of Population Health, University of Western Australia.
Adjunct Associate Professor, School of Population Health, University of Queensland.

Anna Hawkes:
Adjunct Associate Professor, Indigenous Health Unit, School of Public Health, James Cook University.
Adjunct Assistant Professor, Faculty of Health Sciences and Medicine, Bond University.
Adjunct Senior Lecturer, School of Psychology, Griffith University.

Rachel Neale:
Adjunct Lecturer, University of Queensland.

Suzanne Steginga:
Adjunct Associate Professor, School of Psychology, Griffith University.

Post-Graduate Students

Vanessa Beasley
Queensland University of Technology PhD candidate
Supervisors: Diana Battistutta (Queensland University of Technology), Liz Eakin (University of Queensland), Joanne Aitken, Jeff Dunn.
Topic: The experience of gynaecological cancer survivors: Supportive care needs, quality of life and community supportive care use.

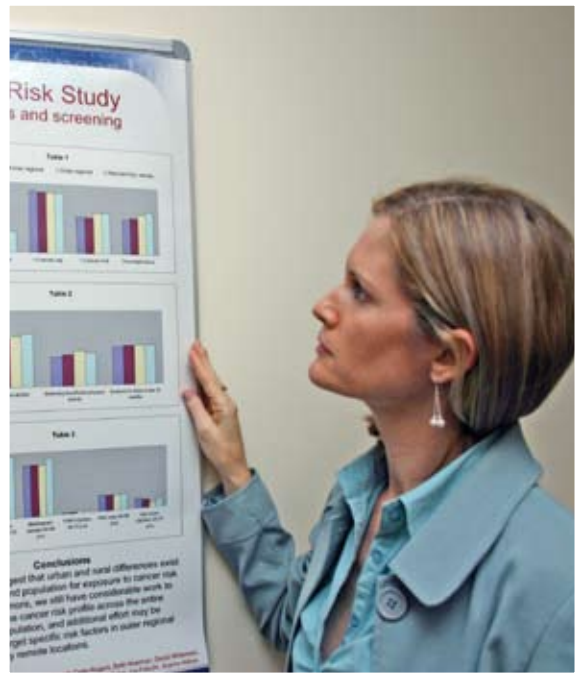
Kimberly Hinze
Queensland University of Technology PhD candidate
Supervisors: Mary-Anne Kedda (Queensland University of Technology), Monika Janda (Queensland University of Technology), Suzanne Steginga
Topic: Quality of life and genetic markers in men with prostate cancer

Andrea Kittila
Griffith University PhD candidate
Supervisors: Stefano Occhipinti (Griffith University), Suzanne Steginga, Frank Gardiner (University of Queensland).
Topic: The effect of evaluation type on the quality of men's preferences for prostate specific antigen screening.

Brigid Lynch
University of Queensland PhD candidate
Supervisors: Neville Owen (University of Queensland), Joanne Aitken, Jeff Dunn.
Topic: Physical activity and quality of life following a diagnosis of colorectal cancer.

Michelle McDowell
Griffith University PhD candidate
Supervisors: Stefano Occhipinti (Griffith University), Suzanne Steginga.
Topic: Decision-making about testing for the early detection of prostate cancer for men with a family history.

Pip Youl
University of Queensland PhD candidate
Supervisors: Peter O'Rourke (University of Queensland), David Whiteman (Queensland Institute of Medical Research), Joanne Aitken.
Topic: Detection and diagnosis of skin cancer in South East Queensland: The role of primary care skin cancer clinics and general practice.



Notes

