

Report from the Menzies School of Health Research, Darwin

Prepared by Professor Kerin O'Dea, Director



"Our vision is to improve the health of the people of northern and central Australia, and regions to the near north, through multidisciplinary research and education."

2003 has been a year of success, opportunity, challenge and change.

MSHR has continued to strengthen and grow at an exciting rate with the generation of increased external grant funding. Funding was awarded on a competitive basis to over 20 MSHR projects covering a broad range of research including scabies, rheumatic fever, tuberculosis, diabetes, malaria, kidney disease, lung disease and melioidosis, as well as research into a variety of social and economic factors affecting Indigenous health.

In 2003 MSHR was awarded almost \$10 million in NHMRC funding for project grants, scholarships and fellowships which are to commence in 2004. This is a new record for MSHR and demonstrates our reputation for excellence in research and our commitment to making a difference in the areas of Aboriginal and tropical health.

Some achievements are worthy of special mention:

- The NHMRC awarded a grant (\$2.3 million) to an MSHR research team led by Associate Professor Joan Cunningham and Associate Professor Ross Bailie, to build capacity in policy relevant to quantitative, social analysis and research in Indigenous health.
- The MSHR international research team, led by Associate Professor Nick Anstey, was awarded a Wellcome Trust/ NHMRC Grant (\$3.1 million) to undertake research to examine new combinations of drugs in the treatment of the most severe forms of malaria, a disease which kills many thousands of people each year throughout our region.
- Associate Professor Ross Bailie was awarded a prestigious NHMRC Research Fellowship and Associate Professor Joan Cunningham and Dr Amanda Leach were awarded NHMRC Career Development Awards.

All of these achievements demonstrate MSHR's position as a national leader in Indigenous, remote and tropical health research and education.

Other highlights for 2003 include:

- PHERP funding (Public Health Education and Research Program) was granted for our Master of Public Health Course for a further two years. During 2003, we had 65 students enrolled each semester in the MSHR Public Health Coursework program. In addition, MSHR had 36 research students enrolled through seven universities, as well as five PhD graduates and two students enrolled in a BSc Honours program.
- Dr Sandra Eades, one of Australia's foremost Indigenous researchers, joined MSHR as a Principal Research Fellow. She is a member of the NHMRC Research Committee and chairs the NHMRC Indigenous Health Research Panel.
- Renewed Commonwealth funding of \$23 million over seven years for the new Cooperative Research Centre in Aboriginal Health (CRAH) has allowed us to enhance our strategic alliances with other organisations with an interest in Indigenous health. The new CRC is greatly expanded from the previous CRC, with the number of core partners increased from six to 12.

- The launch of the new MSHR website (www.menzies.edu.au) which provides a dynamic medium to interact with our research partners, students and others with an interest in Indigenous and tropical health research.
- The selection of two MSHR researchers in the Bulletin's "Smart 100" list of Australians making a difference to performance in their respective fields – Professor Kerin O'Dea and Dr Sandra Eades were in the "top 10" for the health and medicine category.



Dr Sandra Eades

- The signing of a Memorandum of Understanding with the University of Queensland to facilitate the recruitment of high quality research students.

2003 has also brought many changes to our institution as discussions took place around a model to formalise links between MSHR and Charles Darwin University (CDU).

After extensive negotiations, including a review by independent consultants, legislation was passed by the NT Government that MSHR become a controlled entity of CDU. MSHR will retain its independent Act of Parliament which guarantees the organisation's autonomy into the future. MSHR has become a School within CDU's Institute of Advanced Studies and in the medium to long term will gain the benefits of increased access to funding from the Commonwealth for research infrastructure.

I would like to put on record my appreciation for the time and efforts of all MSHR staff and Board Members who supported the organisation through this challenging period of change whilst continuing to achieve significant research success.

Finally, I would like to acknowledge the continued support of the Menzies Foundation, and the valued contribution of Professor Simon Maddocks as Deputy Chair of the MSHR Board. We are proud that our ongoing partnership with the Menzies Foundation continues to underpin our vital work for the improved health of the Indigenous population and impact the national health research agenda.

Report from the Menzies Research Institute, Hobart

Prepared by Professor Terry Dwyer, AM, Director



The Menzies Research Institute had an extremely successful and satisfying 2003, particularly in relation to growth and exciting expansion opportunities that have resulted from:

- A change in the scale and number of research projects;
- The increased range of projects, facilitated by the Genetic Epidemiology Unit and the rapid advances in genetic technology that have made it possible to undertake population-based genetic studies and search for genes that cause disease;
- Further development of international collaborative links through, for example, the World Health Organisation; and
- Increased funding from competitive grants.

The year commenced with a commitment to deliver a progressive Strategic Plan for the period 2004 to 2008 that would build upon the successes of the Institute over the

past fifteen years and guide the direction of the Institute over the next five years. Staff input was central to the development of the plan with an Institute-wide workshop that focused on the opportunities and actions to be pursued in order to achieve growth targets, covering both current research strengths and potential areas for diversification.

A number of administrative and organisational restructures that arose from the planning exercise have been implemented, including the appointment of several new staff members to fulfil research and administrative support objectives.

A major achievement of the Institute was being awarded a \$2.5 million National Health and Medical Research Council (NHMRC) research capacity building grant. This injection of funding is pivotal to the goals of the Institute and will allow considerable growth that will consolidate the organisation's competitiveness on both the national and international fronts.

The project will investigate disease aetiology over a five-year period. It will use our cohort studies to identify genetic, environmental and behavioural determinants of disease in our island setting with advantages for epidemiological work, and with additional genealogical data available at the individual level. The funding enables the Institute to employ seven key postdoctoral researchers and two visiting scientists, and to enhance the research output of the Institute with specific and needed expertise.

Professor David W. Hosmer, current Professor of Biostatistics at the University of Massachusetts, USA, and his wife, Trina commenced appointments as visiting scientists. Professor Hosmer will spend nine months at the Institute to enhance the skills of the Biostatistics Unit and develop techniques for estimating gene environment interaction in cohort study data.

External funding achieved through competitive sources has been extremely satisfying. Particularly exciting is the significant injection of \$7.5 million from Atlantic Philanthropies to assist in the construction of a new building for the Institute. Financial support for the new building has also been received from the University of Tasmania and a commitment from the Tasmanian Government. A project manager to oversee the design and construction will be appointed in 2004.

Researchers have again had success through the NHMRC funding process. In 2003, the NHMRC awarded over \$1.19 million to the Institute. This research income will be shared across three projects commencing in 2004.

The majority of the funding will allow expansion of the Tasmanian Older Adult Cohort (TASOAC), with this grant helping to increase understanding of the factors influencing the development and progression of osteoarthritis.

The other two projects supported by the NHMRC are a study of the effect of low-yield cigarettes on lung function and a longitudinal study of bone development in children.

Other significant funding received by the Institute in 2003 included:

- Department of Veterans' Affairs (\$274,000), to complete a study into the effects of sun exposure and genes on the risk of prostate cancer;
- National Heart Foundation and the Tasmanian Community Fund, to assist in the expansion of the Childhood Determinants of Adult Health study;



Research Assistant, Sheryl Lunt completes an ultrasound for the Childhood Determinants of Adult Health Study.

- Cancer Council of Tasmania and the University of Tasmania, to commence a pilot study that aims to determine how biological, genetic and lifestyle factors contribute to the risk of developing second and subsequent non-melanoma skin cancers; and
- Royal Hobart Hospital Research Foundation to assist a number of projects, including mechanisms of osteoporosis and vertebral fractures in rheumatoid arthritis, and the MSR1 gene and the risk of prostate cancer in the Tasmanian population.

On the international front, the Institute completed several workshops throughout the Western Pacific Region in our role as technical supporters for the World Health Organisation (WHO) STEPS surveillance system for cardiovascular diseases (CVD). The role of assisting our colleagues in the region to plan and implement programs for the prevention and control of CVD and diabetes is extremely rewarding. Funding from Atlantic Philanthropies and WHO has allowed the Institute to further expand our role within the Western Pacific region and extend activities into south-east Asia, particularly Vietnam.

In late 2003 the Institute hosted delegates from Canada, Italy and the United States to discuss work on the global international study of Genes, Environment and Melanoma (GEM). The meeting was extremely successful, with several new studies proposed as a result of discussions around early data analyses.

Incorporation of the Institute was not finalised in 2003, although there were positive developments in negotiations with the University of Tasmania.

Discussions centred on the Institute's constitution and organisational structure that would provide for expanded links with clinicians and the medical school. It is expected that the Institute will be incorporated in 2004. In recognition of the move to incorporation, the new name "Menzies Research Institute" has been introduced with a new corporate style to signify the future direction of the Institute.

The Menzies Research Institute has developed and grown significantly since it was founded in 1987 by the Sir Robert Menzies Memorial Foundation and the University of Tasmania. The Institute is well positioned to meet future challenges and opportunities that will maintain the growth and momentum of the Institute and to foster leading-edge research that is globally significant.