## **Open Garden**

NSW.



Chris is lucky to wake up to this scenery every day!

Chris Cox and Dr Elizabeth Varughese of The Not only do the Jacquie O-Varian Cysters go Battle Against Ovarian Cancer team the to great lengths to raise an outstanding 'Jacquie O-Varian Cysters' recently held their amount for their team's Battle total each annual open garden fundraiser in Tamworth, year, they make the long trip up to Brisbane to participate.

> This year, they raised over \$3000 through entry tickets to the garden, sausage sizzle, cake stall and raffle tickets.

We would like to take this opportunity to thank this wonderful team for long-standing commitment to ensuring women receive kinder, better gynaecological cancer treatments.

Favourite book or movie?

I'm more of a TV fan, so my

favourite TV series of all

time is Friends. I always

who would it be and why?

If you could spend an hour with anyone,

Right now in this moment it would be any

one of my family or friends from home.

It's funny when you move away and don't

know anyone how you crave and miss being around the people that truly know



All hands on deck... Chris' husband Paul with Elizabeth's son Thomas helping with the preparations



A very special thank you to With a history spanning 30 Matisse Framing for donating years, Matisse strive to be \$1000 to QCGC Research.

innovative and creative by designing frames for artworks Ian Lauder started Matisse and treasures that have that

Framing with his wife Donna, 'Wow' factor. who passed away seven years

ago from gynaecological can- You can find Matisse at 35 cer. Donna was treated by Dr Elgin Street, Alderley or Jim Nicklin.

lan is dedicated to supporting Thanks again to this wonderresearch to improve outcomes ful, community-spirited busifor women who receive a simi- ness! lar diagnosis.



### Tell us a little about yourself

I am originally from Melbourne and have been living in Brisbane now for just under three months. So far I am enjoying the warmer weather and exploring my new put it on when I just need a home. I thrive in being fit and healthy and good laugh. teach group fitness classes at various gyms which I'm very passionate about.

### What is your role & its main purpose?

I am the Clinical Trial Manager for the feMMe study.

### What do you find fulfilling about your work?

Knowing that the outcome of feMMe will hopefully change practice to benefit women and improve overall care and prognosis.



evel 6 Ned Hanlon Building Royal Brisbane & Women's Hospital Herston QLD 4029 Phone (07) 3646 3882 www.gyncan.org

vou.



If you have a rival in the business world, this challenge is for you! Battle Against Ovarian Cancer 2015 Corporate Battle Challenge

In the lead-up to Battle, corporate competitors nominate their biggest rival to go head-to-head in a fundraising and beach volleyball rivalry. If the challenge is accepted, a fierce (but friendly) contest will ensue, with both competitors trying to out-do the other.

Our Corporate Challenge will give you priceless marketing and exposure opportunities, along with the chance to come out on top over your biggest challenger in the marketplace!

To register, visit www.battleagainstovariancancer.com/corporatechallenge/

### Up close with Sara Scalzo



# " the outcome of feMMe will hopefully

## change practice to benefit women



Follow us on Facebook - search for QLD Centre for Gynaecological Cancer Research

# Gynaecological **O**ncology

As a not-for-profit

organisation that receives minimal gov-

ernment funding,

QCGC Research re-

lies heavily on fund-

raising and personal

donations to continue

the important work we

Donations and grants

are the lifeblood of

what we do here at

QCGC Research, and

we would like to thank

ALL of our past do-

If you've donated be-

fore and would like to

help again, or maybe

vou'd like to donate

for the first time-

contact@gyncan.org

We would love to talk

to you, hear your story

and find out why you

want to support this

We sincerely thank

you!

QCGC

esearc

very important cause.

or (07) 3646 3882.

please email

do.

nors!



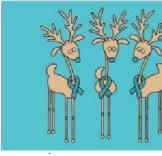
# Message from the Director of Research

It's hard to believe we're at the end of the year. 2014 has seemed so brief and fleeting that when I think about the measured, carefully-planned work that's happened, it seems a stark contrast!

In August this year, we held our annual gynaecological cancer symposium here at the Royal Brisbane and Women's Hospital. With standout speakers, an engaged audience and \$20,000 raised, it proved to be our most successful symposium yet. Thank you to everyone who attended in 2014. If you couldn't make it this year, we hope to see you at the next one!

I am also excited to share with you the expansion of our feMMe trial, which is now operating at the Royal Women's Hospital in Melbourne and also Christchurch Women's Hospital, New Zealand. This trial has delivered some hopeful results so far. More detail about the expansion is included over the page.

Our flagship fundraiser, The Battle Against Ovarian Cancer, is set to kick off again this February. As always at this time of year, my team are busily focused on all things Battle.



### GOOD News Edition 8 - December 2014





We've done it a few times now and while we have our planning down to a tee, the event just seems to get bigger each year too (not that I'm complaining!). I am personally very grateful for your Battle support, whether it be through participation or making the decision to donate.

An exciting new partnership has formed between Cherish Women's Cancer Foundation and Lexus of Brisbane. The ongoing support that Cherish gives to our clinical trials means that this partnership will ultimately benefit QCGC Research. Cherish will be launching their annual car raffle again in 2015, with another beautiful vehicle from Lexus up for grabs.

This is our summer edition—which also means our Christmas edition! I would like to wish you a wonderful festive season. It's a great time of year to press the 'reset' button and to renew our focus on the important things in life. Our health, our family and our friends are good places to start!

I will be on-call over Christmas, but hope to escape up the coast in the early new year for a couple of weeks to relax with my family. I look forward to updating you with our continued progress in 2015.

**Prof Andreas Obermair** Director of Research

Queensland Centre for Gynaecological Cancer Obermair@gyncan.org

### Biennial Meeting of the International Gynaecological Cancer Society (IGCS)

# **Jenny Roberts'** lasting legacy

When Dr Alan Roberts' wife Jenny was diagnosed with a rare and unforgiving cervical cancer in October 2012, she was placed in the care of Professor Obermair, Dr Robyn Huttenmeister and Dr Jeffrev Goh.

"Rolling with shock, we didn't know it at the time. but we were exceptionally lucky to have been sent to this extraordinary group of clinical professionals," Dr Roberts said.

"We had total confidence in the care and treatment Jenny received throughout her journey, and although we knew from the start it was a battle unlikely to be won in the long term, Jenny never gave up because of the belief she had in the advice and care provided her " to

"It was a privilege for my daughter Katherine and I to make a donation to further the research of the QCGC, especially in areas related to the cancer from which Jenny suffered. "

The Roberts family generously donated \$20,000, in the hope that someone else may have a better outcome from the same set of circumstances.

We are sincerely grateful to Alan and Katherine and our heartfelt thoughts are with the Roberts family.



Gynaecological cancer research has delivered some promising results in 2014. In fact, in the notso-distant future, we could see a five-year cervical cancer screening test replace the current twoyearly pap smear.

Doctors and researchers from OCGC Research attended the 15th Biennial IGCS meeting in Melbourne on 8-11 November. The conference hosted over 1900 participants from over 80 countries.

The conference provided the opportunity to learn about the latest clinical advances as well as international developments in research. Of particular interest was the information presented on the Human Papillomavirus (HPV) vaccine. Professor Ian Frazer from the University of Queensland spoke of the development of the cervical cancer vaccine. He outlined that the vaccine is reducing the incidence of cervical cancer, cervical intraepithelial neoplasia (or CIN—a pre-cursor to cervical cancer and genital warts in countries where the HPV vaccine is included in the immunization schedule.)

### **OCGC Research symposium 2014**



Presenters Prof Michael Quinn Shona Morrison Vicki Campbell, Dr Marina Reeves, Filish Jacobs, and Chair, Merran Williams

We held our annual research symposium on 16 August. Chaired by registered nurse and gynaecological cancer patient Merran Williams, the event attracted a strong audience and stand-out speakers and proved to be our most successful yet.

Dietician Dr Marina Reeves explained the importance of weight management and how best to achieve it for improving outcomes for cancer survival. She also outlined that no cancer-beating diet has been proven and that organically grown food, despite it containing less detectable pesticide residue, was not quantified as the answer either.

She advocated fundamental advice for weight management as a combination of:

- physical exercise
- a sensible diet of less energy-dense food
- meals containing five serves of non-starch vegetables, and;
- a limited intake of alcohol.

Next, gynaecological oncologist and researcher Professor Michael Quinn, presented findings

In response to the success of the HPV vaccine the Medical Services Advisory Committee (MSAC) has recommended that a new 'cervical screening test' should replace the current pap smear. The new screening test detects HPV.

MSAC has recommended for both HPV vaccinated and unvaccinated women that: an HPV test should be undertaken every 5 years; cervical screening should commence at 25 years of age; women should have an exit test between 70 and 74 years of age; and women with symptoms (including pain or bleeding) can have a cervical test at any age.

This new screening regime is currently being tested in a large group of Australian women and it is anticipated that changes would not be implemented until 2016. HPV vaccinated women will still require cervical screening as the HPV vaccine does not protect against all the types of HPV that cause cervical cancer. Until any changes are implemented women should continue to have two yearly pap tests

about some strains of the commonly sexually transmitted Human Papilloma Virus (HPV). Virtually every sexually active person will acquire HPV at some stage. It is only when the body's natural immune system fails to clear the virus that HPV may cause damage including pre-cancer and cancer of the cervix, vagina or vulva. He made it very clear that being sexually active does not cause cancer.

Clinical nurse consultants Shona Morrison, Vicki Campbell and Eilish Jacobs reported on the signs and early symptoms of cancer recurrence. The overriding take-home message was that subsequent treatment is more effective on early detection of recurrence, so follow-up appointments and self-diligence measures such as pap smears are the kev.

QCGC patron Lady Mayoress Anne Quirk commended the symposium for catering to its community's pursuit of knowledge.

Much of the information presented at annual symposiums is derived from trial programs. Prof Andreas Obermair acknowledged that it is patients who very kindly contribute to research. OCGC also contributes to Australian and international publications, communicating research and medical outputs to the medical industry.



Dr Alex Crandon, Lady Mayoress Anne Quirk, Prof. Andreas Obermair. Dr Marina Reeves

### feMMe (Mirena) trial expands

The Queensland Centre for Gynaecological Cancer (QCGC) Research is proud to announce that the feMMe trial, which is conducted at several Queensland hospitals, has expanded to Melbourne and Christchurch, New Zealand.

The trial will be conducted at Melbourne's Royal Women's Hospital under the Principal Investigator, Miss Orla McNally and at Christchurch Women's Hospital with Associate Professor Peter Sykes being the Principal Investigator.

Since November 2012, QCGC has pioneered this clinical trial in the non-surgical treatment of endometrial cancer.

The trial aims to treat patients with the use of a Mirena IUD hormone device combined with Metformin or weight loss intervention to reduce the impact of major surgery such as a full hysterectomy.

Women diagnosed with complex endometrial hyperplasia with atypia or grade 1 endometrioid endometrial adenocarcinoma (EAC), who have a body mass index (BMI) greater than 30 and wish to preserve fertility or are at high risk of surgical complications are eligible for this clinical trial

The interstate and overseas expansion of this new technique will offer women in Victoria and New Zealand more treatment options and more optimistic outcomes.

Plans are in place to expand the trial to Sydney, New South Wales and Perth, Western Australia.

If successful, the study will have implications for the treatment of a large proportion of patients with EAC in Australia in the medium to long term.

The feMMe trial is part funded by Cancer Australia, ANZGOG and private donations.

# Patient Profile | Linda McRae

Linda McRae is blessed with a beautiful family, loves pilates and staying active and feels lucky to live in the best country in the world. The wonderful husband she calls 'her rock,' her four beautiful children and six gorgeous grandkids are all things she never takes for granted following two cancer diagnoses.

Despite having no family history, Linda was diagnosed with breast cancer in 1993 and endometrial (uterine) cancer in 2007. "Having two lots of cancer was a huge shock with no family history," Linda said. "My mother is 94 and in excellent health. Her mother lived until 92 and my other granny 88."

Linda was alerted to her breast cancer after discovering a small, painless pea-sized lump. Her endometrial cancer was discovered after she experienced some occasional spotting, but Linda says she was surprised because she didn't feel different in any way.

Linda says she is very grateful to the surgeons who performed her life-saving surgery. Dr Russell Land from QCGC operated on her endometrial cancer. "The care at the RBWH could not be faulted," Linda adds.

Breast cancer sufferers have an increased chance of being Reflecting on life 'before' and 'after' cancer, Linda says "things diagnosed with a subsequent gynaecological cancer (150% that seemed important such as getting the housework done for endometrial or uterine and 40% for ovarian) - even if every week have flown out the window-it's now lucky to get a many years have passed since their remission. If you or dust if someone is coming!". someone you know has had breast cancer, please be especially vigilant for early symptoms and signs of gynaecological cancer. Early detection can be life-saving.





Linda and her beautiful daughters—Alison, Linda, Fiona and Louise

"Now, I never refuse an outing, or a chance to spend time with the little ones. I try and enjoy every day, no matter where I am or what I'm doing."

"One day at a time is my motto now."

Linda participated in the LACE trial, which investigates laparascopic (key-hole) surgery versus traditional open-surgery in endometrial cancer patients. We thank Linda for her valuable contribution.

If you'd like to help raise awareness about gynaecological cancer, please share your story with us! Please contact Jackie Wallace at j.wallace4@uq.edu.au