



Clinical
Oncology
Society of
Australia

COSA ANNUAL REPORT 2022

EDUCATION
COLLABORATION
ADVOCACY
RESEARCH





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PRESIDENTS OF COSA

1973-1976	Mr WB Fleming AM	MBBS FRACS FRCS(Eng) FACS	(Deceased)
1976-1979	Professor L Atkinson	FRCS FRACS FACR	(Deceased)
1979-1981	Dr RP Melville	MBBS FRCS FRACS FACS	(Deceased)
1981-1983	Professor MHN Tattersall AO	MA MD MSc FRCP FRACP	(Deceased)
1983-1985	Professor GJ Clunie	CHM(Ed) FRCS(Ed) FRCS FRACS	(Deceased)
1985-1987	Dr JVM Coppleson AO	MBBS(Hons) MD FRCOG FRACOG	(Deceased)
1988-1989	Dr JA Levi	MBBS FRACP	
1990-1991	Professor RM Fox AM	BSc(Med) PhD MBBS FRACP	
1992-1993	Professor WH McCarthy AM	Med FRACS	
1994-1995	Professor AS Coates AM	MD FRACP	
1996-1997	Professor RJS Thomas OAM	MBBS MS FRACS FRCS	
1998-1999	Professor H Ekert AM	MBBS MD FRACP FRCPA	
2000-2001	Professor J Zalberg OAM	MBBS PhD FRACP GAICD MRACMA	
2002-2003	Professor L Kenny AO	MBBS FRANZCR	
2004-2005	Dr S Ackland	MBBS FRACP	
2006-Jul 2006	Professor D Currow	BMed FRACP MPH	
Jul 2006-2008	Professor D Goldstein	MBBS FRACP FRCP	
2009-2010	Professor B Mann	MBBS PhD FRACS	
2011-2012	Professor B Koczwara AM	BM BS FRACP MBioethics FAICD	
2013-2014	Professor SV Porceddu	BSc MBBS (Hons) MD FRANZCR	
2015-2016	Professor M Krishnasamy	BA RGN DipN MSc PhD	
2017-2018	Professor P Butow AM	BA(Hons) Dip Ed MClinPsych MPH PhD	
2019-2020	Professor N Pavlakis	BSc MBBS MMed (ClinEpi) PhD FRACP	
2021-2022	Professor F Boyle AM	MBBS FRACP PhD	
2023-2024	A/Professor D Forstner	MBBS (Hons) FRANZCR	

COSA VISION AND MISSION

QUALITY MULTIDISCIPLINARY CANCER CARE FOR ALL

The overarching mission of COSA is to improve cancer care and control through collaboration.

COSA achieves this by:

- supporting the professional and educational needs of cancer health professionals
- enhancing cancer care and control through network development
- advocating for improvements in cancer care and control
- facilitating research across the spectrum of cancer



COSA MEMBERSHIP

As at 31 December 2022 there were 800 registered members of COSA. Members are drawn from the many disciplines in medicine engaged in cancer treatment and from associated research, patient care and support areas. They come from universities, private practice, government and private laboratories and other health services.

There are two types of COSA membership:

Individual membership – COSA members

Organisational membership – Affiliated and Associated Organisations

The categories of membership of COSA are:

1 Ordinary Members

A person with a specific interest in oncology and with professional qualifications is eligible for admission as an ordinary member.

- Medical members are qualified clinical practitioners or scientists with a specific interest in oncology. Medical members hold a postgraduate degree or fellowship from a recognised College or Society that is relevant to the vision and mission of COSA.
- Allied Health members have a specific interest in oncology and a professional qualification relevant to COSA's vision and mission.

2 Retiree Members

A person who has retired from their professional employment, who has held COSA membership for 10 years prior to retirement, and who has a continued personal interest in cancer care is eligible as a retiree member, subject to Board approval.

3 Honorary Members

A person who has made significant and sustained contributions to COSA or to cancer care in general is eligible for admission as an honorary member. This membership category is offered to past Presidents of COSA and nominees and must be approved by the COSA Board.

4 Student Members

A person who is undertaking full time undergraduate or post-graduate studies with a stream of cancer care in an Australian Institution is eligible as a student member. Documented evidence of their status is required upon application annually and membership is subject to Board approval.

5 Affiliated and Associated Organisations

Affiliated and Associated Organisations include not-for-profit companies, institutions or organisations that have a similar vision to COSA.

COSA BOARD



**Professor
Fran Boyle AM**
President



**A/Professor
Dion Forstner**
President-Elect



Ms Sandie Angus
Co-opted
Director



**Professor
Judy Bauer**
COSA Council
Elected Director



**Professor
Tanya Buchanan**
Director - Cancer Council
Australia Nominee



Mr Peter Dowding
Co-opted Director
(Retired March 2022)



Mr Peter Hooker
Co-opted Director
(Appointed March
2022)

AUDITORS

BDO Audit Pty Ltd
Level 11
1 Margaret St
Sydney NSW 2000



Dr Malinda Itchins
COSA Council
Elected Director



Professor Michael Jefford
COSA Council
Elected Director



Professor Timothy Price
COSA Council
Elected Director



Professor Sabe Sabesan
COSA Council
Elected Director



A/Professor Christopher Steer
COSA Council
Elected Director



Ms Marie Malica
Chief Executive
Officer

COSA COUNCIL

Council comprises the President, President-Elect, Immediate Past President, Chair of each COSA Group, the nominee of each Affiliated Organisation, and other appointed positions.

COSA GROUP AND APPOINTED REPRESENTATIVES

ADOLESCENT AND YOUNG ADULT GROUP

Chair: Dr W Nicholls
MBChB FRACP

BREAST CANCER GROUP

Chair: Dr S Fraser
MBBS FASBP

CANCER BIOLOGY GROUP

Chair: Professor N Zeps
BSc(Hons) PhD

CANCER CARE COORDINATION GROUP

Chair: Distinguished Professor P Yates AM
PhD RN FAAN FACN

CANCER GENETICS GROUP

Chair: Mr S Troth
BSc Grad Dip Genetic Counselling FHGSA

CANCER PHARMACISTS GROUP

Co-Chairs:
Mrs M Ryan
BPharm MHIthMgt GradDipClinPharm
Dr G Sandhu
Bpharm(Hons) DipClinPharm PhD

CANCER PREVENTION

Chair: Professor B Stewart AM
MSc PhD FRACI DipLaw GradDipLegalPract

CLINICAL TRIALS RESEARCH PROFESSIONALS GROUP

Chair: Mr A Stoneley

EPIDEMIOLOGY GROUP

Chair: (Jan-Jul) A/Professor H Tuffaha
Bpharm MBA MSc PhD
(Aug-Dec) Dr A Hopkins
PhD, Bpharm (Hons)

EXERCISE AND CANCER GROUP

Chair: Dr D Mizrahi
BexPhys MSc PhD

GASTROINTESTINAL ONCOLOGY GROUP

Chair: Dr C Diakos
BSc(Hons) PhD MBBS FRACP

GERIATRIC ONCOLOGY GROUP

Chair: Professor M Agar
MBBS FRACP FACHPM MPC PhD

GLOBAL ONCOLOGY GROUP

Chair: Professor D Yip
MBBS FRACP

GYNAECOLOGICAL ONCOLOGY GROUP

Chair: Professor L Mileskin
MBBS FRACP MD Mbioeth(Mon)

INTEGRATIVE ONCOLOGY GROUP

Chair: A/Professor J Lacey
MBBS FRACGP FACHPM (FRACP)

LUNG CANCER GROUP

Chair: Dr M Itchins
BmedSci MBBS (Hons1) FRACP PhD

MELANOMA AND SKIN GROUP

Chair: A/Professor A Menzies
BSc(Med) MBBS(Hons) FRACP PhD

PRESIDENT

Professor F Boyle AM
MBBS FRACP PhD

PRESIDENT-ELECT

A/Professor D Forstner
MBBS (Hons) FRANZCR

NEUROENDOCRINE TUMOURS GROUP

Chair: Dr D Chan
BSc(Med) MBBS ClinDipPallMed FRACP PhD

NEURO-ONCOLOGY GROUP

Chair: A/Professor ES Koh
MBBS FRANZCR

NUTRITION GROUP

Chair: Clinical A/Professor M Findlay
PhD AdvAPD

PALLIATIVE CARE GROUP

Chair: Professor J Phillips
BSc PGDip PhD RN FACN

PSYCHO-ONCOLOGY GROUP

Chair: Dr L Kirsten
BSc(Psych) MappSc(Beh Hlth Sc)
Dpsyc(Clinical) PhD

RADIATION ONCOLOGY GROUP

Chair: Position Vacant

RARE CANCERS GROUP

Chair: Professor C Scott AM
MBBS PhD FRACP FAHMS

REGIONAL & RURAL ONCOLOGY GROUP

Chair: (Jan-Mar) A/Professor R Zielinski
MBBS Hons (Sydney) BE Hons (Sydney)
(Apr-Dec) Dr WS Lam
MBBS FRACP MHA

SURGICAL ONCOLOGY GROUP

Chair: Dr S Nightingale
MBChB MS FRACS

SURVIVORSHIP GROUP

Chair: Professor R Chan
PhD GAICD FACN FAAN NHMRC Investigator
Fellow

UROLOGIC ONCOLOGY GROUP

Chair: A/Professor A Azad
MBBS PhD FRACP

ABORIGINAL AND TORRES STRAIT ISLAND REPRESENTATIVE

Professor G Garvey
BEd MEd PhD

ADVANCED TRAINEE REPRESENTATIVE

Dr A Knox
BSc MBBS

CONSUMER REPRESENTATIVES

Ms K Bell
BA(Hons)
GradCertHealthEcons MPH GAICD

Ms L Young
DUniv

COSA COUNCIL CONT.

AFFILIATED ORGANISATION REPRESENTATIVES

AUSTRALASIAN GASTRO-INTESTINAL TRIALS GROUP

Professor T Price
MBBS DHlthSc (Medicine) FRACP

AUSTRALASIAN LEUKAEMIA & LYMPHOMA GROUP

A/Professor P Mollee
MBBS(Hons) MMedSc FRACP FRCPA

AUSTRALASIAN METASTASIS RESEARCH SOCIETY

Dr N Pouliot
PhD

AUSTRALIA AND NEW ZEALAND SARCOMA ASSOCIATION

Professor A Hong
MBBS MMed PhD FRANZCR

AUSTRALIA NEW ZEALAND GYNAECOLOGICAL ONCOLOGY GROUP

(Jan-Apr) A/Professor P Beale
BSc MBBS FRACP PhD
(Apr-Dec) Professor C Scott AM
MBBS PhD FRACP FAHMS

AUSTRALIAN AND NEW ZEALAND CHILDRENS HAEMATOLOGY ONCOLOGY GROUP

Professor N Gottardo
FRACP MBBS MPH

AUSTRALIAN AND NEW ZEALAND HEAD & NECK CANCER SOCIETY

(Jan-Sep) Dr B Stein
MBBS(Hons) FRACP
(Sep-Dec) Dr T Fua
MBBS FRANZCR

AUSTRALIAN AND NEW ZEALAND UROGENITAL & PROSTATE CANCER TRIALS GROUP

Professor I Davis
MBBS (Hons) PhD FRACP FACHPM FAHMS

BREAST CANCER TRIALS

Professor S Lakhani
BSc MBBS MD FRCPATH FRCPA

CANCER NURSES SOCIETY OF AUSTRALIA

Ms G Vigar
BN PG Dip Onc Nurs MNSc (Onc Nurs) RN
CHIA

CANCER SYMPTOM TRIALS

(Jan-Apr) Professor K Clark
MBBS MMed PhD FRACP FACHPM
(Apr-Dec) Dr RS Moussa
PhD

COOPERATIVE TRIALS GROUP FOR NEURO- ONCOLOGY

A/Professor ES Koh
MBBS FRANZCR

FACULTY OF RADIATION ONCOLOGY

Dr KH Tai
MBBS FRANZCR



MEDICAL ONCOLOGY GROUP OF AUSTRALIA

Dr D Karikios
BSc MBBS FRACP PhD

MELANOMA AND SKIN CANCER TRIALS LIMITED

Professor M Shackleton
MBBS PhD FRACP

ONCOLOGY SOCIAL WORK AUSTRALIA & NEW ZEALAND

Ms K Hobbs
MSW MAASW

PRIMARY CARE COLLABORATIVE CANCER CLINICAL TRIALS GROUP

Dr C Ee
MBBS FRACGP BAppSci (Chinese Medicine)
Grad Cert Med Acup MMed PhD

PSYCHO-ONCOLOGY COOPERATIVE RESEARCH GROUP

A/Professor J Shaw
BAppl Sc BPsych(Hons) PhD

ROYAL COLLEGE OF PATHOLOGISTS OF AUSTRALASIA

A/Professor K Lee
MB ChB FRCPA GAICD

THORACIC ONCOLOGY GROUP OF AUSTRALASIA

Professor M Millward
MBBS MA FRACP

TROG CANCER RESEARCH

A/Professor P Sundaresan
BSc (Hons) MBBS FRANZCR PhD GAICD

PRESIDENT'S REPORT

I am delighted that 2022 saw many of the COVID-19 restrictions ease, enabling COSA to charge full-steam into its activities (not that the pandemic slowed us down!). Most notably of course was the face-to-face Annual Scientific Meeting (ASM), which I unfortunately missed due to health reasons. It was truly difficult not to be in Brisbane with the COSA family, for what I am told was an educational, engaging, and fun three days in Brisbane. There is so much I enjoy about the COSA ASM – meeting up with likeminded people, sharing ideas, catching up with colleagues, hearing the latest in the cancer world and impacting change for the future... Not to mention the dancefloor at the Conference Social, which is always a personal highlight.

On behalf of the COSA Board and Council I extend our sincere thanks to our 2022 Convenors, Rahul Ladwa and Sabe Sabesan, and the Program Committee for pulling together a stellar program.

Achievements in 2022

Some of our other noteworthy achievements throughout 2022 include:

- Webinars held in partnership with the Australian Cancer Survivorship Centre, Cancer Council Victoria and Cancer Nurses Society of Australia
- Nine submissions to the Australian Cancer Plan
- Continued advocacy work around COVID-19, including the utilisation of telehealth in ongoing cancer care, and a national lung cancer screening
- The launch of our Financial Toxicity in Cancer Care paper

- Supporting our colleagues in advocacy efforts around e-cigarettes
- Launching the COSA Guidelines for fertility preservation for people with cancer

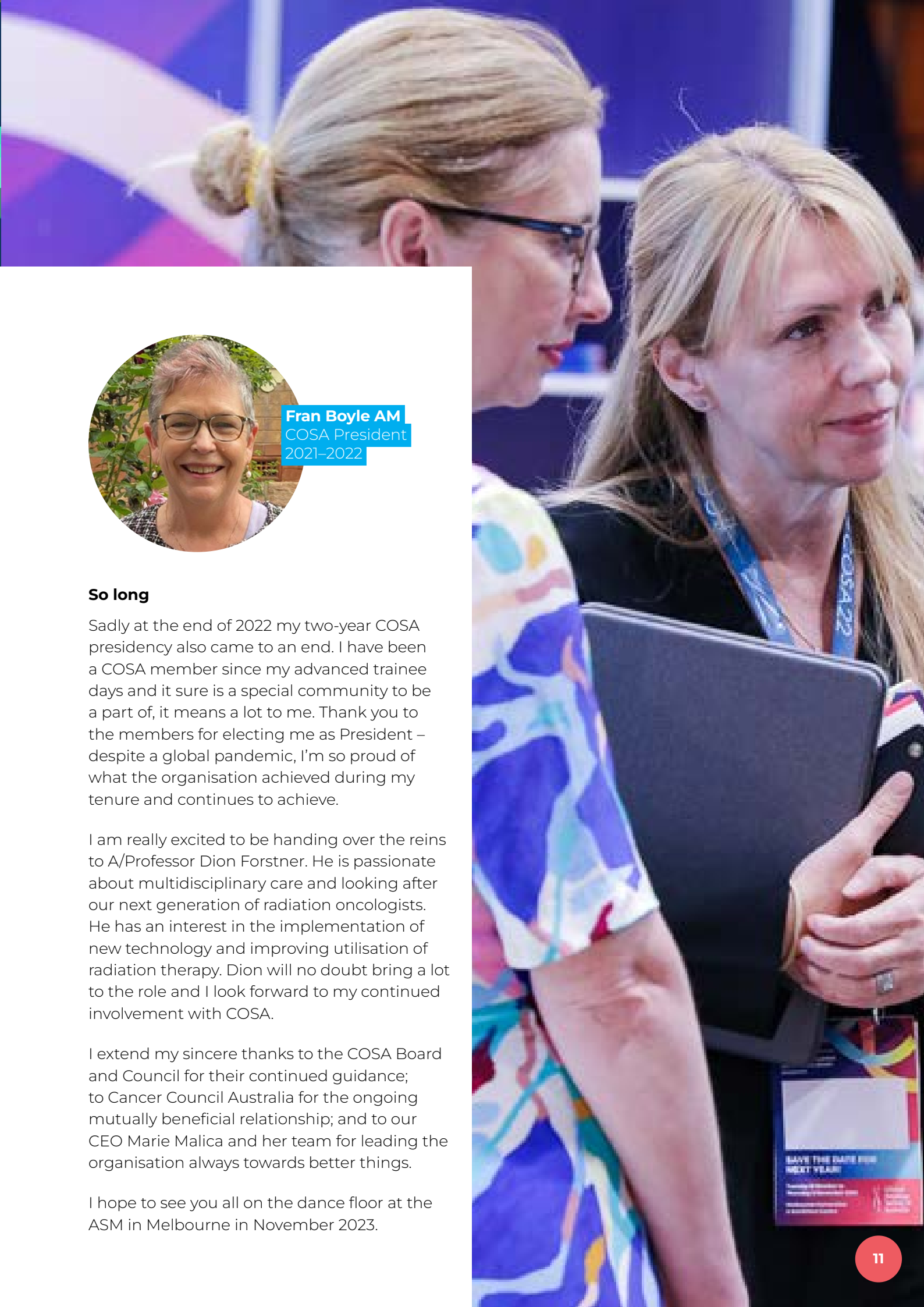
Governance

This year we farewelled Peter Dowding from the COSA Board, having served for eight years as a co-opted director and Chair of the Audit, Risk and Finance Committee. Having non-medical, co-opted directors on the Board brings valuable, independent, objective expertise, guidance and leadership, and Peter excelled in all areas. We are so grateful for all that Peter contributed.

Peter Hooker filled the vacancy as an incoming co-opted Director. Peter Hooker is an experienced non-executive director who has contributed his finance, strategy and risk management expertise to a number of health sector boards, most recently the Psychology Board of Australia. He currently works as a business mentor and advisor with a particular interest in values-based leadership, and holds the GAICD qualification and is a Fellow of the Finance and Securities Institute of Australia.

The Board met six times in 2022, with a focus on strategy, particularly member engagement. The Audit, Risk and Finance Committee, a sub-committee of the Board, also met five times.

COSA Council is our main Clinical and Scientific Advisory Group, and consists of the COSA Group Chairs and a representative from each of the Affiliated Organisations. Council met twice in 2022 – once virtually in May and face-to-face before the ASM in November. All the meetings were very well attended, with highly engaged participation and informative agendas.



Fran Boyle AM
COSA President
2021–2022

So long

Sadly at the end of 2022 my two-year COSA presidency also came to an end. I have been a COSA member since my advanced trainee days and it sure is a special community to be a part of, it means a lot to me. Thank you to the members for electing me as President – despite a global pandemic, I'm so proud of what the organisation achieved during my tenure and continues to achieve.

I am really excited to be handing over the reins to A/Professor Dion Forstner. He is passionate about multidisciplinary care and looking after our next generation of radiation oncologists. He has an interest in the implementation of new technology and improving utilisation of radiation therapy. Dion will no doubt bring a lot to the role and I look forward to my continued involvement with COSA.

I extend my sincere thanks to the COSA Board and Council for their continued guidance; to Cancer Council Australia for the ongoing mutually beneficial relationship; and to our CEO Marie Malica and her team for leading the organisation always towards better things.

I hope to see you all on the dance floor at the ASM in Melbourne in November 2023.

CHIEF EXECUTIVE OFFICER'S REPORT

I'd like to start my report by thanking all COSA members for their expertise, time, and dedication this year to COSA's vision that all people with cancer have equitable access to care and equitable outcomes from that care.

From our first face-to-face Annual Scientific Meeting (ASM) in three years, to new clinical guidelines, advocacy headway, inaugural educational events, facilitating collaboration and research, and so much more – it has been another hugely successful year for our unique multidisciplinary community.

For more information on the success of this year's ASM, please see the Convenors' Report. However, it would be remiss of me not to highlight next year's celebrations which marks COSA's 50th ASM! It will be held 1-3 November 2023 in Melbourne. This unique opportunity gives us the chance to reflect on the last 50 years of COSA meetings, as well as look forward to our future as an organisation and community. I hope you will join us for this milestone in our history.

What was new in 2022

The new COSA website

It was an enormous undertaking but we were thrilled to launch a new-look website in June. Ensuring that it meets our members' needs and facilitates collaboration, advocacy, education and research were our top priorities.

Survivorship Research Fellows

We appointed four new 2022/23 Survivorship Research Fellows who will each take on a project aiming to advance survivorship research and improve outcomes for all Australians after cancer treatment. They will

undertake these projects with mentorship, guidance and support from the COSA Survivorship Executive Committee. You can read more about this program in the Survivorship Group report.

Tackling Ageism in Cancer Care

We were so delighted to host the inaugural, online, two-part Ageism in Cancer Care Forum in November. This world-first initiative sparked an important conversation on this topic and connected a community of champions dedicated to recognising and addressing ageism. You can read more about it in the COSA Geriatric Oncology Group's report.

Do not forget that COSA members can access webinar recordings of both evenings, whether they were able to attend or not.

We also published a number of media releases on our activities and advocacy efforts, as well as hosted collaborative webinars throughout the year. I encourage you to check out other COSA activities on our website, as well as get to know our members via our popular videos on our YouTube channel.

Changing of the guard

COSA Council is responsible for COSA activities and provides advice to the COSA Board. Council membership comprises the President and President-Elect, the Immediate Past President, the Chair of each COSA Group and the nominee of each Affiliated Organisation. COSA Council meetings present an excellent opportunity for networking, education and professional development.

There were several new appointments to COSA Council in 2022:



Marie Malica
Chief Executive
Officer

COSA Groups	Outgoing Chair	Incoming Chair
Epidemiology Group	A/Prof Haitham Tuffaha	Dr Ashley Hopkins
Gastrointestinal Cancer Group	Prof Desmond Yip	Dr Connie Diakos
Gynaecological Oncology Group	Vacant	Professor Linda Mileshekin
Regional and Rural Group	Prof Rob Zielinski	Dr Wei-Sen Lam
Affiliated Organisations	Outgoing Representative	Incoming Representative
Australia New Zealand Gynaecological Oncology Group (ANZGOG)	A/Prof Philip Beale	Prof Clare Scott
Australia and New Zealand Head and Neck Cancer Society (ANZHNCS)	Dr Brian Stein	Dr Tsien Fua
Breast Cancer Trials	Prof Bruce Mann	Prof Sunil Lakhani
Cancer Symptom Trials	Prof Katherine Clark	Dr Rayan Saleh Moussa
Thoracic Oncology Group Australasia (TOGA)	New Affiliated Organisation	Prof Michael Millward

Membership

The Board approved 113 new members in the 2021/22 financial year. There was however a decrease in overall membership subscriptions, with 254 members from 2021 not renewing. As a member-based organisation, these fluctuations in membership can present some challenges for COSA. We urge all members to renew every year, and to encourage their colleagues to join and become involved in the range of COSA activities as demonstrated in the Group reports.

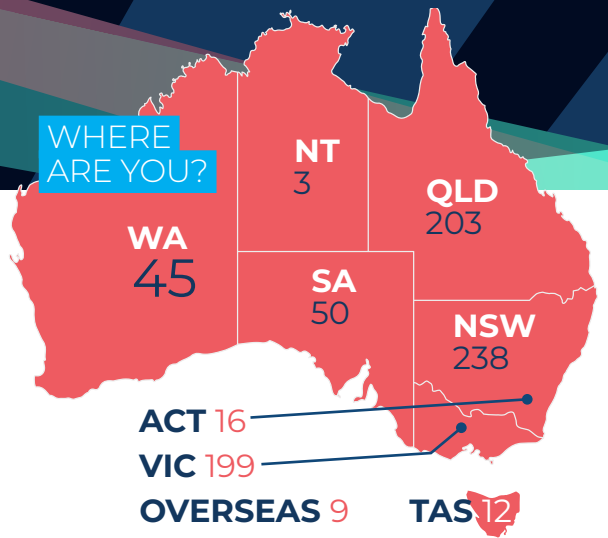
Thanks and acknowledgements

Firstly, I want to extend my heartfelt thanks to our out-going President, Fran Boyle. I am sure Fran never expected her tenure would be conducted during a pandemic, which meant chairing Board and Council meetings from her home office (accompanied by her trusty greyhound, Archie), and attending two virtual

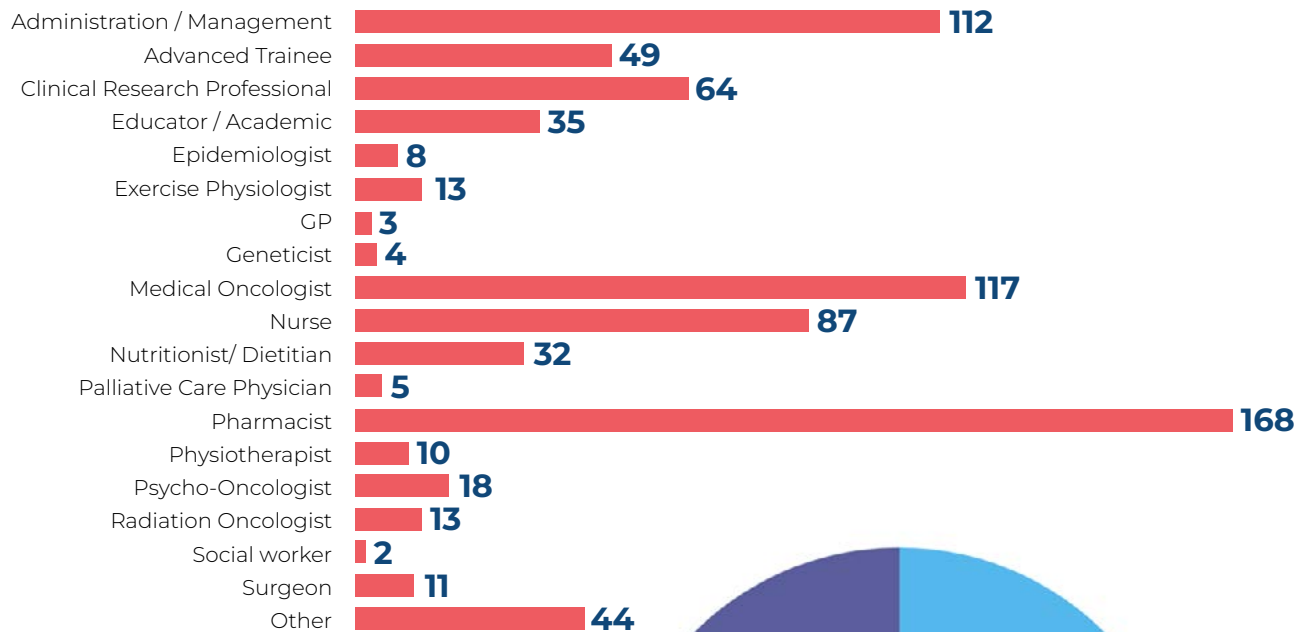
COSA ASMs which disappointingly kept her away from the COSA dancefloor. We must do our best to appropriately acknowledge her at the 2023 COSA ASM in Melbourne.

Lastly, but importantly, I would like to thank the COSA team for their commitment and passion to our members and our mission. Our Project Managers, Rhonda DeSouza, Hayley Griffin and Gillian Mackay, support the COSA Groups' activities, so that we can continue to make an impact in the world of oncology. The team would be lost without the experience and assistance of Fran Doughton who supports us all. This year, we also benefited having Rosannah Girdlestone join the team as Communications Manager. She will be on parental leave from January 2023 and we welcome Roger Falconer-Flint who will continue her projects in the meantime.

COSA SNAP SHOT

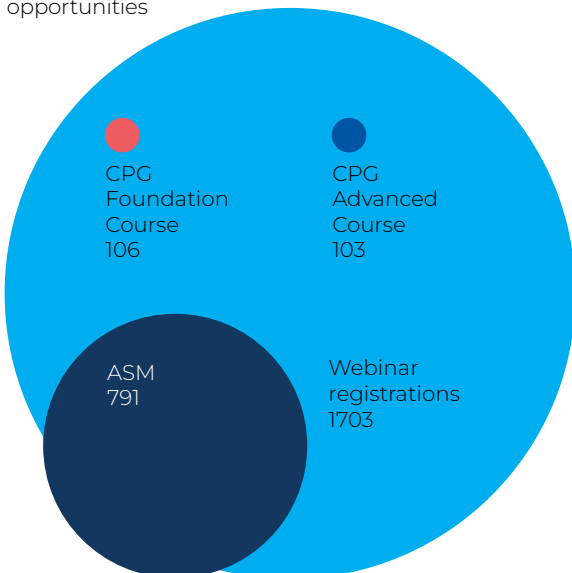


WHO ARE YOU?



WHAT DID YOU ATTEND?

2022 COSA education opportunities



284 Supporting cancer survivors to address fatigue and weight problems

125 Models of care to support older people with cancer

217 Unzipping the taboo – addressing sexuality and intimacy as part of cancer care

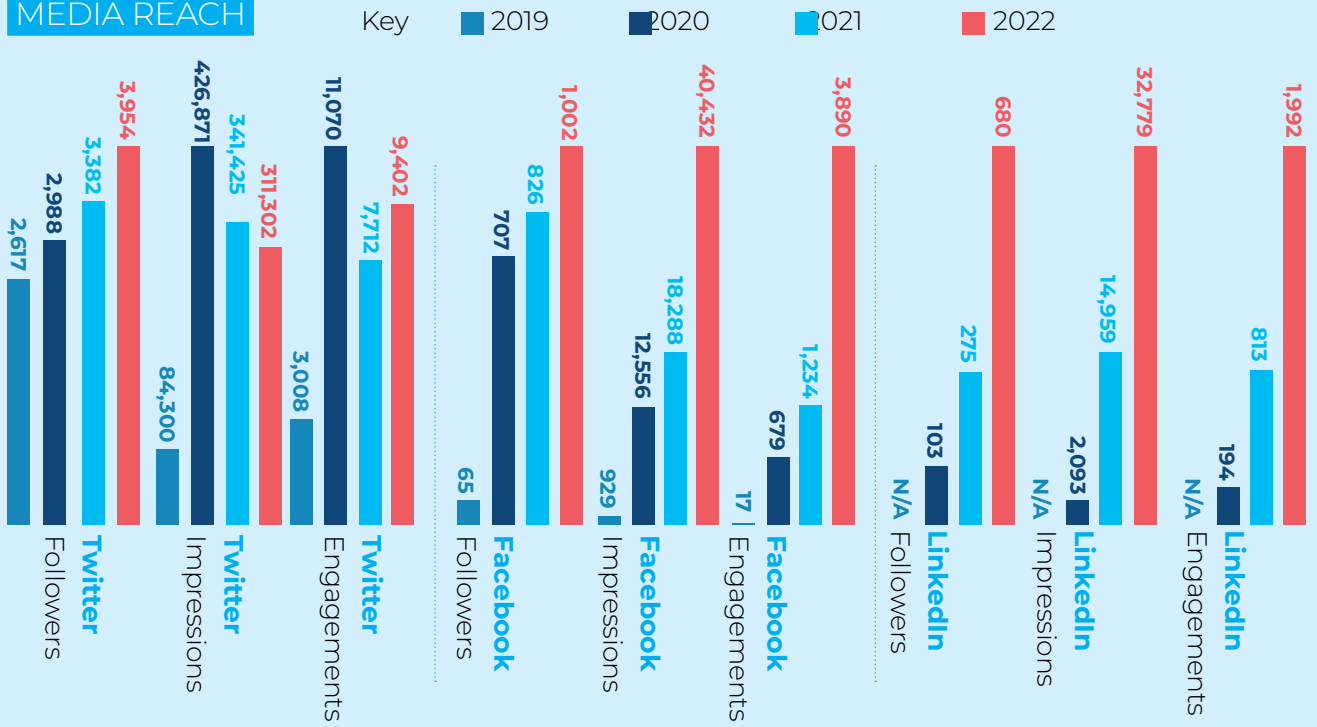
125 Cognition and delirium for older adults with cancer

129 Cancer care in the older person – ethical dilemmas

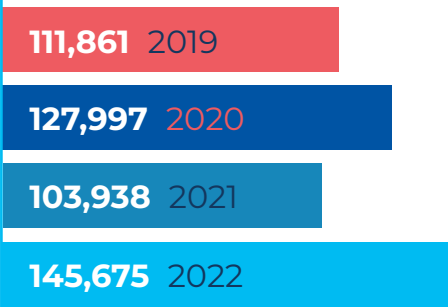
163 Ageism in Cancer Care Online Forum - Evening 1

163 Ageism in Cancer Care Online Forum - Evening 2

SOCIAL MEDIA REACH



COSA.ORG.AU PAGE VIEWS

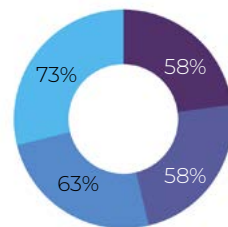


COSA.ORG.AU PAGE VIEWS

COSA eNews Group eNews
 COVID Updates Cancer In the News

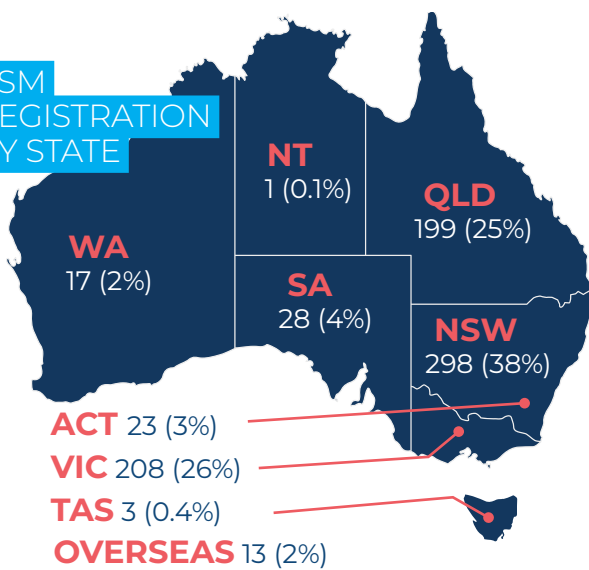
WHY ATTEND THE ASM?

Network with other health professionals
 Attend key sessions in relevant to my practice

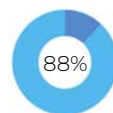


Learn about new research, trial and innovation programs in cancer care and control
 Present my work/research

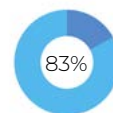
ASM REGISTRATION BY STATE



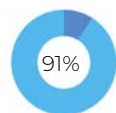
ASM POSITIVES



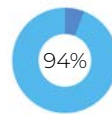
Educational content was of a high quality



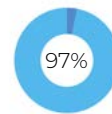
Knowledge gained will impact on their practice



Multidisciplinary integration was successful



Attending the conference was worthwhile



Would attend/recommend others attend future COSA ASMs

REGISTRATIONS 791
 ABSTRACTS 332

#COSA22 tweets 3,033

#COSA22 impressions 6.046 million

CONVENORS' REPORT

We held steadfast in our optimism, and it paid off! How fantastic it was to connect with so many COSA members and our wider oncology networks face-to-face in Brisbane in November. 88% of our evaluation survey respondents agreed, stating their motivation to attend was the opportunity to network with other health professionals.

We chose the theme **“Equitable cancer care for all: Gender, identity, culture, geography, and disease should not matter”** because we were keen to focus on health equity in terms of treatments and outcomes. This led us to focus on vulnerable patients with poor outcomes such as regional and rural patients, Aboriginal and Torres Strait Islander people with cancer, as well as people from culturally and linguistically diverse groups. We ensured the program represented all groups – people who identify as LGBTQI+, the old and the young, and everyone in between.

In terms of clinical themes, the program had a focus on lung cancer. This theme was very well received when we last featured it in 2014. There has been a lot of progress since then, especially when you consider how far we've come towards a national lung cancer screening program and lung cancer's impact on advances in treatment such as immunotherapy. Unfortunately, lung cancer is the leading cause of cancer death and the fifth most common cancer diagnosed in Australia, excluding non-melanoma skin cancers. It is responsible for almost one in five cancer deaths in Australia. Despite recent advances in treatment, more can be done to improve the care we give to patients with lung cancer – which was a focus of the meeting.

For the first face-to-face meeting in three years, and with no virtual component, we were blown away by its success:

- Almost 800 registrations
- Over 330 submitted abstracts submissions
- Breakfast sessions and dinner symposia over capacity
- Sponsorship target exceeded

Other notable highlights include #COSA22 trending at number 1 on Twitter in Australia during the conference! This shows just how strong the engagement was from our delegates (and those who couldn't be there but tuned in for session highlights on Twitter!). The hashtag also received over 6 million impressions and 3,000 tweets.

We agree with so many of the survey evaluation respondents – Messina was a big hit in the exhibition hall. Hopefully one of the sponsors brings them back in 2023. But in all seriousness, 94% of respondents stated that attending the conference was worthwhile, 88% said the educational content was of a high quality, and 97% reported an increase in their knowledge!

Thank you to our outstanding Program Committee, as well as all our speakers and presenters. We hope everyone who attended found it as valuable and enjoyable as we did.



Rahul Ladwa
2022 COSA ASM
Co-Convenor



Sabe Sabesan
2022 COSA ASM
Co-Convenor

TOM REEVE AWARD

for Outstanding Contributions to Cancer Care



2022 RECIPIENT
PROFESSOR
JOHN THOMPSON

COSA was pleased to present the 2022 Tom

Reeve Award to Professor John Thompson at the 2022 COSA ASM in Brisbane, where he delivered an earnest oration.

Professor Thompson is a surgical oncologist who has spent his career focusing on the improvement of outcomes for patients diagnosed with cancer, and is recognised as an expert in the diagnosis and evidence-based management of melanoma.

As one of his nominators said, "There is no surgeon in Australia, with an interest in cancer and treating patients with malignant disease, with the profile held by John, nationally or internationally. I believe he would truly be a worthy recipient of this award and I sincerely believe that Tom Reeve would be delighted and very proud to see John receive it." When Tom Reeve himself was notified, he was truly delighted and conveyed his heartfelt admiration for Professor Thompson.

Professor Thompson is Emeritus Professor of Melanoma and Surgical Oncology at The University of Sydney and Clinical Professor of Surgery at the University of Western Australia. He was the Director of the Sydney Melanoma Unit from 1998 and from 2007 was the Executive Director of Melanoma Institute Australia until the end of 2016. He has been author of over 950 peer-reviewed research articles in the scientific literature.

Professor Thompson is a past President of the International Sentinel Node Society, and was Chair of the Australian and New Zealand Melanoma Trials Group for 15 years. He is a member of the Melanoma Staging Committee of the American Joint Committee on Cancer,

and chairs the Working Group that developed and regularly updates the Australian Clinical Practice Guidelines for the Management of Cutaneous Melanoma. He is an Honorary Fellow of the American Surgical Association and the American College of Surgeons, and is a Fellow of the Australian Academy of Health and Medical Sciences.

Professor Thompson is an outstanding and committed clinician, researcher, educator and mentor. He generously and liberally shares his experience and time with others and has acted as a teacher and mentor to successive generations of medical students, doctors in training, researchers, and senior clinicians. Many of his mentees over the past 20-30 years have themselves become accomplished international clinical and research leaders in the field of oncology, an objective testament to his tireless efforts to promote scientific achievement and clinical and translational research collaboration worldwide.

Professor Thompson delivering his oration at the 2022 COSA ASM



Friends and colleagues, John Thompson and Alan Coates, catching up at the 2022 COSA ASM social



COSA ASM CONFERENCE 2022



Judy Bauer, Teresa Brown and Merran Findlay (L-R)



Who doesn't love a bit of Giant Jenga



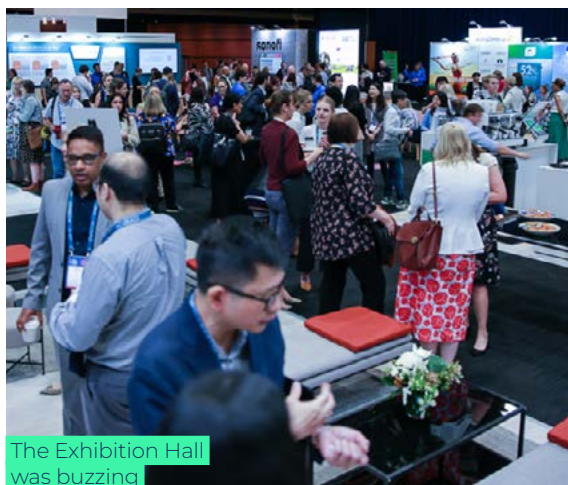
Taking in the Brisbane skyline



David Mizrahi and Desmond Yip



Carolyn Mazariago, Bogda Koczwar and Rebecca Venchiarutti (L-R)



The Exhibition Hall was buzzing



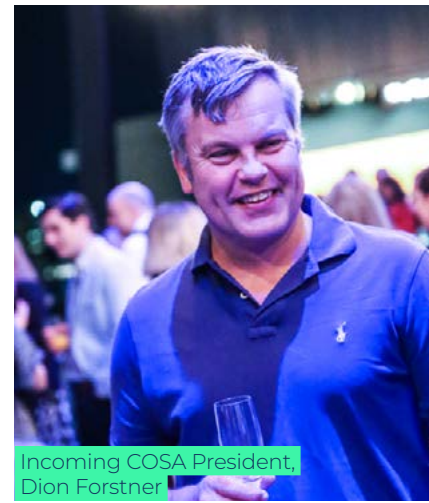
Christopher Steer, Michael Krasovitsky and Wee-Kheng Soo (L-R)



Fireside and The



The COSA Social, the place to be!



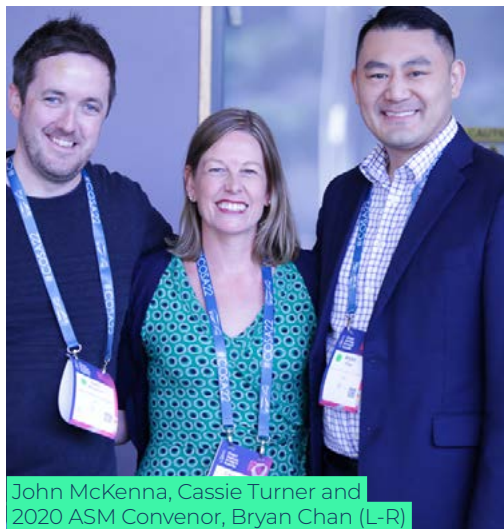
Incoming COSA President, Dion Forstner



They call it Nut Bush...



Rob Zielinski and Sabe Sabesan



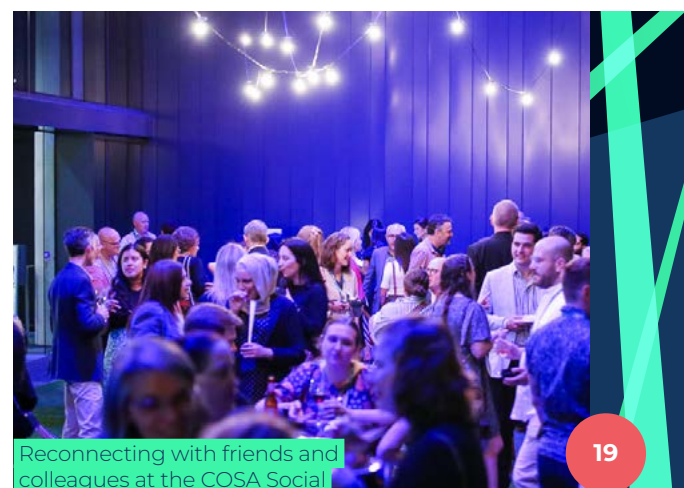
John McKenna, Cassie Turner and 2020 ASM Convenor, Bryan Chan (L-R)



Chat with Christopher Steer and the Honourable Greg Hunt



Gail Garvey and Desmond McGrady



Reconnecting with friends and colleagues at the COSA Social

COSA GROUP REPORTS



CANCER PHARMACISTS GROUP

The Cancer Pharmacists Group (CPG) certainly had a busy and productive 2022! On behalf of the CPG Executive Committee, we as Co-chairs, Marissa Ryan and Geeta Sandhu, would like to express our thanks to CPG members for their engagement with CPG, including attendance at educational events. We also acknowledge the immense and continued support from COSA which plays a significant role in the success of our activities. The CPG Annual General Meeting was held on 14th December 2022.

CPG Membership and Committee update

Currently our membership is at 151 pharmacists, up 11% from 137 one year ago. In terms of the CPG Executive Committee members, Zainab Reslan went on maternity leave, and we welcomed our newest Committee member, Neil Lam. The CPG Executive Committee currently consists of the following members:

- Marissa Ryan (Co-chair)
- Geeta Sandhu (Co-chair)
- Kimberley-Ann Kerr (Deputy Chair)
- Gail Rowan
- Courtney Oar
- Chi Hao La
- Kate Wright
- Marliese Alexander
- Sonia Cuan
- Neil Lam

Educational events

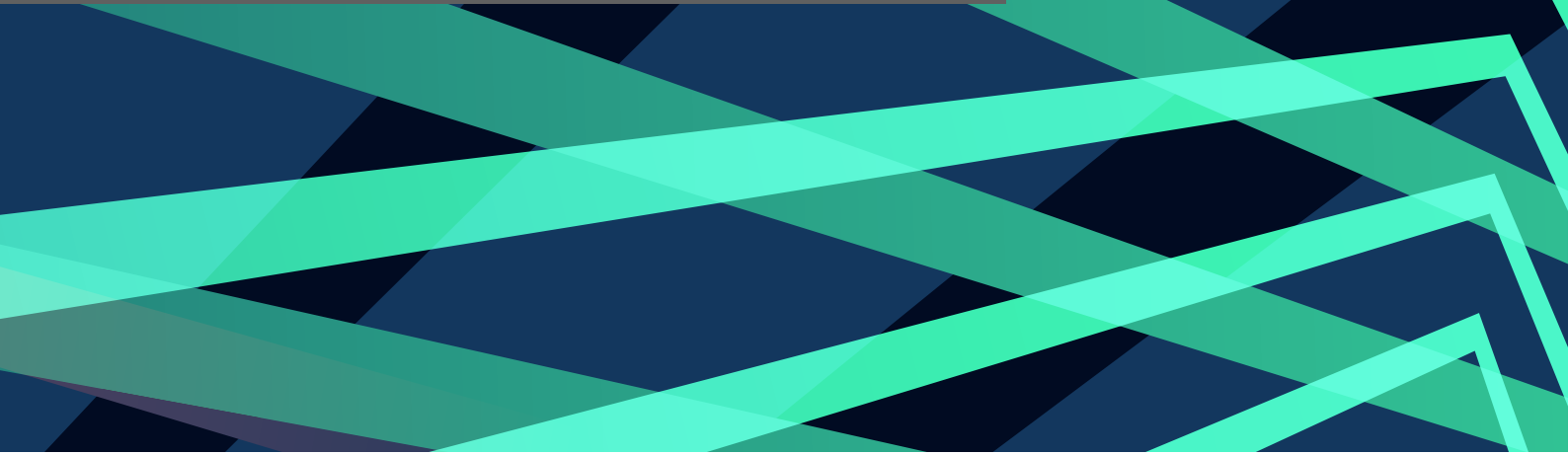
The CPG held three main educational activities in 2022- Foundation Clinical Practice for Cancer Pharmacists, Advanced Clinical Practice Course, and a Pre-ASM Clinical Development Workshop.

Foundation Clinical Practice for Cancer Pharmacists Course, 5th and 12th June 2022

The Foundation Course (14th year) was delivered to the next generation of cancer pharmacists as a mix of pre-recorded video lectures and face-to-face interactive workshops and panel discussions. The course conveners (Geeta Sandhu, Courtney Oar, Marissa Ryan) and invited expert speakers (Jim Siderov, Christine Carrington, Gail Rowan, Chi Hao La, Daniel McKavanagh, and Kimberley-Ann Kerr) were excited to be able to return to running the course face-to-face, and unsurprisingly attendance capacity was reached yet again. A cocktail style function was enjoyed by speakers and delegates on the Saturday evening, giving attendees the opportunity to relax and network with colleagues and speakers from Australia and New Zealand.

Advanced Clinical Practice Course, 3-4 September 2022

The 10th Advanced Clinical Practice Course was held in Melbourne, convened by Kimberley-Ann Kerr, Gail Rowan, and Kate Wright. The sessions included a range of clinical and practice updates as well as interactive and informative workshops targeted at more experienced cancer pharmacists. Some of the excellent content included a clinical update on upper gastrointestinal cancers, a presentation on combining different types of



therapies, and workshops on incorporating pharmacogenomics into daily practice, understanding the complexities of adolescent and young adults with cancer, and research in practice.

Clinical Development Workshop, 1st November 2022

Another engaging CPG Clinical Development Workshop was held prior to the start of the COSA ASM, convened by Courtney Oar and Neil Lam. Over 30 attendees used the opportunity to further their knowledge and develop their skills over four interactive sessions presented by a medical oncologist and senior cancer pharmacists. Our first and second sessions showcased a lung therapeutics update, a research presentation on attraction and retention of Australian cancer pharmacists, a lung cancer and end of life care presentation, followed by clinical case presentations. After lunch, delegates participated in the Pharmacy Anti-cancer Drug Administration Course (ADAC) Change Management Workshop which included an overview of the course and importantly, a robust discussion on implementation. The organisers thank all attendees, sponsors, and speakers for their time, for making this year's Clinical Development Workshop a success as always.

COSA ASM, 2-4 November 2022

CPG's contribution to the ASM saw member involvement in the ASM organising committee (Courtney Oar), delivery of presentations, showcasing of posters, judging abstracts, and chairing of sessions. The CPG-led Medicines Matters session chaired by Daniel McKavanagh comprised of four presentations- managing

toxicities of oral targeted therapies in lung cancer presented by Marliese Alexander, followed by a presentation by Malinda Itchins on drug sequencing for targeted therapies for non-small cell lung cancer. Next, Marissa Ryan presented her research on a cancer pharmacy telehealth model of care, and finally, Geeta Sandhu educated delegates on dosing anticancer drugs in frail patients as well as a general renal dosing update. Kimberley-Ann Kerr participated in the multidisciplinary panel for the Geriatric Oncology Breakfast Session. Congratulations to the CPG members also presented accepted oral abstracts and posters during the ASM. Overall, the program provided a varied scope of topics for cancer pharmacists and other interested healthcare professionals.

Pharmacology of Cancer Chemotherapy for Advanced Trainees workshop

The Pharmacology of Cancer Chemotherapy for Advanced Trainees workshop (planned to be presented by Christine Carrington and Dan McKavanagh) was not held in 2022. Plans for this workshop in 2023 are to be confirmed.

Advocacy, Consultation, Collaboration and Review

Safe Handling of Monoclonal Antibodies in Healthcare Settings- Update

The Clinical Oncology Society of Australia Position Statement: 2022 update to the safe handling of monoclonal antibodies in healthcare settings was endorsed by the CPG and COSA Council late last year and has been accepted for publication by Asia-Pacific Journal of Clinical Oncology. There are now 14 recommendations, and it is expected to be published early 2023.

Collaboration with other groups

COSA offered British Oncology Pharmacist Association (BOPA) cancer pharmacist Marwa Mahamuud registration as part of efforts to strengthen ties between CPG and BOPA. It was a wonderful opportunity not just for Marwa who took learnings from the ASM back to the UK, but also for CPG members to talk to Marwa about clinical cancer pharmacy in the UK.

Another priority for CPG, is involvement with other COSA groups. At the COSA ASM 2022, Kimberley-Ann Kerr participated in a panel discussion hosted by the COSA Geriatric Oncology Group to facilitate the important perspectives of cancer pharmacists in the context of providing multi-disciplinary cancer care. In addition, several of our CPG members have been involved with mentoring pharmacists in Fiji and Papua New Guinea as part of work being done with COSA's Global Oncology Group, to improve the healthcare worker capability in low- and middle-income countries.

Other activities

Members of the CPG committee have also participated in:

- Therapeutic Goods Administration (TGA) Repurposing Pharmaceutical Benefits Scheme (PSB) Medicines consultation (Geeta Sandhu and Marissa Ryan)
- The Australian Cancer Plan 2023-2023 consultation submissions (CPG members)
- Review of requests for letters of support for grant applications (CPG committee)
- Feedback on the White Paper- Integrative Oncology (Geeta Sandhu and Marissa Ryan)
- Advocating for cancer pharmacist access to Medicines Access Portal (Geeta Sandhu and Marissa Ryan)

With best wishes,

*On behalf of the CPG Executive Committee:
Marissa Ryan, Geeta Sandhu, Kimberley-Ann Kerr (Deputy Chair), Gail Rowan, Courtney Oar, Chi Hao La, Kate Wright, Marliese Alexander, Sonia Cuan, Neil Lam.*



Marissa Ryan
Co-chair, Cancer
Pharmacists Group



Geeta Sandhu
Co-chair, Cancer
Pharmacists Group



EPIDEMIOLOGY GROUP

Early in the year a call for nominations for the position of COSA Epidemiology Group Chair was sent to COSA members, which was followed by an election, and the new chair of the Group is Dr Ashley Hopkins. We also have two new Executive Committee members – Dr Rebecca Venchiarutti and Mr Natansh Modi – who join continuing members Associate Professor Haitham Tuffaha and Associate Professor Harindra Jayasekara.

The committee would like to thank Associate Professor Haitham Tuffaha who has served as the Group chair for over four years. During this time, Haitham established terms-of-reference for the Group and grew the Groups member base and exposure at the COSA Annual Scientific Meetings (ASM) – even through the disruptions of COVID. As a testament to Haitham’s continued dedication to the Group and COSA, he is continuing to advise the Executive Committee.

At COSA’s 49th Annual Scientific Meeting, held 2-4 November 2022 Brisbane Convention & Exhibition Centre, there were many great talks and poster presented. I would like to congratulate everyone for their wonderful

talks within the Best of the Best Orals – Epidemiology session and acknowledge the success of Dr Visalini Nair-Shalliker who, among a strong field, won the session prize. I would also like to acknowledge the work of Dr Rebecca Venchiarutti who was the discussant of the session – stimulating lively discussion and debate for all the talks.

Looking forward, we are very excited to observe that COSA’s 50th Annual Scientific Meeting will be held 1-4 November 2023 at Melbourne Convention and Exhibition Centre. We are pleased to advise and would like to thank Associate Professor Brigid Lynch for representing Epidemiology on the Program Organizing Committee. We are sure there will be a fantastic program put together and we very much hope to see everyone in Melbourne in 2023.



Ashley Hopkins
Chair, Epidemiology Group

EXERCISE AND CANCER GROUP

In 2022, we have thankfully seen many exercise-oncology clinical and research activities return close to 'normal'. We have widely seen that telehealth is now being integrated into many services as an integral component of care. This is great for many reasons, including that patients can safely exercise under supervision in the comfort of their own homes, particularly if they are immunocompromised (or if there is an increased wave of COVID-cases!). This has been important to ensure that patients can still receive exercise services.

As a reminder, here is a [link](#) to the updated COSA Position Statement on Exercise in Cancer Care.

2022 COSA ASM

Members of the COSA Exercise Group were well represented at the COSA 2022 ASM in Brisbane with a number of excellent presentations. There were 10 key podium presentations covering prehab, trials during treatment, in survivorship and in the palliative care phase. There were also 18 fantastic exercise-oncology poster presentations, particularly with some exciting new researchers presenting.



COSA Exercise and Cancer Group at their AGM

Please check out the [conference website](#) for all the exercise related work presented at the ASM.

Executive Committee Updates

The Exercise and Cancer Executive Committee underwent a big change in personnel in 2022. Andrew Murnane stepped down as the Exercise and Cancer Group Chair in October 2021, after two years in the position and six years on the committee. Dr David Mizrahi, Research Fellow at the Daffodil Centre (a venture between Sydney University and Cancer Council NSW), was appointed the new chair. Other members in 2021/22 to step down included Dr Elysia Thornton-Benko, Lucy Bucci, Sharni Quinn, Morgan Atkinson and Dr Sara Wahlroos. After a very competitive EOI process and vote, new members include A/Prof Kellie Toohey, A/Prof Steve Fraser, Liz Pinkham, Dr Lara Edbrooke, Prof Rob Newton and Dr Lina Pugliano. We have greatly appreciated the contribution of previous members and have been really impressed with the drive and enthusiasm of the new members.

The Exercise Group welcomes all COSA members and anyone with an interest in exercise to get involved in our initiatives. If you would like to participate in the Group's activities, please contact David Mizrahi. We encourage members from all discipline areas to participate.

2022 activities and 2023 plans

The Exercise and Cancer Group met for the AGM on 2 November 2022 to overview the year and discuss plans for 2023. These include:

- **Education:** Numerous seminars were held on exercise-oncology in 2022, e.g. Exercise & Sports Science Australia. For 2023, a pre-conference workshop on exercise-oncology is being planned for the 2023 Melbourne ASM and A/Prof Kellie Toohey is leading this working group. There is potential to hold journal club style sessions once or twice a year to bring members together.
- **Advocacy:** In 2022, our Group submitted recommendations to the Cancer Australia Plan's Initial and Revision calls, and we called for more exercise professionals in hospitals, expanded MBS access and establishment of referral pathways. Lobbying will continue between COSA and other organisations including ESSA to champion the role of exercise in cancer care. Stakeholders will be identified (hospitals, state and federal departments of health) to lobby for MBS support (increased number of exercise sessions available for cancer patients) and/or more exercise specialists in oncology hospitals. We suggested ideas to share resources online (perhaps on COSA website) such as the [Cancer Exercise Toolkit](#) led by Dr Amy Dennett. Meetings with the RACGP to endorse the Position Statement with Dr David Mizrahi, Dr Di Adams, Marie Malica and Rhonda DeSouza were unsuccessful. However, they provided other avenues to engage with their members, such as webinars, news articles, presenting at their conference, which could be a better way to engage with GPs.
- **Research:** There were great research achievements in 2022 by COSA members in

the exercise-oncology field. A/Prof Nicolas Hart was awarded an NHMRC Investigator Grant for Cancer Survivorship. Dr Amy Dennett and Dr Mary Kennedy participated in the TREC Fellowship at Yale University (USA), Dr Carolina Sandler received a Cancer Institute Fellowship to explore cancer-fatigue, and Dr David Mizrahi spent 4 months at St Jude Children's Research Hospital (Memphis, USA) on a Fulbright Fellowship investigating childhood cancer. In 2023, the Group will explore new opportunities for collaboration to promote exercise-oncology research. Examples include Opinion Pieces, Expert Commentaries, Reviews etc, both within the Executive Committee and canvassing ideas and input from the wider COSA membership. Additionally, there is discussion for a potential Exercise Group Fellowship (replicating the Survivorship Group). A meeting is planned with the Nutrition Group co-chairs to discuss whether there is potential of combined fellowship across Nutrition/Exercise Groups.

Exercise Implementation Working Group:

This has remained on hold since due to COVID disruptions. Updates are being sought on the progress of this Group to finalise the implementation plan for the position statement and develop new resources. These will include a clinician handout, patient handout and FAQs. The COSA Exercise Executive Committee will liaise with the Exercise Implementation Working Group on this project in 2023.



David Mizrahi
Chair, Exercise and
Cancer Group

GERIATRIC ONCOLOGY GROUP

2022 has been another productive year for the Geriatric Oncology Group, and we thank all our members who are involved with our initiatives and provide their time and expertise to improve outcomes for older adults with cancer.

We have been working to ensure geriatric oncology principles and priorities are considered in the development of the **Australian Cancer Plan** by Cancer Australia. We made submissions in [March](#) and [December](#) detailing what will be needed to improve outcomes for older adults with cancer, and we also met with Cancer Australia to consult on key objectives and goals. We have advocated for systemic reform of cancer care that reflects that older people are the majority of people diagnosed with cancer – we believe that if the Australian Cancer Plan directly addresses the needs of older Australians with cancer it will be transformative for all Australians with cancer, and we continue to advocate for collaborative models of person-centred care that enables individualised care.

[Geriatric Oncology Emerging Experts and Researchers – GOEER](#), an initiative led by Dr Michael Krasovitsky, has continued to grow. GOEER brings together an interdisciplinary range of ‘emerging experts and researchers’ from across Australia with an interest in geriatric oncology. GOEER has a number of active projects underway including research endeavours, advocacy programs and geriatric oncology implementation reviews. GOEER also has a strong educational presence and starts each meeting with a learning session on a topic of interest. Past presentations have included cardiovascular health in older survivors of cancer, perioperative geriatric oncology, and geriatric oncology within geriatrics training.

Under the leadership of Dr Michael Krasovitsky and support of GOEER we hosted the inaugural online [Ageism Forum – Tackling Ageism in Cancer Care](#). The Forum brought together a range of cancer clinicians, geriatricians, consumers and world-leading ageism experts to facilitate an open and respectful discussion of how ageism affects our patients and our colleagues. Recordings and resources are available on our [Group page](#).

We aim to provide educational opportunities for our members, and we continued our **webinar series** in collaboration with the Cancer Nurses Society of Australia. Three webinars were led by recognised leaders in geriatric oncology and were very well received: Cancer care in the older person – ethical dilemmas; Cognition and delirium for older adults with cancer; and Models of care to support older people with cancer. Our webinar series has helped increase knowledge and provide practical guidance to enhance the critical skills required to advance care and improve outcomes for older adults with cancer. Recordings are available to members on our [Group page](#).

We were pleased to host another geriatric oncology breakfast session at the **2022 COSA ASM**, led by Dr Penny Mackenzie and Dr Darshit Thaker – [Multiple medications, multiple comorbidities: what do cancer professionals need to consider to optimise care of the older person with cancer](#). Other 2022 COSA ASM highlights included presentations on [Frailty through the lens of geriatric oncology](#) and [Integrated geriatric assessment and treatment effectiveness \(INTEGRATE\) in older people with cancer starting systemic anticancer treatment: a multi-centre, open-label, randomised controlled trial](#) (Dr Kheng Soo); [The Language of Ageism](#) (Dr Michael Krasovitsky); and [Stigma and Ageism](#) (A/Professor Christopher Steer).

We have continued to keep members updated on the latest information and research in the geriatric oncology space through our twice-yearly [GO eNews](#) and we thank our editors Dr Kheng Soo and Dr Polly Dufton for their editorial leadership.

We continued our work developing the **Australian Geriatric Oncology Guidelines**, and have been pleased with the level of engagement from a broad range of interdisciplinary clinicians from across Australia. Guidelines in progress include screening older adults for geriatric assessment, and guidelines for referring older adults with cancer for systemic anti-cancer therapy, surgery, and radiotherapy. Reviews in the topic areas of chemotherapy, surgery and radiation are near completion. COSA is working with Cancer Council Australia to determine optimal online access to the guidelines to support clinicians providing care for older people with cancer.

Two of our Executive members provide important **linkages with international geriatric oncology initiatives**. Dr Heather Lane continues in her role as Australia's International Society of Geriatric Oncology (SIOG) representative and provides a 2022 report below; and A/Professor Christopher Steer is working with the Cancer and Aging Research Group (CARG). These connections highlight the importance of collaborating and sharing learnings on the same issues that face geriatric oncology both in Australia and internationally, and working together on our common goal to improve outcomes for older adults with cancer.

The International Society of Geriatric Oncology (SIOG) – 2022 update

2022 commenced with the second edition of the Canberra Advanced Course, held virtually in January. The course focused

on key principles in geriatric oncology and multidisciplinary case-based discussions to enable participants to consider these principles in a clinical context. The SIOG conference was held as a mixed-format meeting in Geneva, Switzerland in October 2022. The theme of Celebrating resilience was explored, including measuring and operationalising this concept, representing a shift towards a more holistic evaluation of our older patients. The inaugural SIOG 2022 Advanced Course was hosted online by the Tata Memorial Hospital from Mumbai, India in November 2022, and speakers attended from Australia, Europe, India and Singapore. The highly engaged audiences and clinically relevant multidisciplinary case discussions that take place at the SIOG forums continue to demonstrate that geriatric oncology principles are international, and the value of our collaborations and shared learnings. SIOG has continued to produce [guidelines](#) and research including efficacy of anti-dermal growth factor receptor agents in patients with RAS wild-type metastatic colorectal cancer ≥ 70 years. SIOG also provides a range of educational opportunities and information including [webinars](#), and a regular [blog](#) providing a broad variety of articles ranging from expert opinions on specific aspects of care of older adults with cancer to more practical view on the role of oncogeriatrics in an ageing world.



Meera Agar
Chair, Geriatric
Oncology Group

GLOBAL ONCOLOGY GROUP

Papua New Guinea

The main focus of the Global Oncology Group in 2022 has been involvement in providing assistance with the commissioning of the Port Moresby General Hospital (PMGH) Cancer Centre which is due to open in September 2023. This has been in collaboration with a number of different stakeholders. Ms Cath Beaufort from Alfred Health Radiation Oncology convened planning meetings throughout the year to assist with the education of various staff from PMGH and interested staff from Australian centres including nursing, radiation oncology, medical oncology and radiation physics, including members of the Asia Pacific Radiation Oncology Special Interest Group (APROSIG).

1. Nursing training

Ongoing training of PMGH oncology nurses by retired clinical nurse consultants Ms Wendy Spencer (Medical Oncology) and Dr Pauline Rose (Radiation Oncology) by videoconferencing continued through 2022. Dr Rose visited PMGH in November and had also met with their senior nursing staff at conferences in Australia. The Australian Volunteers International (AVI) grant applications for both CNCs were successful for in-country training visits and negotiations have been ongoing regarding the duration and timing of these. Through the ACT Government Workforce Development in Other Nations Program, administered by the Chief Nursing and Midwifery Office, funding has been approved for 4 PMGH nursing to come to the Canberra Region Cancer Centre for clinical attachments in 2023. A similar training option for nurses to visit the Peter MacCallum Cancer Centre is still being explored.

A possible source of external funding for training visits of professional staff from developing nations is through the Commonwealth Department of Foreign Affairs and Trade (DFAT) [Australia Awards Fellowships](#).

2. Medical Training

Ongoing dialogue has been maintained with the clinical oncologists, Drs Priya Baskaran and Karthik Periasam regarding service development. Funding for a Travelling Observership was obtained from the John James Foundation for Dr Peter Olali a medical oncologist from the PMGH for a one month visit to the Canberra Region Cancer Centre. This visit was initially planned for October but deferred to February 2023. The purpose of the visit will be to upskill in haematological and solid tumour management and the multimodality treatments incorporating radiotherapy. Existing and planned workflows in the oncology unit have been scoped and advice provided. Assistance has been given with respect to developing resource stratified guidelines and treatment protocols for the common malignancies.

3. Oncology Pharmacy Training

Ms Marissa Ryan Chair of the COSA Cancer Pharmacists Group and Global Oncology Group Executive Member has continued to mentor the three Oncology Pharmacists from PMGH. The aim is to have a pharmacist led cytotoxic mixing service. Advice has been provided on how workflows would work as well as safe disposal and cytotoxic handling.

4. Radiation therapist and Physicist Training

This has been the purview of APROSIG who submitted an application this year to the Royal Australian and New Zealand College of Radiology for an International Development Fund Grant to bring a team over to Australia for training in 2023.

Engagement with other organisations

1. Radiology Across Borders (RAB)

[RAB](#) is a Sydney based charitable organisation involved in helping developing nations in building their capabilities in radiology by education and in country visits. They have an extensive online library of training modules, film bank and other resources assessable without charge and conduct frequent online lectures and webinars attended by hundreds of radiologists internationally. They have provided mentorship to colleagues in the developing nations and have long standing relationships in the South Pacific region. RAB has also collaborated with the University of British Columbia to provide international certification in Radiology Fundamentals. Following discussion with the oncology staff at both the Port Moresby General Hospital (which has CT and MRI capability) and the National Referral Hospital in Honiara Solomon Islands (which had its first CT scanner operation in 2022), it was recognised that there was a need to develop interventional radiology skills in these nations in order to allow clinicians to be able to more accurately diagnose and stage malignancies. A meeting with the Founder, A/Professor Suresh de Silva, to discuss this need has led to RAB producing a series of interventional radiology training videos to assist in this aim.

2. International Society of Paediatric Oncology-Oceania Continental Branch (SIOP-Oceania)

Meetings have been held with Professor Claire Wakefield (UNSW) the president of [SIOP-Oceania](#), paediatric oncologists Dr Michael Osbourne from Adelaide and Professor Michael Sullivan (Melbourne) regarding their work in paediatric oncology with long standing relationships developed in Papua New Guinea, Timor Leste, Fiji, Samoa, Solomon Islands and Cambodia. The Group works closely with the Australian and New Zealand Childrens' Haematology/Oncology Group (ANZCHOG). With the opening of international borders, the SIOP Oceania ANZCHOG Workshop in July 2022 was attended by delegates from nine

countries. The Group has supported developing nations in collecting data through registries, developing resource specific treatment protocols for paediatric malignancies and training local staff to be able to manage these cancers. Although their work has been predominantly with the local paediatricians in these nations there is considerable overlap and synergy with the work required to develop adult cancer services. Both SIOP-Oceania and the COSA Global Oncology Group resolved to work collaboratively in these endeavours.

3. The McCabe Centre for Law and Cancer

The [McCabe Centre](#) is a WHO Collaborating Centre on Law and Noncommunicable Disease and the Knowledge Hub for legal challenges to implementation of the WHO Framework on Tobacco Control. works in reducing global inequalities in cancer through law. The centre is thus involved in the preventative space with tobacco control but also provide legal training to lower and middle income country stakeholders for capacity building. Following a meeting with Ms Hayley Jones the Director COSA supported the McCabe Centre in preparing a separate submission to the DFAT New International Development Policy stakeholder public consultation announced by the new government. The submissions stressed the need to prioritise health in the area of cancer and non-communicable disease in the Indo-Pacific region and for sustained investment in health partnerships.



Desmond Yip
Chair, Global
Oncology Group

NEUROENDOCRINE TUMOURS GROUP

As I reflect on the COSA Neuroendocrine Tumours (NET) Group in 2022, I am again filled with thankfulness to the working group who have given their time and energy to improve the care of patients with NETs over the last few years.

I am glad to report that the [COSA Neuroendocrine Neoplasms \(NENs\) Guidelines](#) were open for public consultation in November 2022. They are currently under review by several Australian cancer organisations, and we anticipate that the final version will be published in Q2 of 2023 on a new web-based platform.

The Neuroendocrine Neoplasms (NENs) guidelines replace the 2010 Neuroendocrine Tumours (NETs) guidelines. These guidelines were updated for two main reasons. Firstly, there have been significant advances made

in NEN treatment over the past decade – both an increasing understanding of their molecular basis, and also an explosion of trials showing the efficacy of various systemic therapies (everolimus, sunitinib, PRRT). Secondly, we wanted to recognise the increasing evidence in areas such as MEN1 and supportive care (diet and nutrition, psychosocial care and exercise) by expanding the scope of the guidelines.

The NET Executive Committee would like to encourage all interested COSA members to get involved in the NET Group. Now that the guidelines project is drawing to a close, we are open for suggestions of new collaborations or projects under the COSA NET banner.



David L Chan
Chair, Neuroendocrine
Tumours Group

NUTRITION GROUP

We find ourselves again at the year's end - the ideal time to reflect on our achievements and look forward to new opportunities. Even though, for the third consecutive year, all has not gone exactly to plan, the dedicated Nutrition Group members have continued to deliver excellence in cancer care and research worth celebrating.

In our final report for 2022, we reflect on the outstanding nutrition expertise showcased at the Brisbane ASM. We were thrilled to again welcome Professor Vickie Baracos, University of Alberta, internationally renowned expert in pathophysiology of skeletal muscle atrophy and cachexia. Professor Baracos delivered

two plenary presentations contributing to the outstanding calibre of nutrition research featured in the program. Our home-grown talent was highlighted with invited speakers Professor Marina Reeves, Dr Emily Jeffery, A/Prof Nicole Kiss, Jenelle Loeliger and many more with accepted abstracts in numerous Best of the Best sessions. It was also great to see the up-and-coming researchers and PhD candidates' research showcased and to have so many dietitians in attendance. Our sincere thanks go to Dr Teresa Brown for her significant contribution to the organising committee.

Over the past year, the Nutrition Group has undertaken further work focusing on the implementation of the COSA Position Statement of Cancer-Related Malnutrition

and Sarcopenia with a well-attended implementation workshop at the Dietitians Association ASM in Adelaide in August and a fully subscribed breakfast session at the COSA Brisbane ASM in November. Our plans for 2023 include further collaboration with our multidisciplinary cancer colleagues with a focus on activities that support the implementation of the position statement and to also progress the updates to the COSA evidence-based guidelines for nutritional management of adult patients with head and neck cancer according to the timeline for the transition to the new wiki platform.



Our congratulations go to Elaina Elder-Robinson as the recipient of the 2022 Dietitians Australia External Conference Research Prize for her work on “Health

behaviours of Indigenous and non-Indigenous cancer survivors living in regional and remote geographic areas of Australia.”

Lastly, a reflection on the caring and compassionate multidisciplinary cancer care community we are fortunate to be part of. No doubt, many are inspired by our patients and caregivers, we would like to acknowledge their dedication in providing quality cancer care despite the challenging times.

Meanwhile, if you are interested in becoming involved with Nutrition Group projects or would like to connect regarding future collaborations where nutrition expertise can value-add to your own initiatives, please don't hesitate to reach out. The Nutrition Group welcomes new members and would love to hear from you. We hope to again see you all again in person in Melbourne for COSA 2023.



Merran Findlay
Chair, Nutrition Group

REGIONAL AND RURAL GROUP

The Regional and Rural Group is privileged with the opportunity of advocating for equity of access, improving health outcomes and quality of life for cancer care in regional and rural Australia. I was pleased to step into role of Chairperson this year and thank Dr. Rob Zielinski for his service to the Group.

In 2022, The Australian Teletrial Program, initially championed by Professor Sabe Sabesan and COSA, officially announced the implementation of the program in November. The Queensland led national initiative plans to improve health outcomes by improving access to clinical trials to rural and regional patients. Over the next 5 years, the Australian Teletrial Program, funded by the Commonwealth Medical Research Future Fund, will aim to invest \$75 Million to develop regional and rural satellite sites, upskill regional staff and provide access to metropolitan based clinical trials in rural and regional areas.

The Rural and Regional Group provided comment for the Australian Cancer Plan. We were pleased to see people living in rural and remote areas, specifically Aboriginal and Torres Strait Islander peoples were identified as priority population groups in the Australian Cancer Plan. Ongoing engagement with Cancer Australia will be a priority for the Rural and Regional Group into 2023.

We look forward to inviting new members to our Regional and Rural Group in 2023. We plan to renew our focus on advocating for rural and regional issues such as workforce issues and equitable access to care for all.



Wei-Sen Lam
Chair, Regional and Rural Group

SURVIVORSHIP GROUP

The Survivorship Group made great progress in 2022 towards our aim of advancing care and research to improve outcomes for all Australians after cancer treatment. Sincere thanks to all our members for contributing your time and expertise to support our initiatives.

Our work continues to be guided by our [Strategic Plan 2022-2024](#), which was finalised in 2022 after consultation with members. In line with our advocacy agenda, we contributed to the development of Cancer Australia's **Australian Cancer Plan**, providing submissions to inform [policy](#) and [primary care](#) perspectives in March. Our submissions were led by Professor Michael Jefford (**Survivorship Policy Working Group** Chair) and A/Professor Joel Rhee (**Primary Care Working Group** Chair). We were pleased that almost all of the priority policy actions we proposed were embedded within the draft Australian Cancer Plan. In December, we provided a further [submission](#) in response to the second consultation on this draft. We expect to continue to work with Cancer Australia and the broader community on the roll out, evaluation and monitoring of the Australian Cancer Plan.

We were delighted to appoint four new [Survivorship Research Fellows](#) in 2022, who will work on priority research projects that help build capacity in survivorship research:

- **Dr Gemma McErlean** – *Developing a practical guidance tool to assist with choice of appropriate survivorship models of care –*

Primary mentor: Professor Michael Jefford

- **Dr Md Mijanur Rahman** – *Knowledge, provision, and utilisation patterns of Chronic Disease GP Management Plans and Team Care Arrangements* – Co-Primary mentors: A/ Professor Nicolas Hart and Professor Gail Garvey
- **Dr Carla Thamm** – *Financial Toxicity and Patterns of Care for First Nations People with cancer* – Co-Primary mentors: Professor Gail Garvey and Dr Shafkat Jahan
- **Dr Rebecca Venchiarutti** – *Addressing multimorbidity in cancer survivors* – Primary mentor: Professor Bogda Koczwara

The continuation of our Fellowship program follows the success of the inaugural Fellowship round completed by Dr Fiona Crawford-Williams, Dr Carolyn Mazariego and Dr Julia Morris.

Our working groups continued to drive several priority initiatives during 2022:

The [Financial Toxicity Working Group](#) (Chaired by myself) published the results of their national survey [Opinions and strategies of Australian health professionals on tackling cancer-related financial toxicity](#) to help better understand current beliefs and practices regarding financial toxicity for cancer patients.

COSA Council approved the [definition of financial toxicity in cancer care](#). This statement helps our efforts to better measure, report and address financial toxicity, and we encourage all COSA members to use this in your own work:

The negative patient-level impact of the cost of cancer. It is the combined impact of direct out-of-pocket costs and indirect costs and the changing financial circumstances of an individual and their household due to cancer, its diagnosis, treatment, survivorship and palliation, causing both physical and psychological harms, affecting decisions which can lead to suboptimal cancer outcomes.

We also secured funding for a Financial Toxicity National Think Tank to be held in 2023, to advance thinking about financial toxicity beyond defining the problem, with a view to seeking innovative solutions to address this issue.

The [Patient Reported Outcomes \(PRO\) Working Group](#) (Chaired by Professor Bogda Koczwara) is working on a collaboration with researchers from the University of Toronto *Strategies for PRO SUSTAINability: Implementation insights for long-term sustainment of programs to routinely collect PROs in cancer care clinical settings*. This project is led by Dr Carolyn Mazariego, who received a grant that extends the outcomes of her COSA Survivorship Fellowship research. The project aims to understand factors that influence the sustainability of routine collection of PRO programs for cancer care clinical services.

Many thanks to Dr Bena Brown, the Survivorship Group's representative on the **2022 COSA ASM** Committee, who helped ensure survivorship topics were woven throughout the 2022 program. Reducing disparities in cancer care and striving for equity for all cancer survivors was emphasised as a priority, and highlights included the symposium [No-one left behind. Ensuring equity in PRO use in clinical care](#), developed by the PRO Working Group. The breakfast session *Understanding cancer survivorship for Aboriginal and Torres Strait Islander people* was delivered in follow-up to the national [2021 Roundtable](#), to identify solutions to some of the barriers to the delivery of supportive care and health services.

Collaborative survivorship webinars continued during 2022 in partnership with the

Australian Cancer Survivorship Centre, Cancer Nurses Society of Australia and Cancer Council Victoria. These webinars largely targeted allied health professionals and nurses and were well received. Members may view recordings on our Group page: [Unzipping the taboo – addressing sexuality and intimacy as part of cancer care, and Supporting cancer survivors to address fatigue and weight problems](#).

Our Group is proud to be engaged with **international survivorship initiatives**, and are mindful of how these may inform or be adapted to promote and complement our model of care agenda. These include the Multinational Association of Supportive Care in Cancer (Exercise Oncology, and Survivorship), American Society of Clinical Oncology, the International Psycho-Oncology Society, and the Global Partnership on Self-management in Cancer.

Our Group has also continued to keep everyone informed with our regular [Survivorship eNews](#). You can also follow our work on Twitter [@COSA_Surviv](#). Many thanks to Dr Fiona Crawford-Williams and Dr Carolyn Mazariego for their editorial leadership and helping us to stay informed.

Thank you again for your support for the COSA Survivorship Group. We hope there will be opportunities for us to connect at the 2023 Flinders COSA Cancer Survivorship Conference in Adelaide in March, as well as at future COSA events.



Raymond Chan
Chair, Survivorship
Group

AFFILIATED ORGANISATION REPORTS



AUSTRALASIAN GASTRO-INTESTINAL TRIALS GROUP

In 2022, the AGITG saw exponential growth. Our research committees now comprise more than 100 members, our Annual Scientific Meeting broke attendance records and we conducted more research than ever. We thank all our members and the dedicated GI cancer community for making these achievements possible!

[Learn more about why it's now the best time to join the AGITG.](#)

Research news

Congratulations to Prof Chris Karapetis for being appointed as Chair of our Scientific Advisory Committee.

Our trials

This year, our pancreatic cancer trials NEO-IMPACT and ASCEND as well as colorectal cancer trial RESOLUTE enrolled their first patients. NEO-IMPACT is our first study to be entirely funded by community fundraising and philanthropy, and is investigating the safety, efficacy and tolerability of combining chemotherapy and immunotherapy for early-stage pancreatic cancer patients prior to surgery.

Four of our clinical trials closed to recruitment this year: DYNAMIC-Pancreas, DYNAMIC-Rectal, RoLaCaRT-1 and LICPIC. We look forward to seeing their results in the near future.

View all recruiting AGITG trials at gicancer.org.au/trial-news.

New research strategy

This year we held our first ever Members' Strategy Forum to share the updated organisational strategy and present the new Research Strategy, Development and Prioritisation Framework. Developed alongside our Community Advisory Panel, Board and members, the Framework represents a significant, united step towards our mission of saving and improving lives by accelerating the pace of discoveries that lead to better options for patients.

With the development of a new research strategy, we are now establishing a phase I trial coordination model for investigator-led research.

Learn more about our research and the Framework at gicancer.org.au/research.

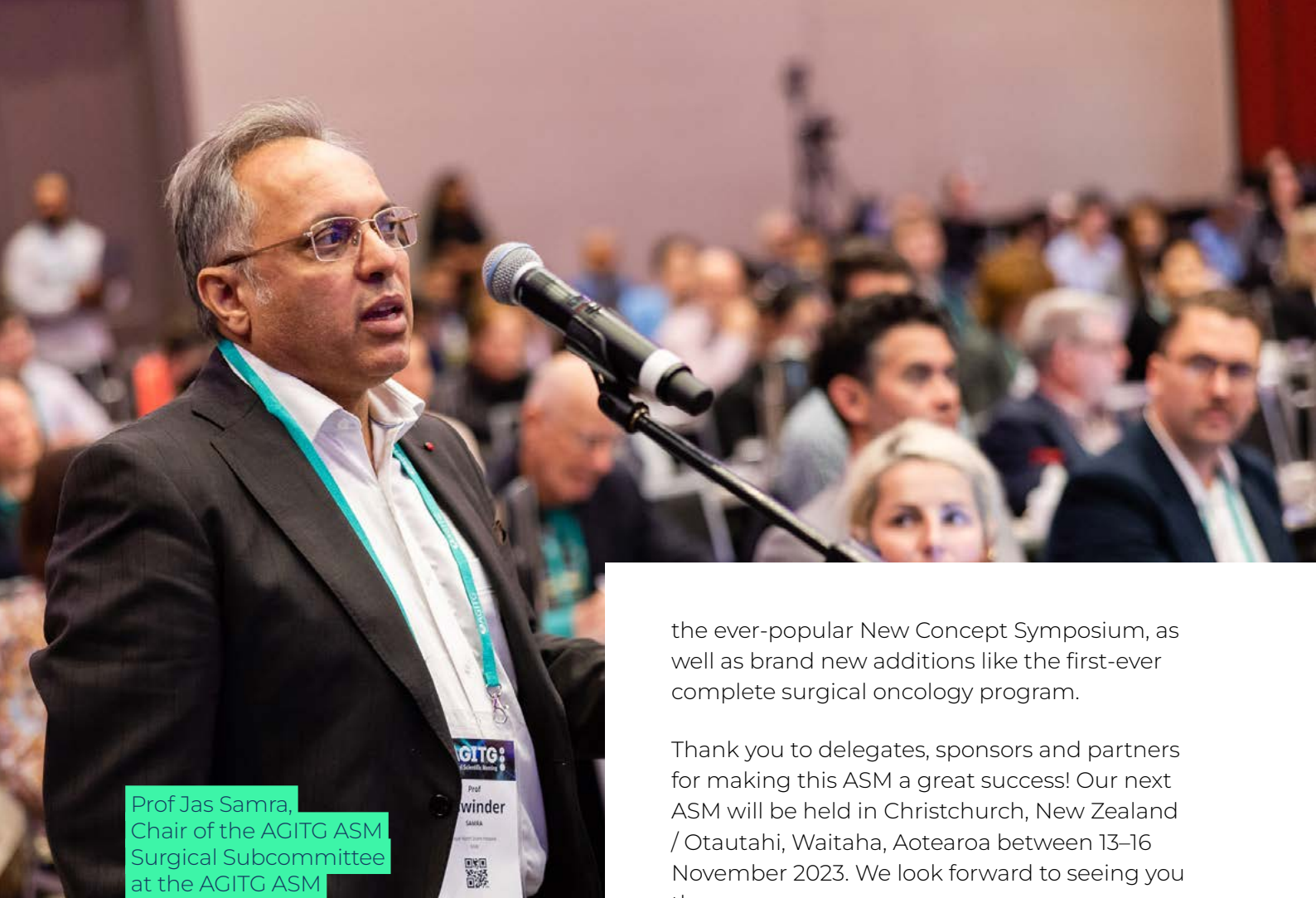
A growing translational research program

Our Translational Research Program is steadily advancing since the appointment of our Translational Research Coordinator, Dr Sarah Hayes. This year we established a Translational Research Committee and we are building a solid foundation for embedding translational research at the beginning of trial design.

Learn more at gicancer.org.au/translational-research.

Our fifth Idea Generation Workshop

Our most recent AGITG Idea Generation Workshop was held in collaboration with TROG Cancer Research on 13 May, facilitated by A/Prof Sam Ngan and Dr Deborah Wright. Seven ideas focused on neoadjuvant treatment in



Prof Jas Samra,
Chair of the AGITG ASM
Surgical Subcommittee
at the AGITG ASM

the ever-popular New Concept Symposium, as well as brand new additions like the first-ever complete surgical oncology program.

Thank you to delegates, sponsors and partners for making this ASM a great success! Our next ASM will be held in Christchurch, New Zealand / Otautahi, Waitaha, Aotearoa between 13–16 November 2023. We look forward to seeing you there.

<At the ASM – Prof Jas Samra, Chair of the AGITG ASM Surgical Subcommittee>

Award recipients

Each year, the AGITG awards are presented as a key highlight of the ASM.

Prof Eva Segelov was presented with the John Zalcberg OAM Award in recognition of her significant and outstanding leadership in AGITG research over many years.

“I accept it on behalf of all my peers – particularly women in clinical trials research. It’s only been very recently that women were actually leading the research... I’m very honoured to accept this award and very grateful to AGITG for the recognition,” said Prof Segelov.

The inaugural Early Career Researcher Award was presented to Dr Christina Teng. The award was established to foster career development and recognise an outstanding early-career clinician-researcher or translational scientist in GI oncology.

rectal cancer were presented by Prof John Mariadason, A/Prof Zee Wan Wong, Dr Ankit Jain, Dr Daren Tan, Dr Joseph Kong, Dr Annabel Smith and Dr Kristin Hsu. These ideas are being progressed through our research development and prioritisation pathway.

The AGITG Idea Generation Workshop serves as a platform to develop embryonic ideas, foster researcher–industry collaboration and future-proof patient treatment options.

Read more about the Rectal Cancer Idea Generation Workshop at gicancer.org.au/IGW2022.

2022 Annual Scientific Meeting

Our 24th Annual Scientific Meeting focussed on the theme of big data, artificial intelligence and precision oncology. Held in Melbourne between 14–17 November, the conference was our first in-person meeting in three years and attended by a record number of more than 500 delegates. Featuring local and international faculty speakers, the program also included

Grant recipients

For the first time, the community-funded Innovation Grant opened to two categories this year: Clinical Trials, awarded to Dr Trang Pham; and Translational Research, awarded to Dr Daniel Cox.

A one-off Rectal Cancer Research Grant was also made available this year from the generosity of our supporters and the GI cancer community. Dr Margaret Lee and Prof Vicki Whitehall were jointly awarded for a collaborative project to form an AGITG-led national network for organoid research in rectal cancer.

Recognising the multitude of new ideas each year is something we take great pride in. [View all winners here.](#)

Gutsy Challenge and community fundraising

Our Innovation Grants are funded through the Gutsy Challenge. Challengers took on the Twelve Apostles, Victoria in May, as well as the Ikara–Flinders Ranges National Park, South Australia in late autumn – raising more than \$140,000 to kick-start new research concepts.

Since 2015, the community has raised more than \$3.6 million for GI cancer research, resulting in 15 grants for small-scale studies and support for eight research projects. We feel incredibly grateful for and empowered by the trust and support from the community.

Russell Conley's 20-year anniversary at the AGITG

We congratulate and thank our Chief Executive Officer, Russell Conley, for his 20 years of incredible service at the AGITG/GI Cancer Institute. With his leadership, passion

and drive, he continues to play a crucial role in future-proofing the organisation, including the development of our strategy and research portfolio; supporting members and creating opportunities for collaboration; as well as cultivating our relationships with industry partners.

A leader in the community, Russell has also built our ASM into the prestigious event it is today and created our fundraising program. He was instrumental in establishing the Community Advisory Panel into the valued, agenda-setting voice it is today, supporting the committee's launch of the Engage program for patients and their families.

We are incredibly grateful to Russell for his unwavering support throughout the years and look forward to the future of the AGITG together with him.



Lorraine Chantrill
Chair, AGITG



**Better treatments...
Better lives.**

AUSTRALASIAN LEUKAEMIA AND LYMPHOMA GROUP

Driving the change needed to achieve better blood cancer treatments for patients through ALLG clinical trials in Australasia

From humble beginnings 50 years ago to today's 1000 + members from across Australia and New Zealand, we are proud of the impact that the Australasian Leukaemia and Lymphoma Group (ALLG) members and the clinical trial results have made on better patient treatment and care throughout the past five decades. You can read about the impact that our members have had on the blood cancer community here <https://www.allg.org.au/about-us/5-decades-of-impact/>.

Established in 1973, today the ALLG is supporting more of the blood cancer research sector's future leaders with mentoring across the group's clinical trial endeavours both locally and with international partners.

The success of our membership and clinical trials programs are built on the efforts of our staff and our members. Their incredible efforts, each year, make a difference to patients with blood cancer. This year was a big one, with some our key highlights below:

- ALLG started the year with 48 active trials and ended with over 60 trials and research projects in various stages of management.
- Our **National Blood Cancer Registry** surpassed 3,000 registered participants.
- We appointed a new **Chair of the Scientific Advisory Committee**, [Prof Judith Trotman](#).

- The ALLG's [Scientific Research Strategy](#) was delivered for members to help accelerate the best science, evidence and effective outcomes in clinical trials. <https://lnkd.in/g2NwVTrr>
- Launched our [Early Career Clinician Researcher program](#)
- The ALLG opened the first hospital site in Australia for a clinical trial that is **a world-first in AML trials**. The [AML M26 INTERCEPT study](#) aims to radically change the way AML therapy is determined.
- Australia's Blood Cancer Taskforce, jointly led by ALLG and HSANZ with support from Leukaemia Foundation, launched **six new Optimal Care Pathways** (OCPs) for blood cancer treatment and care, setting the national standard of high-quality cancer care for all Australians impacted by blood cancers.
- We launched **ALLG News for people in the general community** interested in medical research and ALLG's mission. Learn more about the [1st edition](#) and [2nd edition](#) of ALLG News.

Learn more in the ALLG 2022 Annual Review 'Global Leaders, Global Impact: Delivering beyond expectations' available to download now at www.allg.org.au

Scientific Meetings

Our two Scientific Meetings each year bring together ALLG Members to discuss the latest findings from clinical trials and research into blood cancers, and to share ideas that can improve therapies for patients to have better treatments and better lives.

These scientific working meetings focus on robust discussion of the full trial portfolio, including ALLG's disease-specific scientific working parties - Acute Leukaemia and MDS, Transplant & Cell Therapies, CML & MPN, Myeloma, Lymphoma, CLL, and Supportive Care, and Laboratory Sciences.

International guest speakers at the May 2022 Scientific Meeting included:

- Prof Wee Joo Chng, National University Cancer Institute, Singapore, on 'High-Risk Myeloma';
- Prof Alessandro Vannucchi, University of Florence, on 'Low Risk PV' for the CML/MPN plenary;
- Prof Peter Hillmen, University of Leeds, presented in the CLL plenary on 'Front-line trial for patients fit for FCR: NCRI Flair Trial', on the 'STATIC Trial' that studied 'Intermittent with Continuous Treatment Strategies for CLL'.

An 'Early Career Researcher Breakfast Meeting' engaged with ALLG Associate Member Registrars, Trainees, Fellows and Junior Consultants, and highlighted the ALLG's Early Career mentorship [program](#).

Special guests at the October Scientific Meeting included:

- Dr Vikas Gupta, MD, Site Group Lead Leukemia Program, Princess Margaret Cancer Centre, Toronto, Canada. He presented 'Evolving therapeutic landscape for Myelofibrosis'.
- Dr Salvatore (Sam) Fiorenza, Haematologist and post-doctoral scientist, Turtle Lab, Fred Hutchinson Cancer Research Center, Seattle, USA. He presented 'Targeting the Membrane-Proximal Domain of CD33 for Optimized CAR-T Cell Therapy of Acute Myeloid Leukemia'.

Keynote speaker, Cancer Australia Chief Executive, Professor Dorothy Keefe presented 'Australian Cancer Plan development, progress and next steps'. Prof Keefe is leading the development of the Plan at Cancer Australia. The Plan is a key national initiative that ALLG

has been strongly engaged in. The ALLG was heartened to hear Prof Keefe refer to our organisation's research as vital to achieving the cancer plan and overall goals. Prof Keefe also acknowledged ALLG's work on the Blood Cancer Taskforce and expressed her appreciation for our continuous support to cancer and clinical trials in Australia.

Celebrating 50 Years of ALLG in 2023

The ALLG is Australia's and New Zealand's (ANZ) only not-for-profit blood cancer clinical trial group, and the oldest group of its kind in ANZ. Members include more than 1,000 physicians and haematologists, nurses, scientists and professional support staff from across ANZ.

Established in 1973, today the ALLG is supporting more of the blood cancer research sector's future leaders with mentoring across the group's clinical trial endeavours both locally and with international partners.

The ALLG celebrates its 50th Anniversary year in 2023. To keep informed about our milestone year's initiatives, visit <https://www.allg.org.au/news/> throughout 2023 and follow ALLG on Twitter, LinkedIn, and Facebook, and learn more about ALLG's [five decades of impact](#).

<https://twitter.com/ALLGtrials>
<https://www.linkedin.com/company/allg-clinical-trials/>
<https://www.facebook.com/ALLGtrials/>



Peter Mollee
Chair, ALLG Scientific
Advisory Committee



AUSTRALIA AND NEW ZEALAND SARCOMA ASSOCIATION

Australia and New Zealand Sarcoma Association (ANZSA) looks forward to the opportunities that 2023 brings as we move forward to deliver impactful research and improved outcomes for the sarcoma community. As we returned to the office after the COVID-19 Pandemic, the ANZSA team has continued to focus on delivering high quality sarcoma research and clinical trials by working closely with our clinicians, researchers and consumers throughout 2022.

Annual Scientific Meeting 2022

It was wonderful to be able to host our 2022 Annual Scientific Meeting back in an in-person environment. The theme for this year's event was "Optimal Sarcoma Care for Everyone Everywhere". There were over 140 people in attendance at the event, with people attending in Sydney, Queenstown and across the world via Zoom.

Across the two days of the meeting, we played host to local and international sarcoma specialists from various disciplines with researchers sharing the latest updates in sarcoma research. Discussions were held around current sarcoma research and developments and there was strong audience engagement at the two different sites. Our international keynote speakers were:

- Dr Alessandro Gronchi - Surgical Oncologist Chair Sarcoma Service, Department of Surgery, Fondazione IRCCS Istituto Nazionale dei Tumori (Milan, Italy)
- Dr Silvia Stachiotti - Medical Oncologist Adult Mesenchymal and Rare Tumour Medical Treatment Unit, Cancer Medicine Department, Fondazione IRCCS Istituto Nazionale Tumori (Milan, Italy)
- Dr Peter Ferguson - Orthopaedic Oncologist, Albert and Temmy Latner Professor, Chair of Orthopaedic Surgery, University of Toronto (Toronto, Canada)

ANZSA would like to extend a big thank you to all our guest speakers who contributed to the

event and all of our members who presented during the meeting. We would also like to thank Prof. David Gyorki and the entire Annual Scientific Meeting Organising Committee who worked tirelessly to secure our guest speakers and made sure the event ran smoothly. The NZ conference Hub, led by Dr. Shaneel Deo, was a wonderful success and allowed for a truly cross-national endeavour. We would also like to thank all of our generous sponsors for this year's event, for without their support this event would not have been possible. Last, but importantly, we would like to thank our sarcoma community for their ongoing engagement and support.

Congratulations to Dr. Vivek Bhadri who was the winner of the 2022 Choong-Dickinson Poster Prize Award with his presentation on C-circle testing as an alternative liquid biopsy approach for osteosarcoma and a special mention to all who submitted an Abstract/ePoster for the event.

We look forward to welcoming you back next year in Melbourne for our 2023 Annual Scientific Meeting. Mark your diaries now for November 10th and 11th 2023.

Sarcoma Guidelines

This year marked the release of the Australia and New Zealand Sarcoma Association Sarcoma Guidelines. For the past two years, ANZSA has engaged a multidisciplinary working party to perform rigorous review of scientific evidence to develop specific recommendations for different aspects of sarcoma care. The working party has been led by ANZSA Director Prof. Angela Hong, consists of independent experts include doctors, researchers and consumer representatives — such as patients who have had sarcoma treatment and their carers.

As each sarcoma treatment differs between each patient, the working party has endeavoured to ensure the guidelines reflect issues that are relevant to patients. From their research, the working party were able to identify three broad topics for the guidelines:

- Topic 1: Management at specialised sarcoma centre
- Topic 2: Retroperitoneal sarcoma
- Topic 3: Paediatric/adolescent young adult (AYA) sarcoma

From these topics, there are three clinical questions that have already been addressed in this series 1 of new guidelines:

- Clinical Question 1: Does radiotherapy at a specialised sarcoma centre improve outcomes?
- Clinical Question 2: Does surgery at a specialised sarcoma centre improve outcomes?
- Clinical Question 3: Does delayed surgical resection of the primary tumour impact on outcome for pelvic Ewing sarcoma?

The content of the guidelines will continue to be updated in accordance with new published research when it becomes available. The second series of clinical questions for the guidelines are currently in the final stages of development and plan to be released for public consultation in early 2023.



Denise Caruso
Chief Executive
Officer, ANZSA



Improving life for
women through
cancer research

AUSTRALIA NEW ZEALAND
GYNAECOLOGICAL
ONCOLOGY GROUP

Powering research development

ANZGOG continues to expand its trials in operation, in development and in the pipeline. We are fortunate to have 1200 dedicated members working locally and globally to improve life for women affected by gynaecological cancer through research.

We were delighted to be able to open three studies to recruitment this year – HyNOVA, ADELE and PARAGON-II. On the other end of the trial cycle, seven studies closed to recruitment after meeting significant recruitment milestones:

- The international AtTEnd trial, led by ANZGOG in ANZ, reached its recruitment target of 550 participants, including 48 participants from ANZ.
- TIPS, an ovarian cancer surgical feasibility study, reached 100% recruitment after successfully recruiting its target of 47 patients.
- ICON9, an international phase III randomised study, recruited a total of 111 patients (ANZ target was 110).
- SOLACE2, an ovarian cancer study part of the OASIS Initiative, also reached 100% recruitment, recruiting 114 women across Australia.
- IGNITE's promising preliminary results were presented at ASCO 2022 as an oral abstract. The ovarian cancer study is also a part of the OASIS Initiative.

We thank all participating women and their families, participating hospitals and collaborating trial teams for their long-term commitment to the studies.

ANZGOG trial update

ANZGOG clinical trials currently open to recruitment:

- Two ovarian cancer trials: **ECHO** and **HyNOVA** in collaboration with the NHRMC Clinical trials Centre, at the University of Sydney
- Two endometrial cancer trials: **ENDO-3** in collaboration with Queensland Centre for Gynaecological Cancer and **ADELE** in collaboration with the NHRMC Clinical trials Centre, at the University of Sydney
- One ovarian and endometrial cancer trial: **PARAGON II** in collaboration with NHMRC Clinical Trials Centre, at the University of Sydney

ANZGOG clinical trials in start-up:

- One ovarian and endometrial cancer trial: **EPOCH**
- One cervical cancer trial: **ITTACc**
- One Quality of Live/End of life study: **PEACE**

For more information on ANZGOG's trials, [please visit our website](#).

EDEN Research Initiative

In response to the rapidly rising incidence of endometrial cancer in Australia and New Zealand, ANZGOG has established the **Endometrial caNcer (EDEN)** Research Initiative Steering. The EDEN team, coordinated by Prof Linda Mileschkin and Assoc Prof Alison Brand AM, will work with national endometrial cancer experts to focus on five key areas of unmet need:

1. Risk Assessment and Prevention (including obesity), early detection and surgical issues
2. Survivorship, Surveillance and Rehabilitation
3. Adjuvant Therapies and Relapsed Disease
4. Basic and Translational Research
5. Funding and Patient Advocacy

Key to ANZGOG's commitment to further developing its endometrial cancer clinical trials portfolio is addressing gaps in our current knowledge and practice when considering management of this disease.

ANZGOG 2022 Annual Scientific Meeting

Another landmark for this year was having our first face-to-face Annual Scientific Meeting (ASM) since 2019. The meeting was held on the 23-26 March at the Crown Promenade, Melbourne, delivering an outstanding program to over 300 delegates centred around the theme of "Pathways to Precision Care".

Delegates were fortunate to hear from our three keynote international speakers:

- Dr Ana Oaknin (Medical Oncologist, Vall d'Hebron Institute of Oncology, Barcelona, Spain) Pathways beyond BRCA?
- Dr David Gaffney (Radiation Oncologist, University of Utah, Salt Lake City, USA) Clinical Research: Pedestrian, Personal, Personalized & Powerful
- Prof Anna Fagotti (Gynaecological Oncologist, Policlinico A. Gemelli Foundation, Rome, Italy). Role of neoadjuvant chemotherapy & CRS in advanced endometrial cancer

It was a joy to see our members finally catching up in person and discussing exciting new research ideas to take into the future. The meeting created the perfect, open environment for our members to collaborate and foster research innovation.



Prof Linda Mileshkin and colleagues at the ANZGOG ASM



Many presentations at this year's ASM focused on exploring pathways from translational research into the development of clinical trials and reviewing how molecular profiling and genetics are shaping the management of ovarian and endometrial cancer.

Engaging the public

Survivors Teaching Students

Survivors Teaching Students® (STS), a consumer-led, ground-breaking education program, continues to go from strength to strength. The 100+ volunteers have presented their personal stories on diagnosis and care to health professional students at

Universities across Australia and now also New Zealand with the aim of raising awareness of gynaecological cancer symptoms and the importance of good health communication.

Also, this year, ANZGOG released a podcast 'On the Down Low – speaking up about ovarian cancer'. Through the generosity and dedication of the volunteer team, this podcast gained over 2,000 listens in just two months, with many glowing reviews, and was recognised at the Australian Podcast Awards, winning the gold award for 'Best New Podcast'. The podcast is a new platform for ANZGOG to engage the public in the work that we do.

WomenCan – funding cancer research

Public support through donations and partnerships has been well maintained through 2022 with WomenCan (ANZGOG's fundraising arm) and the Team Teal and Honour Her campaigns, engaging the community to increase vital awareness of gynaecological cancer and raise funds to support ANZGOG's research projects. The 2022 Team Teal campaign was an outstanding success, where over \$300,000 was raised by the harness racing community.

International collaborations

We're at a great point in our relationships, both nationally and internationally. In the Gynecologic Cancer Intergroup (GCIG) – the peak international gynaecological cancer research group – we're very fortunate to have an even greater number of ANZGOG members in leadership positions. That means that our ANZGOG membership will be able to contribute to international clinical trial design more now than ever before. This is extremely exciting, not only for ANZGOG members, but also for women in Australia and New Zealand



with gynaecological cancer. This means that these women can participate in these trials, providing them with access to a wider choice of drugs. This is incredibly important and we hope this means that women will be able to benefit by responding to treatments that they wouldn't otherwise have access to for a number of years.

ANZGOG has achieved so much over the last four years and has grown to an organisation which now can independently sponsor clinical trials, providing career support and training for junior investigators so that they can independently submit and be successful in running clinical trials.

I wish to thank all the members, the women taking part in our trials and our staff for another successful year of gynaecological cancer research in Australia and New Zealand, helping ANZGOG to improve life for women with a gynaecological cancer.



Clare Scott AM
Chair, ANZGOG



AUSTRALIAN AND NEW ZEALAND CHILDRENS HAEMATOLOGY ONCOLOGY GROUP

During 2022, ANZCHOG has continued to grow and develop our two primary areas of work: expanding our clinical trial portfolio to provide more opportunities for children diagnosed with cancer to access a clinical trial, and to support our members through our peak body activities.

RESEARCH AND CLINICAL TRIAL UPDATES

Throughout 2022, we have further consolidated the establishment of ANZCHOG's National Trials Centre. For a number of years, we have been building our capacity and expertise to provide centralised and high-quality clinical trial management services to the childhood cancer centres throughout Australia and New Zealand. The National Trials Centre provides consistency for ANZCHOG-sponsored trials and reduces trial coordination burden at the participating centres. We have embedded standardised processes and exceptional quality assurance practices ensuring that ANZCHOG-sponsored trials not only meet, but exceed, national and international requirements, building our reputation with our trial partners.

We have continued to grow our clinical trial portfolio, leveraging new and existing collaborations with national and international trials groups. Throughout 2022, more than 20 ANZCHOG-sponsored trials were open for accrual at our children's cancer centres, all focussed on improving outcomes across the broad spectrum of paediatric cancers. Excitingly, we have an additional 10 trials in development that we plan to activate during

2023. This landmark achievement is only made possible by our funders, and we gratefully acknowledge their continued support of ANZCHOG.

One of our key achievements for 2022 was the NATA-accreditation of AIM-BRAIN, a new molecular profiling diagnostic platform for paediatric brain cancers. Commencing in 2017 as a joint project with the German Cancer Research Centre (DFKZ), patients were originally enrolled on the German-led MNP2.0 study to enable immediate access to the cutting-edge methylation array profiling technology. The results from methylation profiling complement traditional tests, providing additional information which can influence treatment decisions. In parallel, the Australian platform was established and validated, and is now offered as a certified pathology test. This places Australia alongside United States, Canada and the United Kingdom as one of the few countries world-wide to offer clinically validated methylation profiling to children diagnosed with brain cancers. We would like to thank Robert Connor Dawes Foundation, Carrie's Beanies for Brain Cancer and the Australian Government for their support of the AIM-BRAIN project.

ANZCHOG'S PROFESSIONAL ACTIVITIES

In our role as the peak body for healthcare professionals who care for children diagnosed with cancer, ANZCHOG continues to support our multidisciplinary members. Specifically, our dedicated Groups offer opportunities for members with specialist areas of interest to collaborate, network and provide national leadership in their field.

ANZCHOG also continues to provide expert advice to Australian Government and other initiatives, with membership on the Australian



Brain Cancer Mission Strategic Advisory Group, the Blood Cancer Taskforce and Cancer Australia's Intercollegiate Advisory Group (ICAG). We have also actively participated in the development of Australia's first National Cancer Plan and look forward to the finalisation of this important strategic document in 2023.

A professional development highlight for our field – ANZCHOG's Annual Scientific Meeting (ASM) - returned as an in-person event. Held in Sydney in July 2022, there was a strong focus on home-grown research and clinical advancements within our field. Planning is underway for our next ASM, to be held in Perth in August. For more information, please visit our ASM website: <https://asm-anzchog.com>

During 2022, we also continued to grow ANZCHOG's e-community, an online platform for our members to network and share the latest news and clinical developments in their field. We provided key educational tools for members, including targeted training workshops for clinical trial researchers, discussion forums for nurses and a webinar to share key learnings from TGA/FDA inspection. We continue to explore ways to utilise the e-community platform to effectively support our members.

The achievements of 2022 are only possible with the dedication of our staff, members, supporters and families. We look forward to enabling even greater developments in 2023 and beyond.



Nick Gottardo
Chair, ANZCHOG





AUSTRALIAN AND NEW ZEALAND UROGENITAL AND PROSTATE CANCER TRIALS GROUP

ANZUP's trial portfolio continued to grow in 2022, with eight ANZUP-led and two co-badged trials in recruitment, 12 in follow-up, and a number of new trials ready to open shortly. You can [read more about our trials on our website here](#).

ANZUP re-commenced events with the face-to-face return of our Ideas Generation Workshops, Annual Scientific Meeting (ASM) in Adelaide in July, the Best of GU, the Prostate Cancer Rapid Fire Program, and the return of our Below the Belt Pedalthon, to name a few!

We also saw many achievements in the past year including:

- **Our DASL-HiCaP** (ANZUP 1801) trial reached over 75% recruitment, a great achievement for a large international study that opened during COVID-19 in 2020
- **ENZA-p** (ANZUP 1901) trial completed recruitment - a great achievement for another study that opened in mid-2020 during COVID-19
- **BCGMM** (ANZUP 1301) reached close to 95% recruitment
- We opened new studies including: **CLIMATE** (ANZUP 1906) - our testicular cancer biomarkers study; and two prostate cancer studies: **GUIDE** (1903) and **EVOLUTION** (ANZUP 2001)

Ideas Generation Workshops

During 2022 we continued with our Ideas Generation Workshops (formally known as Concept Development Workshops), and we able to hold these again face-to-face, as well as via Zoom. We held six IGW's in 2022 with almost 150 attendees and close to 20 concepts presented to our multidisciplinary members. This is where many of the seeds for ANZUP clinical trials are first sown, and they are important to grow and foster a pipeline of innovative ideas to be considered and prioritised with support from ANZUP moving forward.

International Meetings

ANZUP featured a number of presentations and posters at international meetings throughout the year. Three ANZUP trials posters were presented at ASCO GU 2022 in San Francisco: DASL-HiCaP, SUBDUE-1, and ENZA-p, and our TheraP imaging biomarkers study was chosen as an oral presentation. ANZUP had two oral presentations at ASCO 2022 in Chicago (ENZAMET and TheraP) and two posters (DASL-HiCaP and UNISoN). In Paris at ESMO 2022 our PCR-MIB study featured a poster, and finally at the European Association of Nuclear Medicine Congress Meeting in Barcelona a biomarker analysis of our TheraP trial (ANZUP 1605) was presented.

#ANZUP22 ASM

Our 2022 ASM theme of 'No Longer on Mute: Patients, Carers and Our Research Community' provided a platform to discuss the need for a voice about clinical trials for many groups – the patient, carers, vulnerable communities, other disciplines, and the research community. It was thrilling to be able to finally come together face-to-face and network, re-ignite old friendships, debate, discuss, and appreciate the multidisciplinary group of over 400 healthcare professionals in attendance.

We were fortunate to have more than 80 speakers, panellists, session chairs and poster presenters, including a stellar international faculty: Himisha Beltran, Noel Clarke, Christopher Sweeney, Andrew Loblaw, Bertrand Tombal, Samra Turajlic, and Susanne Vahr Lauridsen.

You can watch some videos from the ASM on the [ANZUP YouTube channel](#).

Best of GU Oncology Evening Symposium

We held our Best of GU Evening Symposium on Wednesday 9 November 2022 in Melbourne. The Best of GU is a collaboration between ANZUP and the Urological Society of Australia and New Zealand (USANZ). It featured highlights from 2022 meetings, including the latest management, and clinical trials research in urogenital and prostate cancers. Henry Woo was the Convenor with a fantastic line up of speakers including Declan Murphy, David Pook, Louise Emmett, Natasha Roberts, George Hruby, Ciara Conduit and Renu Eapen covering all aspects of GU cancer research. Many thanks to our sponsors who these events would not be possible without: Astellas, AstraZeneca, Bayer, BMS, Ipsen and the Merck Pfizer Alliance.

Prostate Cancer Rapid Fire Program

We held our inaugural Prostate Cancer Rapid Fire in Sydney on Friday 18 and Saturday 19 November 2022. The meeting was developed to facilitate further understanding of contemporary oncology management through advances in clinical trials and will cover landmark clinical trials in prostate cancer, whilst providing mentorship for trainees from experts in the field. The Convenor Jarad Martin was joined by Co-Convenors Ciara Conduit and Cameron McLaren. The mentors (Lisa Horvath, John Attia, Renu Eapen, Michael Hofman, Anis Hamid, Tanya Holt, Mark Sidhom and Matt Roberts) were from multiple disciplines, and provided invaluable insights for the trainees. Thanks to our sponsors: Astellas, AstraZeneca, Bayer, and MSD.

The return of the Sydney Below the Belt Pedalthon

After a three year break, the Sydney Pedalthon finally returned to Eastern Creek on Tuesday 22 November 2022. The Below the Belt Pedalthon was founded in 2013 to increase awareness of below the belt (testicular, prostate, bladder, penile and kidney) cancers and raise vital funds to improve the lives of so many patients through clinical trials research.

The event raised over \$50,000, and we are incredibly grateful to the riders, donors and

supporter of our Below the Belt Pedalthon which has raised over \$2million since its inception in 2014. 100% of these funds are directed to our Below the Belt Research Fund which provides much needed seed funding to support ANZUP members to progress new trial ideas to the point of becoming full scale studies. Thanks to our Bronze sponsor Pfizer Oncology, as well as all our sponsors who help make this event a success.

ANZUP Publications

Our ANZUP 2022 Annual Report was released in June, reflecting on our activities and achievements over the past year. The report is a great showcase of the tireless commitment of our members, supporters and wider ANZUP community to improve treatments and outcomes for genitourinary cancer patients. You can [read the report online](#).

We continue to publish our Consumer Magazine 'A little below the belt'. This magazine is full of information about what ANZUP does, how we do it, and how the community supports us. The [magazine is available to read online](#).

Our membership base continued to grow, reaching over 2,050. We are grateful to our dedicated and committed membership for both their ongoing support and dedication to ANZUP, and taking time out of their busy work and personal lives to help support ANZUP and make a difference to the lives of people affected by GU cancers.



Ian Davis
Chair, ANZUP
Cancer Trials Group



BREAST CANCER TRIALS

It has been remarkable to see the impact that clinical trials research has had in the improvements available today in the treatment and prevention of breast cancer.

Since 1978, Breast Cancer Trials has been conducting a multicentre clinical trials research program and our success has been the result of collaboration between participating institutions throughout Australia and New Zealand, our clinical trial participants and our supporters who make our research possible.

Impact Study

This year has seen Breast Cancer Trials (BCT) look back at all the achievements our research charity has made with the launch of [an independent study into our impact](#). Queensland University of Technology's Australian Centre for Philanthropy and Nonprofit Studies examined the impact of BCT's research, uncovering that our organisation has affected not just outcomes for breast cancer patients, but also delivered tangible and significant health and social benefits to the community, educated the public about clinical trials and the value of participating in this research, and empowered doctors in the treatment of their patients.

Research Strategy

We also launched our 2022-2026 Research Strategy, which identifies key priority areas of research that are likely to make the greatest impact to people affected by breast cancer.

The strategy ensures that our resources and the expertise of our research community are used optimally and that we can proactively respond and adapt to future research opportunities and needs. There are four key themes to the research strategy:

- Conducting trials in the areas of greatest patient need and potential impact as identified in the consultation process
- Broad collaboration with the right people and organisations, nationally and internationally
- Remove barriers and enhance clinical trials participation
- Learning the most from every trial

Research Results

Fantastic results were published and announced for several clinical trials this year:

- Primary results for the PROSPECT clinical trial showed that the use of breast magnetic resonance imaging (MRI) prior to breast surgery may be able to identify patients with a very low risk of breast cancer recurrence who can safely avoid radiotherapy. Professor Bruce Mann is the BCT Study Chair of this study.
- Primary results of the CHARIOT study found that the addition of dual immunotherapy treatment to standard chemotherapy have shown promising results in patients with treatment resistant, early-stage triple negative breast cancer. The trial found that in patients who did not respond to standard neoadjuvant chemotherapy, the addition of nivolumab and ipilimumab resulted in a promising response rate with 24% of participants achieving a complete disappearance of their cancer within the breast and lymph nodes by the time of surgery. The study will now continue the future follow-up of patients to determine event free survival (EFS) and overall survival (OS). Professor Sherene Loi is the BCT Study Chair of CHARIOT.
- The results of an overall survival analysis of the global OlympiA clinical trial found that olaparib reduces deaths by 32% for breast cancer patients with an inherited BRCA1 or BRCA2 gene abnormality, where the cancer had not spread beyond the breast or under the arm. OlympiA was led in Australia by Professor Kelly-Anne Phillips.

Clinical Fellowships and International Fellowship Support

2022 was the first year of our Clinical Fellowships program, which provides support to develop new research ideas by the next generation of researchers. The program is aimed at early career researchers with qualifications in the disciplines of medical oncology, pathology, psychology and other supportive care specialties, radiation oncology, radiology and surgery. Six fellowships were awarded in the inaugural year.

Further, BCT has started a new International Fellowship program to support junior research clinicians who have secured an international fellowship, where they can gain experience relevant to the work of BCT.

More information and application details for both of these programs are available on the [BCT website](#).

Governance

Dr Sheridan Wilson was elected to the Board of Directors and is a Medical Oncologist at Auckland City Hospital in New Zealand. Sheridan leads the medical oncology breast team at Auckland District Health Board and in 2018 she established a pilot program at Auckland City Hospital for neoadjuvant treatment of breast cancer.

Dr Nicholas Zdenkowski was appointed to the position of Chair of the BCT Scientific Advisory Panel. Nick is a Medical Oncologist with a strong interest in breast cancer clinical practice and research. He is Visiting Medical Officer at Maitland Private Hospital and Lake Macquarie Private Hospital and is Conjoint Senior Lecturer in the Faculty of Medicine at the University of Newcastle.

2022 Annual Scientific Meeting

Our 43rd Annual Scientific Meeting (ASM) was held in July in Melbourne and we had the largest ever attendance in the history of the event. Our international speakers were Professor Charlotte Coles (UK), Professor Laura Esserman (USA), Professor Hiroji Iwata (Japan), Professor Ann Partridge (USA) and Professor Hope Rugo (USA).

The 2022 ASM was the first time that the program included abstracts for members to promote their current work, and also a Trainee and Early Career day for trainees in medical oncology, radiation oncology and surgical oncology.

Our 2023 ASM will be held from 26-28 July in Auckland, New Zealand, and more information is available at www.bct2023.org.

2022 Awards

Winners of the 2022 Breast Cancer Trials awards were presented at the Annual Scientific Meeting and recognise the valuable contribution of BCT members to our research program and also the outstanding achievements by researchers in their particular fields.

The 2022 winners were:

- The Gold Medal – Professor Prue Francis AM.
- The Alan Coates Award for Excellence in Clinical Trials Research – Associate Professor Nicholas Wilcken.
- The Robert Sutherland Award for Excellence in Translational Research – Professor Laura Esserman.
- The John Collins Medal and Travel Grant – Dr Yang Yang Huang.
- The Study Coordinator Prize – Ms Nadia Ranieri.

Special mention too to our Chief Operating Officer - Fundraising, Ms Julie Callaghan, who was recognised for 30 years of service to BCT. Julie has been the driving force behind our fundraising team and we sincerely congratulate her on this significant milestone.

Thank you to all our members, researchers, trial participants, staff and supporters for their ongoing commitment to our research program, and our shared vision of saving lives and improving treatments for those affected by breast cancer.



Sunil Lakhani
Chair, BCT



CANCER NURSES SOCIETY OF AUSTRALIA

The significant achievements of CNSA and cancer nurses across Australia this past year reflect our innovative capabilities in furthering our mission, of promoting excellence in cancer care and control through the professional contribution of cancer nurses, despite the challenging environment created by the COVID-19 pandemic.

As an organisation, we embarked on some priority projects and were excited to finally hold a full in-person event in Brisbane for our Annual Congress in June.

Let's take a look at some of our achievements across 2022 ...

Workforce Project

This year, we were particularly proud to have had 'Cancer Care' added as a specific job role under the yearly AHPRA Registration process. We were delighted that this came to fruition after considerable hard work and persistence by CNSA to have the Health Workforce Division of the Australian Government Department of Health review and update the registration renewal surveys.

This information will be vital to overlay against the results from the Research Standing Committee's Cancer Nursing Workforce Mapping Project. This project will for the first time provide a comprehensive and national picture of the working conditions and professional concerns of nurses who work exclusively in cancer care and control, and

we believe it is one of CNSA's most important surveys to date.

Part of this project included the development of a survey regarding the cancer nursing workforce which was distributed in late 2021. We were thrilled to receive 934 responses - providing us with lots of data to help us understand who and where cancer nurses are, their qualifications, working conditions, satisfaction with opportunities for professional growth and development and their perceptions of many aspects of cancer nursing.

Over the next 12 months, the Research Standing Committee looks forwards to completing the nursing workforce project, which involves analysis of the survey data, collation of the AHPRA data and interviews with key stakeholders.

Advocacy

Members of CNSA represented cancer nurses on a range of submissions, consultations, and position statements, including:

- The Australian Cancer Plan
- Nurse Practitioner 10-Year Plan
- National Medicines Policy
- The Blood Cancer taskforce: National Strategic Action Plan for blood cancer
- The development of a Specialist Nurse for Advanced Cancer role proposal, in collaboration with the McGrath Foundation, for Cancer Australia
- Representation on the Coalition of National Nursing and Midwifery Organisations
- The Radiation Oncology Alliance
- The inclusion of Nursing Principles in the Radiation Oncology Practice Standards

Membership

It was another big year at CNSA, with more records broken. We achieved our highest membership level ever, and hit the 1,700 mark for the first time.

This is a reflection of the hard work done by our team, our Directors, and of course our volunteer Committees. This record could

not have been hit without the help of our wonderful members and their organisations who help spread the word of all the fantastic initiatives undertaken by the Society.

We are proud that we now represent 500 more Cancer Nurses than we did three years ago – there is strength in numbers and we will use this growth to continue to increase our voice.

To support and engage our members, we:

- Published 25 editions of Cancer Nursing Matters, to keep everyone informed of relevant CNSA activity, and stakeholder information
- Assisted members to ask questions and seek answers through CNSA's online knowledge sharing platform, Sosido – which featured 234 publications authored by 296 CNSA authors, and 207 posts in the discussion forum
- Enabled networking opportunities and knowledge transfer through our Standing Committees, State Groups and Specialist Practice Networks

Education

Taking a leadership role in addressing the educational needs of cancer nurses and collaborating with other groups and organisations involved in the development and provision of services to people with cancer is a key strategic aim for CNSA.

Across these 12 months, we were delighted to:

- Collaborate and deliver over 40 Tune in Tuesdays webinars – an incredible achievement for our small organisation
- Deliver a F2F Annual Congress across three wonderful days in Brisbane, as we tackled the theme of Cancer Nursing Workforce: Strong, Skilled and Specialised.
- Host a range of fantastic local educational events with the return of state based workshops and dinners

We are always excited to work with our stakeholders to increase the flow of information and reduce duplication, and this year was no different.

We delivered webinars in collaboration with Cancer Australia, the Clinical Oncology Society of Australia, Ovarian Cancer Australia, Myeloma Australia, the VCCN Oncology Group, the Australian Cancer Survivorship Centre, Cancer Council Victoria, the Centre for Palliative Care, and Melanoma Institute of Australia. If your organisation is interested in partnering with CNSA to deliver relevant and practical education directly to Cancer Nurses, we'd love to hear from you.

Research

As the peak body for Cancer Nurses, we take our responsibility to champion and promote nurse-led research seriously.

In this past year, we actively supported this through four main channels:

- The Australian Journal of Cancer Nursing (AJCN) and the addition of a special issue in collaboration with the Victorian Comprehensive Cancer Nurse Nurse-Led Research Hub
- Our inaugural National Abstract Webinar Series to showcase the best of the best abstracts from the CNSA Congress
- The Annual Congress Virtual Poster Gallery which allows for this research to come to life, and be available digitally for future reference
- The awarding of two Research Grants focused on Environmental scan of postoperative vulvar cancer wound practices in Australia and Video-assisted patient education: improving health outcomes for persons affected by complex cancers

We hope you enjoy reading about our many achievements from the past 12 months. We'll keep rising to the challenge to deliver for our members and developing the Society for generations to come.



Carmel O'Kane
President and
Board Chair, CNSA



CANCER SYMPTOM TRIALS AND PALLIATIVE CARE CLINICAL STUDIES COLLABORATIVE

Cancer Symptom Trials (CST)

Governance

In 2022 we have seen a number of changes to both the CST Management Advisory Committee and the CST Scientific Advisory Committee including the appointment of medical writer and biostatistician Dr Belinda Butcher as Chair of the Scientific Advisory Committee. Both committees have grown to include experts in paediatrics, dietetics and implementation science as well as Culturally and Linguistically Diverse (CALD) communities reflecting our increasing focus on diversity and inclusion.

Delphi study - cancer symptom management priority setting

The results of the Adult Delphi study for cancer symptoms and treatment research priority setting were presented at the NSW Cancer Conference in September 2022, and will be presented at the PaCCSC/CST Annual Research Forum in March 2023. We are finalising the dissemination paper to be submitted for publication in early 2023. We are thankful

for the participation of the consumers and healthcare professionals who responded to the surveys and attended our focus groups – this work is only possible with their participation.

Annual Research Forum

On March 17 and 18, PaCCSC & CST delivered another fantastic Annual Research Forum! Online for the second year running, the forum featured international guest speakers including Dr Hsien Seow from Canada, Dr Amanda Landers from New Zealand, and Dr Lesley Dunleavy from the UK, as well as stellar presentations from Australian speakers including Professor Fran Boyle, Professor Mark Parsons, Professor Robyn Clark, Professor Megan Williams, Dr Ben Smith, PanKind CEO Michelle Stewart, and Associate Professor Brendan Mulhern.

The theme, Clinical trials: New priorities, focused on ways in which our trials can be more inclusive of Indigenous and culturally and linguistically diverse Australians, as well as considered promising new directions for trials in cardiovascular care.

While clinical trials have been forced to take a back seat to public health measures and other priorities in palliative care and cancer symptoms during 2020 and 2021, the forum cemented our hope that PaCCSC and CST will emerge with renewed momentum and engagement from consumers, clinicians and researchers with the broad range of perspectives needed to inform care for people with life-limiting illness of any kind.

Inaugural CST Emerging Trialist Award

Dr Ruwani Mendis was announced as the winner of the inaugural Cancer Symptom Trials (CST) Emerging Trials Award at the PaCCSC & CST Annual Research forum in March.

Ruwani said, "I would like to acknowledge the help of CST, particularly in co-branding the INCA trial. As an early career researcher, it is such a comfort to have a group like CST to help propel ideas forward and to know that there are people to come to when help is needed."

Ruwani established the palliative care clinical trials unit at Western Hospital, Sunshine as part of her role as Victorian Comprehensive Cancer Centre Clinical Trials fellow. The unit has now successfully recruited to six clinical trials/prospective studies.

In addition, through her trial collaborations she is a Chief Investigator on an MRFF-funded trial of medicinal cannabis. Ruwani is an emerging leader who has built productive collaborations, local research capacity and has already demonstrated significant research output. Ruwani was part of a field of very worthy nominees for the award.

CST Chair, Professor Meera Agar said 'It was wonderful to have so many worthy nominees in the running – the future of clinical trials is bright!'

Palliative Care Clinical Studies Collaborative (PaCCSC)

Brian Le promotion to Clinical Professor

PaCCSC Co-Chair, Brian Le was appointed to Clinical Professor in the Faculty of Medicine at The University of Melbourne.

Brian is a Palliative Care Physician and Medical Oncologist and is Precinct Director of Palliative Care at The Royal Melbourne Hospital and Peter MacCallum Cancer Centre.

He has established an extremely productive clinical research program involving clinical trials and health services research as well as service innovation evaluation.

Brian is involved in multiple research collaborations and has a strong track record of grant success. He is also a generous mentor to junior staff and early career researchers, and is valued by his colleagues within the clinical and research settings

IMPACCT Rapid Program

Rapid Program Coordinator

In June, we bid farewell to Jane Hunt and welcomed Yinyin Phyo to the role of Rapid Quality Improvement Program Coordinator.

Yinyin joined IMPACCT in 2019, bringing together her background in science and marketing with her interest in clinical trials. Yinyin completed a Master of Philosophy in 2021. Her thesis focused on gut dysfunction in palliative care, where she facilitated ethics, communication with study sites, monitoring recruitment, data collection, and analysis.

Rapid Paediatric Program

In 2019, led by Dr Ross Drake, we launched the Rapid Paediatric Program focused on paediatric palliative care including cancer symptoms. This program has now completed its first series and another four series are open for data collection, including two paediatric chronic pain series.

New series

The Rapid Program has grown with the addition of new adult and paediatric series. The paediatric and paediatric chronic pain series includes:

- Ketamine for mucositis – series 42
- Medicinal cannabis – series 43
- Methadone for pain – series 51
- The adult program continues to grow, including the addition of ondansetron for nausea and vomiting – series 48

Closed series

- Macrogol for constipation – series 11
- Midazolam for agitation – series 13
- NSAIDS – series 16
- Dexamethasone for fatigue – series 30
- Telehealth – series 35

If you are prescribing or administering any of these medications, you can collect data for these series. To find out more and get involved, go to www.uts.edu.au/rapid.



Rayan Saleh Moussa
Council Representative CST



COOPERATIVE TRIALS GROUP FOR NEURO-ONCOLOGY

The Cooperative Trials Group for Neuro-Oncology (COGNO), continues to grow its trial portfolio with a very productive year in 2022, with several notable achievements and highlights summarised here.

- Trial Open to Recruitment
 - MAGMA (Multi-Arm Glioblastoma Australasia Trial) – funded by the Medical Research Futures Fund (MRFF), MAGMA is a multi-arm multi-stage, multi-centre, phase III platform trial that aims to assess hypotheses against a common standard-of-care control arm for the management of people with newly diagnosed glioblastoma. Recruitment continues to be incredibly strong across Australia throughout 2022 as we approach the target of 300 patients across 26 sites.
- Trial in Start-Up - recruitment to commence in 2023
 - PersoMed-1 (Personalised Targeted Therapy for Adolescent and Young Adult Medulloblastoma Patients), an international study led by the EORTC, funded in Australia by CanTeen and Cancer Australia.
- Trials in Development - recruitment to commence in 2023
 - LUMOS2 (Low and Anaplastic Grade Glioma Umbrella Study of Molecular Guided Therapies) for recurrent lower grade glioma, funded by the MRFF (initial 3 arms) and Australian Brain Cancer Mission (fourth arm). Plan for up to 12 Australian sites.
 - PICCOG (A single-arm phase II study of a PARP and Immune Checkpoint inhibitor Combination for relapsed IDH-mutant high-grade Glioma), funded by the MRFF. Plan for up to 12 Australian sites.

Very successful events were held during the year, including:

- Post ASCO Update, June 2022 – a virtual meeting providing an update on the most significant treatment advances in primary Brain Cancer presented at ASCO 2022.
- COGNO Ideas Generation Workshop, July 2022 – held virtually with two concepts discussed, as well as a keynote presentation by Dr David Ashley.
- Post Society of Neuro-Oncology (SNO) Update, December 2022– a virtual meeting providing an update on the most significant treatment advances in neuro-oncology presented at 2022 SNO Scientific Meeting.
- COGNO Annual Scientific Meeting, October 2022, Brisbane – COGNO's first in-person ASM since 2019 was a wonderful opportunity for delegates to catch up with colleagues and make new connections, in addition to an excellent program with international speakers [Associate Professor Krishna Bhat \(USA\)](#), [Professor Veronica Chiang \(USA\)](#), [Dr Frank Saran\(NZ\)](#) and [Dr Mark Bilsky \(USA\)](#). There were 143 registrants to the in-person meeting, with the ASM was held in conjunction with the BTAA Patient Education and Information Forum, the ABCARA Research Symposium, and COGNO's inaugural Trainee Workshop – all of which were very successful events.



Publications and presentation output have included:

- Temozolomide and radiotherapy versus radiotherapy alone in patients with glioblastoma, IDH-wildtype: post-hoc analysis of the EORTC randomized phase 3 CATNON. C. Mircea S. Tesileanu et al. *Clinical Cancer Research*. [doi:10.1158/1078-0432.CCR-21-4283](https://doi.org/10.1158/1078-0432.CCR-21-4283).
- Patterns of care in adult histone mutant gliomas: results of an international survey. Alexander Yuile et al. *Neuro-Oncology Practice*. doi.org/10.1093/nop/npac047.
- Multi-Arm GlioblastoMa Australasia (MAGMA): Protocol for a multi-arm randomised clinical trial for people affected by glioblastoma. Benjamin Y. Kong et al. *BMJ Open*. doi.org/10.1136/bmjopen-2021-058107
- NUTMEG: A randomized phase II study of nivolumab and temozolomide versus temozolomide alone in newly diagnosed elderly patients with glioblastoma. Hao-Wen Sim et al. Society for Neuro-Oncology (SNO) conference, 17-20 November 2022, Tampa, Florida, USA, oral presentation.

- Genome-wide DNA methylation patterns in VERTU: A randomized phase II trial of veliparib, radiotherapy and temozolomide in patients with MGMT-unmethylated glioblastoma. Hao-Wen Sim et al. Society for Neuro-Oncology (SNO) conference, 17-20 November 2022, Tampa, Florida, USA, poster presentation.

We are very encouraged to see that COGNO membership has continued to grow, ending the year with 921 (representing an annual increase of just over 6.5%). We would like to sincerely thank all of our members for their commitment, contribution, energy and dedication to the cause of improved outcomes for all those affected by brain tumours through clinical trials research.



Eng-Siew Koh
Chair, COGNO and COSA
Neuro-oncology Group



The Royal Australian and New Zealand
College of Radiologists*

The Faculty of Radiation Oncology

FACULTY OF RADIATION ONCOLOGY

As the 2021-2022 Dean of Faculty of Radiation Oncology, I want to take a moment to reflect on the past year and acknowledge the hard work and dedication of our team. Despite various challenges, I am proud to say that we have made significant progress in our field. 2022 was undoubtedly a busy year, but through our collective efforts, we have been able to advance our training and education program, enhance the standards of radiation oncology practice and improve patient care through advocacy. I am grateful for the tireless efforts of all and look forward to continuing our work in the coming year. Below are just a few snippets of the great work RANZCR has engaged in during 2022:



International Radiation
Oncology Network meeting

Targeting Cancer Campaign

- The College supported World Cancer Day 2022 with a [video](#) series release, highlighting inequality in accessing radiation therapy for cancer treatment to close the gap in cancer care. The series featured Targeting Cancer Campaign Ambassador, Julie McCrossin AM, interviewing radiation oncologists and health workers in Australia and New Zealand, highlighting the 2022 World Cancer Day theme **Close the Care** Gap at the same time as raising awareness of radiation therapy.
- The campaign remains a very important advocacy tool with voices from consumers and a multi-disciplinary team. Over the past decade, the name has become increasingly recognised by our sister organisations around the globe. In particular, we have had very useful collaborative advocacy discussions and relationships with the Royal College of Radiologists, the European Society for Therapeutic Radiology and Oncology and the American Society for Therapeutic Radiology and Oncology. Most recently, in October 2022, it was noted that the Canadian Association of Radiation Oncology would like to use our model in their advocacy activities.

MBS Review

- Faculty of Radiation Oncology representatives are part of the Department of Health's (DoH) Implementation Liaison Group (ILG) and are working with the DoH to ensure that the release of the updated MBS Radiation Oncology descriptors and fees are appropriate. The Faculty of Radiation Oncology will work with the DoH and our members as much as possible to assist in the changeover that is likely to occur during 2023.
- There are significant implications when the Australian DoH eventually releases and puts into effect the updated MBS descriptors

and the associated fees. This will apply in both external beam radiation therapy and brachytherapy. There is still much work to be done, particularly in the communication of the changes to the community including medical practitioners and patients.

Government Interactions

- The Faculty of Radiation Oncology has engaged in a number of meetings with targeted Members of Parliament and Assistant Ministers to advance priority issues such as those related to Medicare Benefits Schedule (MBS) review and workforce distribution.
- The Faculty of Radiation Oncology prepared a pre-budget submission for the 2023 budget that focuses on multiple issues including restoring brachytherapy to the Radiation Oncology Health Program Grants (ROHPG) Scheme.

New Zealand

- In New Zealand, a new healthcare system came into effect on 1 July 2022 that promises to deliver services with the additional funding that has been allocated. The Faculty of Radiation Oncology continues to remain cognisant of issues related to workforce, training and equity of access. Many ongoing issues in these areas remain high priority but the pathways to addressing these present challenges.
- Faculty of Radiation Oncology representatives have met with the Te Whatu Ora (Health New Zealand) conveying the need to increase radiation oncology trainee numbers given the potential critical shortage in the future. We have requested an additional five training positions per year. The CEO of Te Whatu Ora is considering this request and has invited the College to get involved in various working

groups looking at issues such as capacity in order to enable additional training places. The College continues to advocate on workforce matters and collaborate with Te Whatu Ora.

Indigenous Health Action Plan

- The Faculty of Radiation Oncology Council has been active in progressing goals under the RANZCR Action Plan for Maori, Aboriginal and Torres Strait Islander Health. This has included approval for the implementation of cultural safety modules for trainees and the establishment of the Radiation Oncology Selection Working Group which will place a focus on increasing the recruitment and retention of Aboriginal, Torres Strait Islander and Māori medical students into the training program.
- Radiation Oncology Alliance (ROA)
- The ROA consists of the Australian Society of Medical Imaging and Radiation Therapy (ASMIRT), Australasian College of Physical Scientists and Engineers in Medicine (ACPSEM), Cancer Nurses Society of Australia (CNSA) and RANZCR.
- The ROA has developed an action plan and is refining the Radiation Oncology Practice Standards (ROPS) with the updated ROPS being published soon.

The International Radiation Oncology Network (IRON) and the IAEA

- Over the past few years via technical meetings held under the auspices of the IAEA, a number of action items have led to the foundation of a network of Colleges and Societies all involved in radiation cancer medicine.
- RANZCR is a founding member of the International Radiation Oncology Network that held its first hybrid meeting on 23 October 2022.
- The purpose of IRON is to provide a framework of collaboration, communication and to allow for the pursuit of common interests especially in education, training and research with the aim of securing best health outcomes. In so doing, IRON has “partnered” with the IAEA in a formal manner to cooperate and collaborative in endeavours common also to the IAEA.
- This arrangement with the IAEA allows IRON to access a platform where we can share unclassified educational and training, quality and other material.

RANZCR Annual Scientific Meeting (ASM)

- The College successfully ran its 72nd ASM with the theme Reflect, Revive, Reimagine.

- We had a record number of registrations which include RANZCR members, virtual delegates, speakers, exhibitors, international guests, complimentary registrants and staff.

Accreditation Review of Radiation Oncology Training

- An Accreditation Review Working Group (ARWG) has been formed and is tasked with a detailed review of the accreditation standards, the development of more transparent and consistent process for the conduct of accreditation site visits.

2022 Training Program, Examinations and AMC Conditions

- The College successfully launched the 2022 Radiation Oncology Training Program which saw the introduction of new work-based assessments, a new ePortfolio platform and a change to the structure of the training program.
- The College also successfully ran the 2022 Phase I and Phase II Radiation Oncology Examinations.
- The College continues to make progress against AMC conditions pertaining to RANZCR’s 2019 accreditation assessment.



International Radiation Oncology Network meeting

Joint Faculty Council Meeting

- The Faculty Council had a successful joint Faculty of Clinical Radiology and Faculty of Radiation Oncology Council Meeting (9-10 June 2022) where Councillors were provided with cultural awareness training. By fostering collaboration between the Faculties, it is hoped that cross-faculty matters (especially those that affect training and assessment, continuing professional development and our strategic directions), can be better addressed and progressed.

Continuing Professional Development

- In alignment with the MBA and MCNZ, the College has moved to a CPD system where CPD activities are logged annually rather than on a triennium. The College has also launched a CPD ePortfolio for logging CPD activities, supported by guidelines and videos to assist our members.



Keen Hun Tai
Dean, Faculty of Radiation
Oncology, RANZCR





MEDICAL ONCOLOGY GROUP OF AUSTRALIA

Pursuing excellence in medical oncology research, education and clinical practice, the Medical Oncology Group of Australia (MOGA), the national professional organisation for the medical oncology profession, and Society of the Royal Australasian College of Physicians, is pleased to report on some highlights of our activities in 2022.

Oncology Drugs, Treatments and Advocacy

In response to a diverse range of national and international health, medical and oncology sector issues MOGA represented the profession through lobbying and advocacy activities, media and members liaison, the provision of advice to industry, government and regulatory bodies. Key initiatives included Telehealth Services, National Medicines Policy Review, the National Cancer Plan, and advice on the Repurposing of Medicines Program being undertaken by the Federal Department.

The year also saw MOGA make numerous oncology drugs and therapeutics submissions to the national regulatory bodies and processes. The profession's Drugs Group also met regularly with the PBAC to address oncology issues under consideration by Australian regulatory bodies. They also ensured that current, accurate advice on clinical practice and trial developments was directed to key decision-makers.

Membership

The strong interest in our speciality was reflected in the growth of the membership to include 603 consultants and 246 trainees. Members make an invaluable contribution across all MOGA's activities and to our profession.

Professor Euan Walpole, based at Brisbane's Princess Alexandra Hospital was the recipient of the annual Cancer Achievement Award. Professor Walpole's contribution as a medical oncology clinician, clinician-researcher, leader and mentor in cancer medicine and oncology nationally is well-known in the areas of melanoma, upper gastrointestinal cancer and cancer epidemiology. His outstanding leadership skills in clinical oncology, evidence-based medicine and research have resulted in the development of numerous, influential projects including the Queensland Oncology Online Tool which collects data for all patients with cancer in Queensland – a unique resource and tool to actively monitor and advocate for quality cancer care. Also, as a founding member of the Australia and Asia Pacific Clinical Oncology Development Workshop in 2004, he played a vital role in the creation of Australia's leading international training program in oncology clinical trials research that has directly benefited the careers of many young oncologists.



Dr Yada Kanjanapan, was named as the 2022 recipient of the Martin H. Tattersall's Heroes Award for providing outstanding leadership on the role of COVID vaccination for individuals with cancer. Her dedicated work provided invaluable professional best practice guidance on how best to

vaccinate vulnerable cancer patients by monitoring and reviewing emerging evidence, research and then updating the COVID-19 vaccination in adult patients with solid tumours MOGA position statement. This ultimately resulted in the following important publication: Kanjanapan Y, Blinman P, Underhill C, Karikios D, Segelov E, Yip D. Medical Oncology Group of Australia Position Statement: COVID-19 vaccination in patients with solid tumours, *IMJ*, 2021;51(6):955-95.

Partnerships

In 2022 MOGA's strategic national and global networks and partnership were strengthened. MOGA worked with key organisations such as the European Society for Medical Oncology, The American Society for Clinical Oncology, the College, Australian Medical Association, Cancer Australia, and Cancer Council Australia, to proactively develop, share information, and provide regular updates on critical issues.

MOGA's Workforce Group continued to address current and future issues for the national medical oncology profession, including the impacts of the post COVID so-called "cancer tsunami". Dr Florian Honeyball, Chair of the Group developed plans to map and model the current and future national medical oncology workforce and develop employee performance metrics. The new work also included the development of a current Scope of Practice for an Australian Medical Oncologist, taking into consideration factors such as productivity, quality and safety, patient and cancer variations, survivorship and care requirements as well as predicated needs.

Education and Professional Development Programs

MOGA's educational initiatives in 2022 included the mandatory Communications Skills Training Program in effective patient communication. The National and State Trainee Representatives along with the Young Oncology Group of Australia provided support and guidance for trainees and junior consultants, organising a range of both online and face to face educational and professional activities throughout the year.

An Oncology Mentorship Program was successfully piloted by the NSW Trainees Group and young MOGA members representing the national trainee and membership network, led by Dr Jia Liu. Following formal endorsement by MOGA, it is planned to launch a more extensive, national pilot program in 2023.

MOGA held a face-to-face Annual Scientific Meeting in Cairns from 7-8 August, Co-Convened by Drs Natalie Rainey and Peter Manders. The truly stellar group of international speakers, all

of whom were at the cutting edge of Medical Oncology, included Professors Hope Rugo, University of California San Francisco, USA, Natasha Leighl, Princess Margaret Cancer Centre, Canada and Jose Angel Garcia Saenz, Hospital Clinico San Carlos, Spain.

The MOGA ASM is uniquely different from the other conferences open to our members. Apart from the high standard of medicine presented, it is an opportunity for members to meet and discuss the stressors and successes of the year with peers. It is an opportunity to consolidate a concerted voice for our group and identify and address our specific concerns as a community. Evidence of this was seen in one of our newer sessions on the topic of "Clinician Wellbeing", which lies at the heart of what makes MOGA increasingly relevant. Furthermore, a record number of abstracts were submitted from advanced trainees and young oncologists highlighting the ongoing importance MOGA has in shaping the training of the next generation of medical oncologists.

MOGA presented a third online Asia Pacific Oncology Research Development Protocol Development Workshop (the 11th ACORD Workshop since 2004). Convened by Professor Chris Karapetis, the Workshop, remained an intensive six-day active-problem based, collaborative learning exercise. Over 60 oncology junior clinicians and 35 Faculty from five countries in the Asia-Pacific participated; including observers from the Hanoi Cancer Centre in Vietnam.

We look forward to another productive year collaborating with our many partners to advance the Australian oncology sector.



Deme Karikios
Chair, MOGA



Melanoma and Skin Cancer Trials
Limited

MELANOMA AND SKIN CANCER TRIALS

Melanoma and Skin Cancer Trials (MASC Trials) continued to unite a dynamic network of health professionals specialising in melanoma and skin cancer this year. Together, we developed, conducted, published, and promoted high-impact research on how melanoma and skin cancer is prevented, diagnosed and treated.

This year, patient accrual increased with 1,187 new participants enrolled in five trials open to recruitment. We also have seven trials in follow-up and 152 trial sites across 11 countries. These achievements are testament to the fantastic work of our investigators and their teams throughout the world. Our membership, which spans from healthcare professionals to consumers, also grew with 2,240 members representing 36 countries.

Melanoma clinical trials

The [IMAGE trial](#), led by A/Prof Victoria Mar, is examining the effectiveness of early detection 2D and 3D Melanoma Surveillance Photography. This intervention will be compared to standard clinical monitoring to determine which method results in fewer unnecessary biopsies in patients at high risk of melanoma. The trial's outcomes will also provide the Australian Government with the evidence required to decide if Melanoma Surveillance Photography should be covered by Medicare. The trial now has 12 sites and 580 participants out of a maximum enrolment of 680.

The [MelMarT-II trial](#) is investigating whether there is a difference in disease-free survival for patients treated with either a 1cm or 2cm excision margin for stage II primary cutaneous melanoma. The phase III randomised controlled trial is open in Australia, New Zealand, United Kingdom, the USA, Canada, the Netherlands, Sweden and Slovenia, with more sites planned. This year the trial was activated within the USA's National Cancer Institute's National Clinical Trials Network through the SWOG Cooperative Group. Leading the trial together are Prof Michael Henderson (Australia) and Prof Marc Moncrieff (United Kingdom). The trial now has 89 sites and 966 participants out of a target enrolment of 2,998.

This year A/Prof Victoria Mar led consumer research that informed the development and delivery of melanoma education resources for regional and rural Australians. The first project involved the creation of the [Self-Skin Checks, No Regrets](#) campaign in partnership with Melanoma Patients Australia. We then partnered with the Melanoma and Skin Cancer Advocacy Network to deliver a series of educational videos about [sun safety for BlazeAid volunteers](#).

Published in the Journal of the American Academy of Dermatology, the [SMARTI trial](#), led by A/Prof Victoria Mar, has shown that digital photography combined with the MoleMap AI algorithm has substantial agreement with a treating dermatologist's face-to-face assessment of whether a lesion was benign or malignant, and accuracy that compares favourably with a dermatologist's remote assessment. This trial is a promising step towards improved early detection technologies for GPs, telehealth clinics, and skin cancer clinics.

Merkel cell carcinoma clinical trials

The [I-MAT trial](#), led by Dr Wen Xu, gives avelumab to patients with stage I-III Merkel cell carcinoma after their surgery and / or combined radiotherapy. The trial will help to determine if a six-month regimen of avelumab is well-tolerated and can eliminate residual microscopic cancer cells. This Phase II, prospective, randomised, placebo-controlled, multi-institutional trial has 18 sites and 64 participants out of a target enrolment of 132.

A/Prof Shahneen Sandhu is leading the [GoTHAM trial](#), which is testing avelumab in combination with either radionuclide therapy or external beam radiotherapy. The Australia-wide multicentre, Phase Ib/II trial has enrolled 12 participants with metastatic Merkel cell carcinoma and has six sites open nationally.

Uveal melanoma clinical research

The Uveal Melanoma Registry, led by Prof Anthony Joshua, aims to identify predictive clinical features, document the natural history of uveal melanoma, and collect information about clinical management. The registry will generate clinical and biomarker data that can be used to support drug development. Patients can also provide direct feedback. The registry now has seven sites and 90 participants out of a target enrolment of 1,200.

Clinical trials in start-up

The [BETTER trial](#), led by A/Prof Tim Wang and Dr Malaka Ameratunga, is testing a new treatment combination that aims to improve the care, treatment, and quality of life for patients with melanoma brain metastases.

The [SOCRATES trial](#), led by Prof Stephen Nicholls, aims to determine the effect of statins on the progress of atherosclerosis of the heart in patients with melanoma treated with an immune checkpoint inhibitor.

The [SiroSkin trial](#), led by Prof Kiarash Khosrotehrani is investigating whether topical sirolimus can reduce the number of facial squamous cell carcinomas in solid organ transplant recipients.

Discipline-Specific Advisories

Our [Discipline-Specific Advisories](#), including the [AMIGOs](#) and [AOMA](#) groups, met throughout the year to evaluate and develop new research projects.

Our [Consumer Advisory Panel](#), led by Alison Button-Sloan, met to discuss consumer-led research and funding opportunities for consumer engagement.

Events

The 3rd AOMA Summit was held virtually in July. Over 200 people registered for the event and the online format allowed people to attend from all over the world. View the Summit [videos](#).

The next MASC Trials Annual Scientific Meeting will be held on 23 March 2023 in Brisbane and is a satellite meeting of the Australasian Melanoma Conference. Visit the [MASC Trials website](#) for more information and to register.

Our people

We appointed two new Board Directors this year. Prof Sophia Zoungas provides an important connection to Monash University and Sharon Van Buerle provides expertise in complex portfolios and international processes.

In April, Gabrielle Byars was appointed CEO. After joining MASC Trials in 2020, Gabrielle has served as a Clinical Research Associate, Research Manager, and now CEO.

The year ahead

With renewed funding from Cancer Australia, new projects in start-up, and the rapid pace of discovery in melanoma and skin cancer research, there is much optimism for our important clinical trials and their potential to change practice. We look forward to an active and productive 2023 in which MASC Trials will continue our collective effort to conquer melanoma and skin cancer.



Mark Shackleton
Chair, MASC Trials



Psycho-oncology Co-operative Research Group

PSYCHO-ONCOLOGY CO-OPERATIVE RESEARCH GROUP

The Psycho-oncology Co-operative Research Group is a multidisciplinary trials group comprised of more than 2000 health care professionals and researchers who share a common mission of improving the emotional support and psychological care of people affected by cancer.

Our scope of work is wide ranging and our research, developed in collaboration with our multi-disciplinary [Scientific Advisory Committee](#), aims to meet current priorities as well as anticipate future needs.

Research

In 2022 we completed the final analyses of two flagship programs of research: the ADAPT Program, which aimed to assess implementation of [a clinical pathway for identification and management of anxiety and depression in adult cancer patients across 12 cancer services in NSW](#); and the PiGEON Program which includes two [inter-related longitudinal studies which explore the psychosocial, behavioural and ethical issues and outcomes of cancer genomic testing](#).

ADAPT

The Cancer Institute NSW funded [ADAPT Program](#) developed patient and health professional resources to support implementation of the [Australian Clinical Pathway for Identification and Management of Anxiety and Depression in Cancer](#) (ADAPT CP) including development of an online portal that operationalised the ADAPT CP.

A Cluster RCT evaluated two implementation strategies to promote uptake of the ADAPT CP in oncology services. 12 oncology services participated in the cluster RCT (nine metropolitan, three regional). 696 patients participated across the services resulting in 1323 screening events.

Results confirmed at higher levels of anxiety and depression the enhanced support (intervention arm) provided to sites did improve adherence to the ADAPT CP recommendations for referral and follow up compared to core support (control arm), although overall there was no difference in adherence.

The implementation of the ADAPT CP was also found to be a cost-effective strategy which can reduce health service cost regardless of implementation arm. However, even with high acceptability, implementation of health service change is challenging and although services were motivated to implement the ADAPT CP they experienced barriers to implementation. Adequate resourcing and high-level commitment are key.

To date, ADAPT has resulted in [17 publications](#) (with more to come) and the results of the program have been presented as poster and presentations on 74 occasions at oncology and health services conferences across the life of the program.

PiGEON

The PiGEON Project comprised two inter-related longitudinal studies exploring the psychosocial, behavioural and ethical issues and outcomes of cancer genomic testing.



Prof Phyllis Butow and colleagues at the 2022 COSA ASM

PiGEON recruited participants from two cancer genomic studies: 1939 advanced cancer patients undergoing comprehensive genomic profiling to determine targeted treatment options within the Cancer Molecular Screening and Therapeutics (MoST) Program; and 1379 cancer patients with features suggestive of a genetic aetiology as well as blood relatives, who will undergo germline genomic profiling through the Genetic Cancer Risk in the Young (RisC) Study

Results show that obtaining health information about self and for family appear to be the main drivers for undertaking cancer genomic testing. There is a need to consider innovative and flexible methods of communication and consent for genomics in clinical practice as patients have limited knowledge of the accuracy and utility of genomics which can lead to unrealistic expectations.

Patients waiting for genomic results do not experience major psychological morbidity, however, some do experience distress and uncertainty during this period. Receiving a

nonactionable genomic result or an actionable without ensured access to treatment, may cause increased distressed in advanced cancer patients. This suggests that pre-testing assessment and counselling addressing uncertainty and self-efficacy, and post-results support may be beneficial for patients.

Finally, the results showed that family communication in the genomic context is complex and suggests a need for family-centred interventions and resources to facilitate communication of relevant information within families.

To date the PiGEON team has had close to 30 journal articles published, with more in the pipeline and the team have presented findings at a range of international and national conferences.

BRAINS

Progress on the [BRAINS Program](#) (Brain cancer Rehabilitation, Assessment and Intervention for survivorship NeedS) scaled up considerably this year and will continue to do so in 2023.

BRAINS, a national collaboration with the Cooperative Group in Neuro-Oncology (COGNO), Cancer Symptom Trials Group (CST) and the Primary Care Collaborative Cancer Clinical Trials Group (PC4), aims to deliver care that encompasses implementing screening for needs assessment and symptoms; exploring optimal models of survivorship care; addressing information needs of patients and carers; caring for caregivers and examining rehabilitative and supportive care interventions in this population.

The program will also create a repository of information resources, a national care coordination service and develop and roll out interventions to address gaps in care, including a collaboration with CanTeen to support young adult brain cancer survivors to re-engage with life.

Concept Development Workshops

PoCoG holds concept development workshops twice a year to support members to develop and refine research proposals aimed at generating funding applications.

In line with Cancer Australia priorities, our CDW in May was a call for research proposals with priority groups as their focus. This successful workshop resulted in two new supported studies, which we look forward to reporting on in the future.

In addition to this, PoCoG's Fear of Cancer Recurrence (FCR) Special Interest Group hosted an FCR themed workshop in late November bringing together clinicians and researchers with an interest in FCR and focused on building a sustainable stepped care model of care that incorporates identification and management of FCR. This exciting national collaboration is in its early stages and will be progressed in 2023.

Special Interest Groups

PoCoG Special Interest Groups (SIGs) offer members an opportunity to progress their research goals and collaborate with researchers and clinicians with shared interests. In addition to the FCR group we have groups focused on Implementation Science, Cancer Prevention, End of Life Care, Adolescents and Young Adults, Early Career Researchers and a group for researchers located in South Australia.

Over the last financial year PoCoG SIGs have been a great source of activity and innovation through the development and delivery of an ongoing series of lunchtime webinars, which have provided members with a forum to meet and share their work, during the restrictions imposed by COVID-19 and beyond.

Highlights of our lunchtime webinar series this year included [Creating the DREAM TEAM: how to build capacity for implementation science research projects](#) and [Digital health in psycho-oncology, hosted by SA PoCoG](#).

These webinars are available to watch on the [PoCoG YouTube channel](#) and given their popularity and ease of access will continue, even as our transition back to face-to-face continues.

To learn more about PoCoG activities and to join visit www.pocog.org.au



Joanne Shaw
Executive Director,
PoCoG



ROYAL COLLEGE OF PATHOLOGISTS OF AUSTRALASIA

The Royal College of Pathologists of Australasia (RCPA) principal objectives are to train and support pathologists and senior scientists to improve the use of pathology testing, utilising the highest quality evidence and expert collaboration. We are pleased to highlight the following notable achievements accomplished in 2022.

International Pathology Day

The 10th [International Pathology Day](#) was a multidisciplinary celebration of the essential and crucial role of pathology in patient diagnosis, management, and treatment.

International Pathology Day is held annually as an awareness day dedicated to highlighting the fundamental role of pathology in addressing global health challenges and improving community health outcomes worldwide. The event was held on 9 November and was hosted by Sophie Scott, National Health Reporter for the Australian Broadcasting Corporation (ABC).



RCPA International Pathology Day 2022

10th annual International Pathology Day event at the Royal College of Pathologists of Australasia headquarters in Sydney.

The RCPA invited local world experts to reflect on key achievements and advancements in pathology over the past ten years. Speakers included anatomical pathologists Professor Wendy Cooper and Professor Richard Scolyer AO, who highlighted how far research, targeted therapies and diagnosis, have come with respect to lung cancer and melanoma and the variety of options now available for patients. Virologist Professor William Rawlinson AM reflected on the past 2.5 years of the COVID-19 pandemic. Genetic pathologist Professor Anja Ravine discussed the importance of genetic testing and the role of pathology with the multi-disciplinary team and the dynamic and expanding nature of the field of genetic pathology and genomics. Past RCPA President Dr Bev Rowbotham AO and Dr Michael Harrison discussed key achievements for the College and overall health outcomes achieved. Paediatric pathologist Dr Diane Payton spoke about the role of perinatal autopsy to bring answers and closure for families. Patient advocate Ms Ally Richards shared her personal story.



RCPA International Pathology Day 2022

RCPA advocacy for critical mutation testing and cancer treatment

The [targeted bowel cancer therapy](#) Braftovi was added to the Pharmaceutical Benefits Schedule in 2022. This was made possible following a successful RCPA application to the Medical Services Advisory Committee for mutation testing for patients with metastatic colorectal cancer.

In addition, a resubmitted Medical Services Advisory Committee [application](#) for somatic gene testing for the diagnosis of glioma, including glioblastoma, was approved in 2022.

Podcasts

The RCPA continued the podcast series '[The Pathologists Cut](#)'. This regular podcast, hosted by the RCPA President, showcased conversations with expert Pathology Fellows and brought to light the critical work of pathologists and the integral part pathology plays in medicine and healthcare.

In 2022, the RCPA also launched a spin-off podcast series '[Micro Waves](#)', aimed at medical students and junior doctors. Hosted by RCPA Vice President Trishe Leong, this limited series explores the different disciplines of pathology, to educate and expand awareness of pathology as a career.

Cancer Services Advisory Committee

The Cancer Services Advisory Committee (CanSAC) is a multidisciplinary committee that has oversight for all cancer-related activities within the RCPA. The goal of CanSAC is to raise the standard of pathology and cancer information. CanSAC lends its expertise and provides an important link to other external cancer-related organisations such as the Cancer Monitoring Advisory Group (CMAG),

the Intercollegiate Committee on Cancer (ICC), Cancer Australia as well as COSA.

CanSAC continues to develop MSAC applications for evidence-based molecular and genomic testing of high-priority cancers. In 2022 CanSAC submitted an MSAC funding application for small gene panel testing for non-small cell lung carcinoma. Public funding of these tests supports one of the key tenets of the College by ensuring equity of access to testing for all Australians.

Structured Pathology Reporting of Cancer Project

Structured Pathology Reporting of Cancer (SPRC) [protocols](#) are the result of expert multi-disciplinary input and independent peer review and are authored by a volunteer group of expert pathologists, clinicians and scientists. Each protocol incorporates the latest scientific evidence and internationally agreed standards from the International Collaboration on Cancer Reporting (ICCR).

In 2022, the National Pathology Accreditation Advisory Council acknowledged the value of a nationally standardised approach to cancer reporting by including Structured Pathology Reporting of Cancer as a standard in the 4th edition [Requirements for Information Communication and Reporting](#). The National Pathology Accreditation Advisory Council standard came into effect in August 2022 and requires that the content of cancer reports comply with available RCPA-published protocols and that a structured or synoptic format is used.

In 2022, a major update to the RCPA [cancer protocols webpage](#) was showcased and new oesophagus and invasive breast carcinoma protocols were published.



With the support of over 38 anatomical pathology laboratories, cancer registries and clinicians, the Structured Pathology Reporting of Cancer Project continued work on the coordination of a free software trial for pathologists. The multi-stakeholder software trial will provide local opportunities and build knowledge to support more widespread adoption of digital reporting software.

International Collaboration on Cancer Reporting

The ICCR produces standardised reporting templates for cancers, available to all countries worldwide. From its inception in 2011 with four founding members - including the RCPA - the ICCR has grown to become a not-for-profit corporation with 18 sponsoring member countries, covering six continents, and represents a pathology community that services several billion people.

New [ICCR Datasets](#) published in 2022 included three Thorax and a Neoadjuvant breast carcinoma Dataset.

RCPA anatomical pathology Fellow - Professor James Kench - commenced the role of ICCR President in November 2022. Professor

Kench has been actively involved in the ICCR for many years and has contributed to structured reporting initiatives in Australia and internationally since 2008. His expertise will be invaluable in this esteemed position.

Pathology Update Conference & Exhibition

The 20th [Pathology Update](#) was a hybrid format conference. However, the turnout of onsite attendees at the International Convention Centre, Sydney, on 4-6 March 2022 was even greater than expected and created a fantastic atmosphere for the 20th anniversary of the conference.

This significant event on our annual calendar featured extraordinary international and Australian world experts in the disciplines of Anatomical, Chemical, Forensic, Genetic, General, Haematology, Immunopathology and Microbiology.



Kenneth Lee
Council representative,
RCPA



Thoracic Oncology Group Australasia

**THORACIC ONCOLOGY
GROUP OF AUSTRALIA**

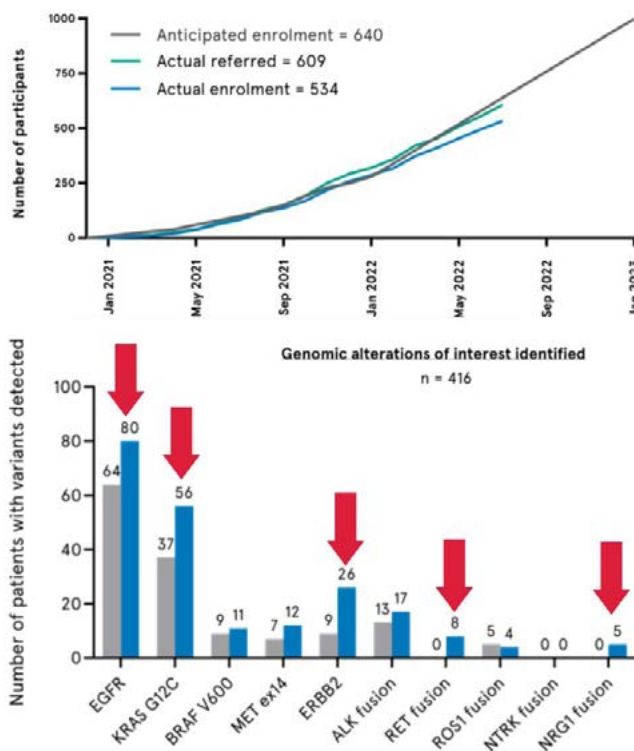
During 2022, we formalised our mission statement 'To prevent, treat and cure thoracic cancers through research, clinical trials, education and advocacy' and launched the 2022-2025 Strategic Plan to define the focus for activities over the coming years.

Clinical research program

Our clinical trial program continued to recruit well. ASPIRATION, which offers comprehensive genomic profiling to all newly diagnosed non-squamous metastatic NSCLC patients in Australia, through a partnership with NHMRC Clinical Trials Centre, University of Sydney and Omico Australia, reached 50% recruitment in July. The ASPIRATION study offers the opportunity to identify oncogenic driver mutations and options to access therapy specifically targeted to this mutation, including specific substudy clinical trials opened as part of this program. As comprehensive testing for oncogene-driven NSCLC is not yet available through the Medical Benefits Scheme, ASPIRATION has enabled over 500 metastatic NSCLC patients to access this testing and potentially benefit from a therapy specifically targeted to their particular NSCLC subtype. We also opened the SHERLOCK clinical trial, a single arm Phase II trial investigating Sotorasib, a KRAS G12C inhibitor given with chemotherapy and an angiogenesis inhibitor to participants with advanced NSCLC harbouring the KRAS G12C mutation.

DREAM3R, our Phase III international trial exploring the combination of immunotherapy and chemotherapy in mesothelioma is

ASPIRATION Study July 2022



conducted in collaboration with PrECOG and continued to recruit well in Australia and New Zealand, with the US seeing increased numbers towards the end of the year. However, with the introduction of immunotherapy for mesothelioma on the Pharmaceutical Benefits Scheme, we have amended this trial so the control arm can also include an option to access immunotherapy alone. ILLUMINATE and ALKTERNATE closed to recruitment and we look forward to hearing the results of these trials in the future. Finally, we were excited to see the results of the PEARL trial, that examined the impact of early referral to palliative care, presented at ASCO.

In May, we held an inaugural workshop to discuss survivorship research priorities for people living with lung cancer. Among other items, the workshop explored challenging side effects of curative radiotherapy treatment, fatigue and psychosocial support and the potential benefits of exercise. The workshop demonstrated high areas of unmet need, with many existing survivorship services not open to patients on continuing treatment. Minimising toxicity from radiotherapy treatment has become a focus for the radiation oncology discipline, and we will continue to explore how exercise services can be offered to people with lung cancer, potentially also assisting with fatigue and side effects on mental health.

In November we brought together the advanced NSCLC and mesothelioma and small cell lung cancer working groups to discuss evidence gaps for treatment decisions and the design of clinical trial concepts. In an immensely productive afternoon, we discussed up to 11 concepts. Approximately five of these will be worked up for further review and funding applications.

Education program

We continued our successful program in thoracic cancer education, conducting two international conference highlights symposia, four microsatellite symposia and our Annual Scientific meeting and Lung Cancer preceptorship, with over 900 delegates registered to attend these events. We also continued our podcast program with 11 new podcasts produced in the year, covering topics relevant to thoracic cancer.

For the first time since our establishment in 2020, we were able to meet face to face at the Annual Scientific Meeting, and able to hold a face to face Lung Cancer preceptorship for trainees with an interest in thoracic cancer. The Annual Scientific meeting, with the theme “Dynamic Face of Lung Cancer”, drew over 250 Australian and New Zealand clinicians, researchers, nurse/allied health workers, patient advocates, and industry representatives to hear presentations illustrating the latest research and clinical practice in surgery, diagnostics, radiation therapy, targeted therapy, immunotherapy and prevention of risk factors for thoracic cancers. At the conference dinner, we were honoured to present Prof David Ball OAM, radiation oncologist specialising in thoracic cancer treatment and research, and Mr Barry Robson, who continues to support sufferers of asbestos disease and raise awareness of mesothelioma, with our inaugural TOGA Life Member Awards.

Philanthropy and advocacy

We continued to see success in our fundraising, with our City2Surf and Melbourne Marathon campaigns raising a combined \$40,000. We also congratulate Claire Monk, who completed an Ironman and singlehandedly raised over \$40,000 for TOGA, amidst the bittersweet reminder of the brutality of lung cancer.

We made five submissions to consultations including the National Tobacco Strategy, the Australian Cancer Plan and the small gene panel testing for NSCLC. We also heightened awareness of lung cancer during Lung Cancer Awareness month by distributing TOGA lapel pins with white lung cancer awareness ribbons. We were delighted to distribute these at the COSA Annual Scientific Meeting, which featured lung cancer in 2022, as well as several other events.

Commendations

We were thrilled that both Prof Anna Nowak and Prof Ben Solomon were elected as fellows to the Australian Academy of Health and Medical Science. Prof Nowak leads our Phase III DREAM3R trial and the collaboration with PrECOG, led the predecessor Phase II DREAM trial, and boasts a research career from lab to bedside dedicated to examining the benefits of immunotherapy in mesothelioma. Professor Ben Solomon has been involved in clinical trials with novel tyrosine kinase inhibitors including a leading role in the practice-changing trials for tyrosine kinase inhibitors active against ALK+ NSCLC, as well as leading several smaller TOGA clinical trials. Prof Solomon is also Group Leader of the Molecular Therapeutics and Biomarkers Laboratory in the Research Division at Peter MacCallum Cancer Centre.

This year we also celebrated Australia Day Honours for Mary Duffy, lung cancer nurse and TOGA member, for significant services to medicine in the field of lung cancer.

We thank our Board of Directors, all our committee representatives and all our members who volunteer their time for TOGA, and have helped TOGA have another tremendously successful year in 2022.



Nick Pavlakis
Chair, TOGA



TROG ASM 2022



TROG CANCER
RESEARCH

Member engagement

Throughout 2022, we have continued to work closely with our members to ensure that our trials and new proposals address the key priorities in radiation oncology and that we are horizon scanning for emerging technologies and techniques in radiation medicine. Our tumour stream Working Parties comprise members from many craft groups and disciplines, with a focus on Head/Neck and Skin, Breast, Lung, Genitourinary and Central Nervous System. These Working Parties are complimented by a number of committees and special interest groups including the New Technologies and Techniques Committee and Special Interest Groups in Particle Therapy and MR in Radiation Therapy. The participation of our members via these committees brings new ideas, partnerships and collaborations in support of advancing radiation medicine research to improve outcomes for those affected by cancer. We thank all of our members for their time and efforts to support our TROG research endeavours.

Member events

In 2022 we were very pleased to welcome back our members and collaborator to our [Annual Scientific Meeting](#) in a face-to-face format for the first time in three years. Held at the Royal Pines Resort on the Gold Coast from 30 June to 2 July 2022, we had over 270 participants with speakers, delegates and industry representatives making the most of the networking opportunities.

Research achievements in 2022

TROG's 15,000th participant was recruited in May 2022. We thank all the amazing participants, clinicians, radiation therapist, medical physicists, trial chairs, coordinators, statisticians and valued TROG members for their commitment over the last 30 years. This milestone highlights just how far TROG has come; with over 15,000 patients receiving the benefits of being in a TROG clinical trial, but importantly, these 15,000 participants who have worked with us to achieve research results that change lives and improve outcomes and quality of life for those affected by cancer. We could not be prouder of this milestone.

Active TROG trials in 2022

[TROG 21.07 SOCRATES HCC](#) ***NEW TRIAL***

The randomised control trial SOCRATES HCC opened for recruitment in October 2022. Supported by AGITG, GESA and ARGANZ, it will recruit 218 participants from 17 trial sites across Australia over the next three years and will compare SABR to other current first line treatments (thermal ablation, transarterial therapies) for non-surgical candidates with solitary ($\leq 5\text{cm}$) early-stage HCC. SOCRATES HCC aims to set a new benchmark in the management of HCC, improving access to effective curative intent therapies and enhancing inter-disciplinary collaboration. *Trial Chairs: Prof A.Wigg (Flinders Medica Centre, SA) and A/Prof D.Pryor (Princess Alexandra Hospital, QLD)*

[TROG 20.01 CHEST RT](#) is investigating the safety and effectiveness of chemotherapy and immunotherapy in Extensive-Stage Small-Cell Lung Cancer with thoracic radiotherapy. The trial has recruited seven participants across six sites. *Trial Chairs: Dr E.Hau (Westmead Hospital, NSW) and A/Prof P.Mitchell (Austin Hospital, VIC).*



[TROG 19.06 DECREASE](#) (DarolutamidE + Consolidation RadiothErapy in Advanced proStatE Cancer Detected by PSMA); DECREASE was opened at 14 centres and enrolled 28 participants in 2022

Trial Chairs: Associate Professor S.Siva and Associate Professor A.Azad (Peter MacCallum Cancer Centre, VIC).

[TROG 18.06 FIG](#) - FET-PET In Glioblastoma trial is investigating how the addition of FET-PET imaging to standard MRI imaging affects radiation target volume delineation and treatment planning for Glioblastoma. 70 participants were enrolled across 9 sites in 2022, bring recruitment to a total of 101.

Trial Chairs: A/Prof E.Koh (Liverpool Hospital, NSW) and Prof A.Scott (Austin Hospital, VIC).

[TROG 18.01 NINJA](#) (Novel Integration of New prostate radiation therapy schedules with adjuvant Androgen deprivation). The NINJA trial has been recruiting strongly and has officially converted to the Phase III trial. 221 participants have been recruited across 20 sites since activation.

Trial Chairs: Prof J.Martin (Calvary Mater Hospital, NSW) and Dr M.Sidhom (Liverpool Hospital, NSW)

[TROG 17.02 OUTRUN](#) (Phase II randomised trial of Osimertinib with or without Stereotactic Radiosurgery for EGFR Mutated NSCLC with Brain Metastases). OUTRUN completed recruitment of the target of 40 participants in September 2022.

Trial Chair: Dr F.Hegi-Johnson (Peter MacCallum Cancer Centre, VIC), A/Prof C.Lee (St George Hospital, NSW) and Dr Y.Soon (National University Hospital, Singapore)

[USYD/TROG 17.03 LARK](#) (Liver Ablative Radiotherapy utilising Kilovoltage intrafraction monitoring). Recruitment continued across the three active sites in 2022 with a total of 19 participants recruited to date.

Trial Chairs; Dr T.Wang (Westmead Hospital NSW) and Dr Y.Lee (Princess Alexandra Hospital, QLD)

2022 Publications

In 2022 we had seven [publications](#) related to TROG trials including publication of individual

trial results as well as meta-analyses. We are proud to celebrate and acknowledge the time, effort and dedication that goes into each manuscript and abstract submitted and/or published by our team and members.

Member Achievements

Congratulations to A/Prof Eng-Siew Koh, Prof Andrew Scott and the [TROG 18.06 FIG](#) Study team for being awarded the Chris Atkinson Award (Best Scientific Paper Presentation in Radiation Oncology) and the Elekta Award Advances in the Use of Technology in Radiation Therapy (Best Scientific Paper) at the recent RANZCR ASM. This is fantastic recognition of the substantive work in relation to the FIG trial credentialling program.

We are thrilled to announce that an [AGITG Innovation Grant for Clinical Trials](#) was awarded to Dr Trang Pham for her research concept titled *"Improved local control using adaptive MRR-guidance to target abdominal cancer with stereotactic ablative radiotherapy: A randomised Phase II trial"*. The trial will be conducted collaboratively between AGITG and TROG Cancer Research.

We are also excited to announce that the International Journal of Radiation Oncology - Biology - Physics (IJROBP) has highlighted [TROG 13.01 SAFRON II](#) in its December 2022 [Podcast: Oligometastasis - The Special Issue](#). Editor-in-Chief Dr. Sue Yom hosted A/Prof. Shankar Siva, Trial Chair to discuss the May 2022 article ["Cost-Effectiveness of Single- versus Multi-Fraction SABR for Pulmonary Oligometastases - The SAFRON II Trial"](#).

Critical findings from the [BIG 307/TROG 07.01 DCIS Trial](#) (A randomised phase III study of radiation doses and fractionation schedules for ductal carcinoma in-situ (DCIS) of the breast | Chair: Professor Boon Chua), have been recognised on a global scale in the leading medical journal, [The Lancet](#).



Trevor Leong
Chair, TROG

OTHER REPORTS



CANCER
COUNCIL

Cancer Council is Australia's leading cancer charity, and the only charity that works across every aspect of every cancer including research, prevention and support. Our vision is a cancer-free future and our Federation continues to work towards that vision, helping to reduce the burden of cancer in Australia.

We have continued to lead the way with world-class research, prevention work, supporting people affected by cancer and using our voice and expertise to advocate for all Australians affected by all cancers. Our work with COSA on improving survival from cancer has never been more critical.

Some highlights of this year include:

- The delivery of a national skin cancer prevention campaign in partnership with the Cancer Council Federation and Australian Government.
- The development of an innovative integrated communications strategy as part of a broader program of bowel screening work, utilising comprehensive research and analysis from our Federation to increase participation in the National Bowel Cancer Screening Program.
- A new platform to support the development and publication of clinical guidelines for health professionals of all specialities.

I'm proud of our efforts in policy development, government submissions, and advocacy. In partnership with other cancer organisations, we represent the more than 1 million Australians currently living with cancer.

In the lead-up to the federal election we put cancer control on the agenda of all political parties. Supported by our advocacy, we saw policy changes that will prevent cancer cases for years to come: another tranche of funding for the Tackling Indigenous Smoking initiative and expanding self-collection for cervical screening so that all women and people with a cervix are eligible for this less invasive test.

Our sustained calls over two years for a National Skin Cancer Prevention Campaign culminated in National Skin Cancer Action Week. Together with the Australasian College of Dermatologists, we reminded the Australian public and politicians that skin cancer remains our national cancer, so 'the job's not done until we're all safe in the sun'. These calls led to Australian Government investment in the first national skin cancer prevention campaign in more than a decade. We are delighted to have successfully partnered with the Australian Government and our Federation in delivering the campaign that resulted in increased intentions to be SunSmart.

This year, 150,000 Australians were diagnosed with cancer. Along with their families and communities, they looked to us as one of Australia's most trusted charities, for vital evidence-based information and support. Over the past year, more than 36,000 Australians spoke to Cancer Council's highly trained and experienced cancer nurses and health professionals working on the 13 11 20 Information and Support Line. Cancer Council distributed over half a million free booklets and digital resources. In total, Cancer Council's support services - including subsidised accommodation, transport, and legal and financial advice - were accessed almost 220,000 times.

Cancer Council Australia and the State and Territory Cancer Councils, together with our research partners, enabled \$51.7 million in world-class cancer research in 2021. The Federation has funded 664 researchers in 309 projects across 44 institutions, which have made life-changing advancements in cancer prevention, detection and treatment.

Tobacco use remains the leading preventable cause of cancer. As a nation, we need to do more in tobacco control. A comprehensive approach to tobacco control, as outlined in the draft National Tobacco Strategy, is essential. This includes investment in an ongoing integrated, public education strategy to support and motivate current smokers to quit. Such a strategy would put us on the path to achieving our national goal of reducing tobacco use to less than 5% in the general population.

Lastly and most importantly, as a non-government organisation, our work would not be possible without the support of our community. We particularly want to thank the many COSA members who provide us with advice and support, and throw their influence behind our policy, project, and advocacy initiatives every year. As our clinical partner you make an amazing contribution to our efforts to achieve a cancer-free future.

I very much look forward to working with you in the future.



Tanya Buchanan
CEO, Cancer Council
Australia

FINANCIAL STATEMENTS AT 30 JUNE 2022 AND INDEPENDENT AUDIT REPORT

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ABOUT CLINICAL ONCOLOGY SOCIETY OF AUSTRALIA LIMITED

The Clinical Oncology Society of Australia (COSA) is the peak national body representing health professionals from all disciplines whose work involves the care of cancer patients.

Our vision

Quality multidisciplinary cancer care for all.

Our mission

To improve cancer care and control through collaboration.

COSA achieves this by:

- supporting the professional and educational needs of cancer health professionals
- enhancing cancer care and control through network development
- advocating for improvements in cancer care and control
- facilitating research across the spectrum of cancer

Guiding Principles

As a membership organisation, COSA's activities are driven by the needs of our members. The following guiding principles are intended to provide an overarching direction for all COSA activities.

- COSA activities should have a multidisciplinary focus
- COSA activities should have a clinical focus
- COSA activities should have outcomes relevant to its members, patients and carers
- COSA will act as a hub and facilitator for idea generation

Strategic Directions 2019-2024

1. Advocate for matters affecting cancer service delivery, policy and care
2. Meet the educational needs of COSA's multidisciplinary membership
3. Promote and facilitate cancer research
4. Ensure the sustainability of COSA
5. Engage, attract and retain members

Our history

In July 2013, The Clinical Oncological Society of Australia Incorporated (The Society) decided to migrate from an Incorporated Association to a Company limited by Guarantee. This new company was incorporated with an ABN 97 631 209 452 and started trading from 1 July 2013. COSA was registered with the Australian Charities and Not-for profits Commission (ACNC) on 3 December 2012.

CLINICAL ONCOLOGY SOCIETY OF AUSTRALIA LIMITED

Clinical Oncology Society of Australia Limited

(A company limited by guarantee)

Corporate Information

ABN 97 631 209 452

The following persons were Directors of COSA during or since the end of the financial year:

Ms Sandie Angus
A/Professor Judy Bauer
Professor Fran Boyle AM
Professor Tanya Buchanan
Mr Peter Dowding (Resigned on 11 March 2022)
A/Professor Dion Forstner
Mr Peter Hooker (Appointed 18 March 2022)
Dr Malinda Itchins
Professor Michael Jefford
Professor Timothy Price
Professor Sabe Sabesan
A/Professor Christopher Steer

Company Secretary & Chief Executive Officer

Ms Marie Malica

Registered Office and Principal place of business

320 Pitt Street
Sydney NSW 2000

P: +61 (0)2 8256 4100
F: +61 (0)2 8256 4101

Company contact details

GPO Box 4708
Sydney NSW 2001
E: cosa@cancer.org.au
W: www.cosa.org.au

Auditors

BDO Audit Pty Ltd
Level 11
1 Margaret Street
Sydney NSW 2000

DIRECTORS' REPORT

30 JUNE 2022

The Directors present their report on Clinical Oncology Society of Australia Limited ("the Company") for the year ended 30 June 2022.

Objectives

The Company's primary short-term objectives over the reporting period were:

- Continue working to the agreed strategic plan for the period July 2019 to June 2024
- Develop and implement policies to ensure operational efficiencies
- Review the Board, Council and COSA Groups to ensure their memberships are appropriate and engaged
- Build and maintain collaborative relationships with relevant government agencies, NGOs and industry groups involved in cancer care to ensure strategic alignment and collaboration and to avoid duplication of effort
- Respond to government and other relevant stakeholder requests for submissions
- Host a successful Annual Scientific Meeting

The Company's long term objectives are to:

- Advocate for matters affecting cancer service delivery, policy and care
- Meet the educational needs of COSA's multidisciplinary membership
- Promote and facilitate cancer research
- Ensure the sustainability of COSA

Strategy for achieving the objectives

- Ensure COSA's advocacy work is in accordance with best practice
- Hold strong and mutually beneficial relationships with organisations relevant to cancer care and control
- Reinforce COSA's position as the peak national body representing multidisciplinary health professionals whose work encompasses cancer care and control
- Ensure COSA's educational opportunities remain relevant to the membership
- Build on the strength and success of the COSA Annual Scientific Meeting
- Build on current, and investigate new opportunities for, industry sponsored events outside the COSA ASM
- Extend the reach of COSA's current educational activities
- Provide a forum for the discussion of common issues in cancer research
- Facilitate a collective voice for the cancer cooperative trials groups
- Align COSA's governance and operational structure in accordance with best practice
- Ensure COSA remains relevant to its membership
- Ensure COSA remains financially viable as a not-for-profit organisation

DIRECTORS' REPORT

30 JUNE 2022 (Cont'd)

Principal activities

The principal activities of the Clinical Oncology Society of Australia during the year were focused on furthering both our short and long term objectives, referenced above. More detail on the achievements against these activities are detailed in the 2022 Annual Report.

Review of financial operations and results of Clinical Oncology Society of Australia Limited

The total income for the financial year ended 30 June 2022 was \$538,848 (2021: \$748,568). In the same period, expenditure was \$822,603 (2021: \$890,483) leaving a deficit of \$283,755 (2021: 141,915 deficit). The level of spending for the organisation varies from year to year as the range of activities to support our members, and the costs associated with them, also vary.

Matters Subsequent to the end of Financial Year

As at the date of this directors' report, the directors are not aware of any matter or circumstance that has arisen that has significantly affected, or may significantly affect, the operations of the Company, the results of those operations or the state of affairs of the Company in the financial years subsequent to 30 June 2022.

Indemnity and insurance of officers

The Company has indemnified the directors and executives of the Company for costs incurred, in their capacity as a director or executive, for which they may be held personally liable, except where there is a lack of good faith.

During the financial year, the Company paid a premium of \$910 in respect of a contract to insure the directors and executives of the company against a liability to the extent permitted by the Corporations Act 2001.

Indemnity and insurance of auditor

The Company has not, during or since the end of the financial year, indemnified or agreed to indemnify the auditor of the Company or any related entity against a liability incurred by the auditor.

During the financial year, the Company has not paid a premium in respect of a contract to insure the auditor of the Company or any related entity.

Proceedings on behalf of the Company

No person has applied to the Court under section 237 of the Corporations Act 2001 for leave to bring proceedings on behalf of the Company, or to intervene in any proceedings to which the Company is a party for the purpose of taking responsibility on behalf of the Company for all or part of those proceedings.

Environmental Regulation

COSA is not subject to any significant environment regulations.

Dividends

COSA does not permit any dividends and therefore no dividends have been paid or declared.

Contributions on winding up

In the event of the company being wound up, all members are required to contribute a maximum of \$10 each.

Directors

The names of the Directors of the Company in office during or since the end of the year are:

Name, Qualifications and Experience	Role	Date Joined	Date Ceased	Board	Audit, Risk & Finance Committee
				Attended / Eligible to attend	Attended / Eligible to attend
<p>Professor Fran Boyle AM MBBS FRACP PhD GAICD</p> <p>Professor Boyle is a Medical Oncologist at North Sydney's Mater Hospital, where she is Director of the Patricia Ritchie Centre for Cancer Care and Research, and Professor of Medical Oncology at the University of Sydney. She has been involved in clinical trials, supportive care and psychosocial research in breast cancer for the past 20 years. Fran has chaired the Medical Oncology Group of Australia (MOGA) and Breast Cancer Trials (formerly ANZ Breast Cancer Trials Group). Fran contributes to clinical trial development nationally and internationally through the BCT and IBCSG, and leads communication skills training for clinicians through the Pam McLean Centre. Fran is currently a member of the Strategic Advisory Committee of the Breast Cancer Network of Australia, and in 2008 was awarded Membership of the Order of Australia for her contributions to Breast Cancer research, education, policy and advocacy.</p>	President and Board Chair (2021-2022), Director	22-Nov-18	-	6 / 6	-
<p>Associate Professor Dion Forstner MBBS (Hons) FRANZCR</p> <p>Professor Dion Forstner is a radiation oncologist with Genesiscare with his practice based at St Vincent's Sydney, Macquarie University Hospital, Mater and Concord Centre. He is a past Dean of Faculty of Radiation Oncology at Royal Australian and New Zealand College of Radiologists. He is chair of the MBS working group at RANZCR. His clinical areas of specialisation are in the management of head and neck and skin cancers. He is also a board member of Head and Neck Cancer Australia.</p>	President Elect (2021-2022) Director, Member Audit, Risk & Finance Committee	25-Jul-19	-	6 / 6	5 / 5
<p>Ms Sandie Angus LLB, GAICD</p> <p>Ms Angus is an experienced strategic leader and non-executive director with significant legal, governance, and risk management expertise. She is admitted as a solicitor and has over thirty years' experience working in law firms and in the government finance and electricity sectors. She sits on the boards of various not-for-profit companies in the health, sports and disability sectors. She was appointed as a Director to the COSA Board for her legal expertise.</p>	Director, Chair Audit, Risk & Finance Committee	20-Mar-18	-	5 / 6	5 / 5
<p>Associate Professor Judy Bauer BSc, GradDipNutr&Diet, MHLthSc, PhD, FDA</p> <p>Dr Judy Bauer is Professor and Discipline Lead, Nutrition & Dietetics, Monash University. She is recognized internationally for translational research and innovative nutrition models of care particularly in malnutrition and oncology. Judy's current research focuses on body composition assessment methods and outcomes in patients with cancer with a specific interest related to malnutrition and sarcopenia. Judy has research funding of >AU \$9.3M, Scopus H-index 41, published over 180 papers with > 7600 citations. She is a past Chair of the COSA Nutrition Group and a past director of Dietitians Australia.</p>	Director, Member Audit, Risk & Finance Committee	30-Jul-19	-	6 / 6	4 / 4
<p>Professor Tanya Buchanan BA(Hons) BSc(Nsg) MBA PhD</p> <p>Professor Tanya Buchanan is Cancer Council Australia's Chief Executive Officer. Tanya is an experienced professional who joined Cancer Council Australia in November 2020 and brings many years' experience in public health to her role at Cancer Council Australia. Tanya has a proven track record in leading organisations to improve health outcomes, having held roles as Chief Executive Officer of Action on Smoking and Health (ASH) in Wales and most recently Chief Executive Officer of the Thoracic Society of Australia and New Zealand, a position she held for five years. Tanya commenced her career as a nurse, working in oncology and neurosurgery. She has also worked for Red Cross Blood Service Australia, in academia, local government and the voluntary sector. Tanya is an Honorary Professor of Practice, School of Health & Society (Public Health), University of Wollongong and holds a PhD on tobacco control in Australia. She also holds an MBA in Health Services Administration, a first-class honours degree in English & Comparative Literature and a Bachelor of Science (Nursing), as well as a range of vocational qualifications. Tanya is passionate about prevention of ill health and addressing inequalities in cancer outcomes.</p>	Director	12-Jul-21	-	5 / 6	-

DIRECTORS' REPORT 30 JUNE 2022 (Cont'd)

Name, Qualifications and Experience	Role	Date Joined	Date Ceased	Board		Audit, Risk & Finance Committee
				Attended / Eligible to attend	Attended / Eligible to attend	
<p>Mr Peter Dowding BSC (Hons) MBA</p> <p>Mr Dowding is co-founder and Chairman of Propel Investments, a mid-market private equity firm based in Sydney and established in 2007. He is also Chair of the Children's Tumour Foundation of Australia. He has over 30 years' experience in the private equity sector, having been a Director on several investments and was appointed as a Director to the COSA Board for his experience in corporate governance, and retired in March 2022.</p>	Director, Chair Audit, Risk & Finance Committee	12-May-14	11-Mar-22	4 / 4	4 / 4	
<p>Mr Peter Hooker BSc BE (Hons) FFIN GAICD</p> <p>Mr Hooker has been a finance and investment professional for over 30 years, and has significant experience in governance, strategy and risk management, particularly in the health sector where he served as Treasurer of Médecins sans Frontières Australia and on the Psychology Board of Australia. He is a member of a pre-qualified panel eligible to serve on Audit and Risk committees of NSW government enterprises and also has a particular interest in values-based leadership and organisational culture. Peter has been appointed to the COSA board for his finance and risk expertise.</p>	Director, Member Audit, Risk & Finance Committee	18-Mar-22	-	3 / 3	2 / 2	
<p>Dr Malinda Itchins BMedSci MBBS FRACP PhD</p> <p>Dr Itchins is a Medical Oncologist at Royal North Shore Hospital, GenesisCare North Shore Health Hub and North Shore Private, awarded her Fellowship in 2016. She is a Senior Clinical Lecturer with the University of Sydney after receiving her Doctorate in 2020 under an inaugural NSW Health Scholarship investigating drug resistance in lung cancer pre-clinically and via a clinical trial for which she received the Peter Bancroft Prize for research work. Malinda is the advanced lung cancer group co-chair on the Thoracic Oncology Group of Australasia (TOGA) Scientific Committee, and Primary Investigator and Investigator on a number of investigator-initiated and industry lead lung cancer clinical trials. Malinda's research focus is in engaging in clinical trials development, as well as real world data collaborations in patterns of care, survival and drug resistance in molecularly driven lung cancers. She passionately contributes to patient advocacy and survivorship in lung cancer and joined the Clinical Oncology Society of Australia (COSA) Council in 2020 as the Lung Cancer Chair.</p>	Director	02-Jul-21	-	6 / 6	-	
<p>Professor Michael Jefford MBBS, MPH, MHlthServMt Monash, PhD, GCertUniTeach Melb, GAICD, FRACP</p> <p>Professor Jefford is a Medical Oncologist, and is Director of the Australian Cancer Survivorship Centre, at Peter MacCallum Cancer Centre. He is a Professorial Fellow with the University of Melbourne. His major clinical focus is on the management of people with gastrointestinal cancers. He is the immediate past chair of COSA's Cancer Survivorship Committee and the American Society of Clinical Oncology's Health Equity and Outcomes Committee. He co-chairs the International Psycho-Oncology Society's Survivorship Special Interest Group. He was previously Deputy Director of Medical Oncology at Peter Mac and has held senior leadership roles with cancer-related organisations including Cancer Council Victoria and BreastScreen Victoria, and professional organisations such as the Royal Australasian College of Physicians and the Medical Oncology Group of Australia.</p>	Director	02-Jul-21	-	5 / 6	-	
<p>Professor Timothy Price MBBS FRACP DHlthSc (Med)</p> <p>Professor Price is the Medical Lead of the Cancer Program at Central Adelaide Local Health Network and Medical Oncologist at The Queen Elizabeth and Lyell McEwin Hospitals in Adelaide. His clinical research is focussed on Gastrointestinal and Neuroendocrine cancers. He heads the Solid Cancer Team at the Bazil Hetzel Institute where the group undertake translational and new drug research together with a focus on colorectal cancer of younger patients. He has been a member of the Board and COSA NET and Rare Cancer Groups. He is the immediate past Chair of the AGITG Board and Scientific Advisory Committee and remains a Board Director. He has also Chaired the recently updated NHMRC Cancer Council Colorectal Cancer Guidelines.</p>	Director	29-Jul-19	-	4 / 6	-	

Name, Qualifications and Experience	Role	Date Joined	Date Ceased	Board	Audit, Risk & Finance Committee
				Attended / Eligible to attend	Attended / Eligible to attend
<p>Professor Sabe Sabesan BMBS(Flinders) PhD FRACP</p> <p>Professor Sabesan is a senior Medical Oncologist, department of medical oncology at the Townsville Cancer Centre, and Clinical Dean, at James Cook University and Townsville Hospital and Health Services. His interests include design, implementation and publication on various teleoncology models to enhance regional and rural access to cancer services closer to home. In collaboration with Clinical Oncology Society of Australia (COSA), he led the development of the teleoncology guidelines and the Australasian Teletrial model. Telesupervision guidelines and modules have been his contribution to the Royal Australian College of Physicians. Currently, he is a co-chair of the Australian Teletrial Program (led by Queensland Health).</p>	Director	31-Jul-19	-	3 / 6	-
<p>Associate Professor Christopher Steer MBBS, FRACP</p> <p>Associate Professor Steer is a medical oncologist at Border Medical Oncology at the Albury Wodonga Regional Cancer Centre in Albury. He is Associate Professor at the UNSW School of Clinical Medicine, Rural Clinical Campus, Albury and an Adjunct Professor at La Trobe University, Wodonga Campus. After completing a clinical research fellowship at King's College London, Guy's and St Thomas' Hospital in 2003, Christopher returned to clinical practice in Albury. Christopher is the president of the Private Cancer Physicians of Australia (PCPA) and has served on the board of the Medical Oncology Group of Australia (MOGA), the Australia and New Zealand Gynaecological Oncology Group (ANZGOG) and the International Society of Geriatric Oncology (SIOG). He has also been the chair of the geriatric oncology study group of the Multinational Association for Supportive Care in Cancer (MASCC) and the equivalent Group at COSA. Christopher is a principal investigator at the Border Medical Oncology Research Unit that has enabled clinical trials to be conducted in the region for over 20 years. He is the clinical lead in the Regional Trials Network VIC REVITALISE project Geriatric Oncology Initiative.</p>	Director	02-Jul-21	-	6 / 6	-

Directors are appointed on an honorary basis and as a result do not receive any remuneration either directly or indirectly from the Company.

DIRECTORS' REPORT

30 JUNE 2022 (Cont'd)

Clinical Oncology Society of Australia Limited (ABN 97 631 209 452)
Directors' Report (cont'd)
30 June 2022

Company Secretary and Chief Executive Officer

Ms Marie Malica is the Company Secretary and Chief Executive Officer of the Company. Ms Malica joined the Company in March 2011 and has 20 years' experience working in the cancer not-for-profit sector and state government having previously held the position of Manager, Research Strategy Unit at Cancer Council NSW and Manager, Research Support Office with South Eastern Sydney Area Health Service, Northern Hospital Network.

Auditor's Independence Declaration

A copy of the auditor's independence declaration as required under section 307C of the Corporations Act 2001 is set out on the following page.

This report is made in accordance with a resolution of directors, pursuant to section 298(2)(a) of the Corporations Act 2001.

On behalf of the directors



Prof Fran Boyle AM
President



A/Prof Dion Forstner
President-Elect

Sydney
27 September 2022



Tel: +61 2 9251 4100
Fax: +61 2 9240 9821
www.bdo.com.au

Level 11, 1 Margaret St
Sydney NSW 2000
Australia

DECLARATION OF INDEPENDENCE BY LEAH RUSSELL TO THE DIRECTORS OF CLINICAL ONCOLOGY SOCIETY OF AUSTRALIA

As lead auditor of Clinical Oncology Society of Australia for the year ended 30 June 2022, I declare that, to the best of my knowledge and belief, there have been:

1. No contraventions of the auditor independence requirements of the section 60-40 of the *Australian Charities and Not-for-profit Commission Act 2012* in relation to the audit; and
2. No contraventions of any applicable code of professional conduct in relation to the audit.

A handwritten signature in black ink that reads 'Leah Russell'.

Leah Russell
Partner

BDO Audit Pty Ltd

Sydney, 27 September 2022

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2022

	Note	2022	2021
		\$	\$
<u>Income</u>			
Member body subscriptions	1(a)(ii), 4	137,623	135,485
Annual Scientific Meeting revenue	1(a)(iii), 4	285,190	274,692
Other grant & project revenue	1 (a)(i), 4	108,905	218,366
Interest income	1 (a)(iv), 4	6,850	8,725
Other revenue	1 (a)(v), 4	280	111,300
		538,848	748,568
<u>Expenditure</u>			
Administration expenses		(86,937)	(88,896)
Employment costs		(601,112)	(635,520)
Depreciation		(155)	(1,503)
Annual Scientific Meeting		(13,922)	(12,441)
Other grant & project expenses		(112,931)	(147,540)
Other expenses from ordinary activities		(7,546)	(4,583)
		(822,603)	(890,483)
Surplus before income tax expense		(283,755)	(141,915)
Income tax expense	1(c)	-	-
Net surplus after income tax expense for the year attributable to the members of COSA		(283,733)	(141,915)
Other comprehensive income for the year, net of tax		-	-
Total comprehensive income for the year attributable to the members of COSA		(283,755)	(141,915)

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2022

	Note	2022 \$	2021 \$
ASSETS			
Current Assets			
Cash & cash equivalents	5	106,323	396,742
Trade & other receivables	6	34,910	28,392
Other current assets	7	1,845,347	1,865,211
Total Current Assets		1,986,580	2,290,345
Non-Current Assets			
Plant & equipment	8	-	155
Total Non-Current Assets		-	155
Total Assets		1,986,580	2,290,500
LIABILITIES			
Current Liabilities			
Trade & other payables	9	243,149	271,708
Provision for employee benefits	10	114,549	102,198
Total Current Liabilities		357,698	373,906
Non-Current Liabilities			
Provision for employee benefits	10	7,750	11,707
Total Non-Current Liabilities		7,750	11,707
Total Liabilities		365,448	385,613
Net Assets		1,621,132	1,904,887
EQUITY			
Grants & Special Projects Reserve		15,000	15,000
General Funds		1,606,132	1,889,887
Total Equity		1,621,132	1,904,887

The accompanying notes form part of these financial statements

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2022

	\$	\$	\$
	General Funds	Grants & Special Projects Reserve	Total Funds
Balance at 1 July 2020	2,029,958	16,844	2,046,802
Transfer from reserves	1,844	(1,844)	-
Transfer to liabilities	-	-	-
Surplus after income tax for the year	(141,915)	-	(141,915)
Other Comprehensive income for the year, net of tax	-	-	-
Total comprehensive income for the year	(141,915)	-	(141,915)
Balance at 30 June 2021	1,889,887	15,000	1,904,887
Balance at 1 July 2021	1,889,887	15,000	1,904,887
Transfer from reserves	-	-	-
Transfer to liabilities	-	-	-
Surplus after income tax for the year	(283,755)	-	(283,755)
Other Comprehensive income for the year, net of tax	-	-	-
Total comprehensive income for the year	(283,755)	-	(283,755)
Balance at 30 June 2022	1,606,132	15,000	1,621,132

Nature and Purpose of Reserves

Grants & Special Projects Reserve

This reserve relates to funds received by the Company and designated for use for a specific purpose. This may include grant monies received but not yet spent. These funds are held in reserve until spent appropriately, or in line with funding agreements.

The accompanying notes form part of these financial statements

STATEMENT OF CASH FLOW FOR THE YEAR ENDED 30 JUNE 2022

		2022	2021
	Note	\$	\$
<u>Cash flows from operating activities:</u>			
Receipts from member subscriptions and other income (inclusive of GST)		546,475	825,234
Payments to suppliers, employees and member bodies (inclusive of GST)		(839,431)	(806,694)
Interest received		6,850	8,725
		<hr/>	<hr/>
Net cash (used) in/provided by operating activities	14	(286,106)	27,265
		<hr/>	<hr/>
<u>Cash flows from investing activities:</u>			
Payment for term deposits		-	-
Received from term deposits		(4,313)	148,950
Payment for purchase of plant and equipment			
		<hr/>	<hr/>
Net cash used in by investing activities		(4,313)	148,950
		<hr/>	<hr/>
Net (decrease)/ increase in cash & cash equivalents		(290,419)	176,215
Cash & cash equivalents at the beginning of the year		396,742	220,527
		<hr/>	<hr/>
Cash & cash equivalents at the end of the year	5	106,323	396,742
		<hr/>	<hr/>

The accompanying notes form part of these financial statements

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2022

Note 1. Statement of significant accounting policies

The Company is a not for profit entity and an incorporated company limited by guarantee domiciled in Australia.

The financial report was authorised for issue by the directors on 27 September 2022.

New, revised or amending Accounting Standards and Interpretations adopted

The Company has adopted all of the new, revised or amending Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') that are mandatory for the current reporting period.

Any new, revised or amending Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

BASIS OF PREPARATION

These general purpose financial statements have been prepared in accordance with the Australian Accounting Standards - Simplified Disclosures issued by the Australian Accounting Standards Board ('AASB'), the Australian Charities and Not-for-profits Commission Act 2012, The company is a not-for-profit per financial reporting purposes under Australian Accounting Standards.

No other Accounting Standards and other professional reporting requirements in Australia have mandatory applicability because the company is not a reporting entity.

REPORTING BASIS AND CONVENTIONS

The financial report has been prepared on an accruals basis (except the statement of cash flows) and is based on historical costs and does not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following material accounting policies, which are consistent with the previous period, unless otherwise stated, have been adopted in the preparation of this report.

All amounts are in Australian dollars.

Note 1. Statement of significant accounting policies (cont.)

ACCOUNTING POLICIES

(a) Revenue Recognition

The company is required to assess whether revenue is generated from an enforceable contract with sufficiently specific performance obligations in which case it is accounted for as contract revenue (AASB 15). If there is not an enforceable contract with sufficiently specific performance obligations, revenue is accounted for under AASB 1058.

Contract revenue is recognised when control of a promised good or service is passed to the customer at an amount which reflects the expected consideration. The customer for these contracts is the fund provider.

For each contract with a customer, the Company: identifies the contract with a customer; identifies the performance obligations in the contracts; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative stand-alone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Generally the timing of the payment for sale of goods and rendering of services corresponds closely to the timing of satisfaction of the performance obligations, however where there is a difference, it will result in the recognition of a receivable, contract asset or contract liability.

None of the revenue streams of the company have any significant financing terms as there is generally less than 12 months between the receipt of funds and the satisfaction of performance obligations.

Revenue that is not contract revenue is recognised when received, or gains control of the revenue.

(i) Contract Revenue - Grants

Grant income arising from an agreement which contains enforceable and sufficiently specific performance obligations is recognised when control of each performance obligations is satisfied. This is generally the case for the monies received for information, education, advocacy and research.

The performance obligations are varied based on the agreement but may include management of education events, advocacy programmes and facilitation of research.

Within grant agreements there may be some performance obligations where control transfers at a point in time and others which have continuous transfer of control over the life of the contract.

Where control is transferred over time, generally the revenue recognition is based on either cost or time incurred which best reflects the transfer of control.

(ii) Contract Revenue - Member Subscriptions

Member subscriptions are recognised over the period of the membership subscription.

(iii) Contract Revenue - Annual Scientific Meeting Income

The Company contracts a professional Events Co-ordinator to manage the staging of the Annual Scientific Meeting including the receipt of revenue and payment of expenses in relation to the event. Documents detailing the income and expenses have been received from the Events Co-ordinator together with a reconciling statement.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2022 (CONT.)

Note 1. Statement of significant accounting policies (cont.)

Revenue and expenses associated with the Annual Scientific Meeting are recognised through the Statement of profit or loss and other comprehensive income for the financial year the Annual Scientific Meeting is conducted.

Net Annual Scientific Meeting income is calculated as the excess of revenue in relation to the Annual Scientific Meeting compared to expenses associated with the meeting.

The net income for the 2021/22 Annual Scientific Meeting was \$271,268 (2020/21: 262,251).

(iv) Interest

Interest revenue is recognised as interest accrues using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to the net carrying amount of the financial asset.

(v) Other Revenue

Other revenue is recognised when it is received or when the right to receive payment is established.

(b) Current and non-current classification

Assets and liabilities are presented in the statement of financial position based on current and non-current classification.

An asset is current when: it is expected to be realised or intended to be sold or consumed in normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within twelve months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least twelve months after the reporting period. All other assets are classified as non-current.

A liability is current when: it is expected to be settled in normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within twelve months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least twelve months after the reporting period. All other liabilities are classified as non-current.

(c) Taxation

The Company is a charitable institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended; it is therefore exempt from income tax. This exemption has been confirmed by the Australian Taxation Office.

(d) Trade and other receivables

Trade and other receivables are recognised at amortised cost, less any expected credit loss.

(e) Other Current Assets

Prepayments included in other assets primarily relate to prepayments for future Annual Scientific Meetings and other events. Held to maturity investments are non-derivative financial assets with fixed or determinable payments and fixed maturities that the Company's management has the intention and ability to hold to maturity.

(f) Trade and other payables

These amounts represent liabilities for goods and services provided to the Company prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at amortised cost and are not discounted. The amounts are unsecured and are usually paid within 30 days of recognition.

(g) Cash and Cash Equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions and other short-term, highly liquid investments with original maturities of less than 90 days that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

(h) Goods and Services Tax (GST)

Revenue, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of expense. Receivables and payables in the Statement of financial position are shown inclusive of GST. Cash flows are presented in the Statement of cash flow on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

Commitments and contingencies are disclosed net of the amount of GST recoverable from, or payable to the tax authority.

(i) Comparative figures

Comparative figures of the Company for the previous 12 month period are included throughout these statements.

(j) Plant & equipment

Plant and equipment is stated at historical cost less accumulated depreciation and impairment. Historical cost includes expenditure that is directly attributable to the acquisition of the items.

Depreciation

Depreciation is calculated on a straight-line basis to write off the net cost of each item of property, plant and equipment (excluding land) over their expected useful lives as follows:

<u>Class of plant and equipment</u>	<u>Useful Life</u>
Computer Equipment	3 years

The residual values, useful lives and depreciation methods are reviewed, and adjusted if appropriate, at each reporting date.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021 (CONT.)

An item of property, plant and equipment is derecognised upon disposal or when there is no future economic benefit to the Company. Gains and losses between the carrying amount and the disposal proceeds are taken to profit and loss.

(k) **Provision for employee benefits**

Short term employee benefits

Liabilities for wages and salaries, including non-monetary benefits, annual leave and long service leave expected to be settled within 12 months of the reporting date are recognised in current liabilities in respect of employees' services up to the reporting date and are measured at the amounts expected to be paid when the liabilities are settled.

Other long-term employee benefits

The liability for annual leave and long service leave not expected to be settled within 12 months of the reporting date are recognised in non-current liabilities, provided there is an unconditional right to defer settlement of the liability. The liability is measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date using the projected unit credit method. Consideration is given to the expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the reporting date on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

Defined contribution superannuation expense

Contributions to defined superannuation plans are expensed in the period in which they are incurred.

(l) **Critical accounting judgements, estimates and assumptions**

The directors evaluate estimates and judgements incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and with the Company.

The judgements, estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

Estimation of useful lives of assets

The Company determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete.

Note 1. Statement of significant accounting policies (cont.)

Long service leave provision

The liability for long service leave is recognised and measured at the present value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

Determining whether contracts such as grants contain enforceable and sufficiently specific obligations

The interaction between AASB 15 and AASB 1058 require the management to assess whether the government grants and other funding received need to be accounted for under AASB 15 or AASB 1058. Key to this assessment is whether the government grants and other funding agreements contain:

- a contract with a customer that creates 'enforceable' rights and obligations, and
- the contract includes 'sufficiently specific' performance obligations.

Critical judgement was applied by management in assessing whether a promise is 'sufficiently specific', taking into account all facts and circumstances and any conditions specified in the arrangement (whether explicit or implicit) regarding the promised goods or services, including conditions regarding:

- the nature or type of the goods or services
- the cost or value of the goods or services
- the quantity of the goods or services
- the period over which the goods or services must be transferred.

(m) Use of the term "surplus"

The Company is a not-for-profit organisation. As such, the term "profit" is not applicable and the term "surplus" is used where required.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2022 (CONT.)

Note 2. Nature and objects of the Company

The Company is an incorporated Company Limited by Guarantee under the Corporations Act 2001.

Its objects are:

- a. to promote excellence in the multidisciplinary care and research relating to cancer – from prevention, diagnosis and treatment to follow-up, palliation and survivorship;
- b. to encourage multidisciplinary collaboration of all professionals involved in cancer care and research; and
- c. to foster and promote cancer research.

In the event of the Company being wound up, the members undertake to contribute an amount not exceeding \$10.00 to the assets of the Company.

There were 725 financial (and 67 free memberships) members of the Company at 30 June 2022 (2021: 776, plus 31 free students).

Note 3. Economic dependence

The ability of the Company to maintain its operations is dependent inter alia on the continuing support of its members by way of voluntary membership subscriptions.

Note 4. Revenue and Other Income

	<u>2022</u>	<u>2021</u>
	\$	\$
Revenue from contracts with customers		
Other grant income	20,155	129,618
	<u>20,155</u>	<u>129,618</u>
Other Income		
Membership subscriptions (also refer to note 1 (a) (ii))	137,623	135,485
Interest revenue	6,850	8,725
ASM income	285,190	274,692
Recoveries of clinical trials insurance cover	88,750	88,749
Other revenue	280	111,300
	<u>518,693</u>	<u>618,950</u>
	<u>538,848</u>	<u>748,568</u>
Timing of revenue recognition		
Revenue recognised at a point in time	394,375	604,359
Revenue recognised over time	144,473	144,209
	<u>538,848</u>	<u>748,568</u>

Note 5. Cash & cash equivalents

	2022 \$	2021 \$
Cash at bank	106,323	396,742
	<u>106,323</u>	<u>396,742</u>

Note 6. Trade and other receivables

<u>Current</u>		
Trade receivables	14,141	7,971
Other receivables	20,769	20,421
	<u>34,910</u>	<u>28,392</u>

Note 7. Other current assets

Prepayments	69,069	93,246
Held to maturity investments - term deposits	1,776,278	1,771,965
	<u>1,845,347</u>	<u>1,865,211</u>

Note 8. Plant & equipment

Computer equipment		
- Computer equipment, at cost	20,651	20,651
- Accumulated depreciation	(20,651)	(20,496)
Total computer equipment	<u>0</u>	<u>155</u>

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2022 (CONT.)

Note 9. Trade and other payables

	2022	2021
	\$	\$
<u>Current</u>		
Trade creditors & accruals	27,007	80,553
Contract liabilities	216,142	191,155
	<hr/>	<hr/>
	<u>243,149</u>	<u>271,708</u>

Note 10. Provisions

<u>Current:</u>		
Employee benefits	<u>114,549</u>	<u>102,198</u>
	<u>114,549</u>	<u>102,198</u>
 <u>Non-Current:</u>		
Employee benefits	<u>7,750</u>	<u>11,707</u>
	<u>7,750</u>	<u>11,707</u>

Note 11. Contingent Liabilities

There are no contingent liabilities as at the end of the year other than those identified elsewhere in this report.

Note 12. Events subsequent to reporting date

No matters or circumstances have arisen since the end of the year which significantly affected or may significantly affect the operations of the Company or the results of those operations for the period under report.

Note 13. Auditors Remuneration

During the year, the following fees were paid or payable for services provided by the auditor, BDO Audit to the Company:

External audit of the financial statement	<u>8,750</u>	<u>8,190</u>
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Note 14. Reconciliation of the surplus/(deficit) for the year to net cash flows from operating activities

	2022	2021
	\$	\$
Net surplus for the year	(283,755)	(141,915)
Non-cash flows in surplus from ordinary activities:		
Depreciation	155	1,503
Transfer from reserves		
Changes in assets and liabilities:		
(Increase)/ Decrease in trade & other receivables	(6,518)	98,274
Decrease in other current assets	24,176	38,281
Increase/(Decrease) in trade & other payables	(28,558)	33,191
(Decrease)/Increase in provisions	8,394	(2,069)
Net cash (used)/provided by operating activities	<u>(286,106)</u>	<u>27,265</u>

Note 15. Company details

The registered office and principal place of business of the Company is:

320 Pitt Street
Sydney NSW 2000 Australia

The Company operates entirely in Australia as a Charitable Institution.

FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2021

Clinical Oncology Society of Australia Limited (ABN 97 631 209 452) Financial report for the year ended 30 June 2022

Directors' Declaration

In the directors' opinion:

- The Company is not a reporting entity because there are no users dependent on Simplified disclosure financial statements. Accordingly, as described in note 1 to the financial statements, the attached simplified disclosure financial statements have been prepared for the purpose of complying with the requirements of the ACNC Act 2012 to prepare and distribute financial statements to the members of Clinical Oncology Society of Australia Limited;
- the attached financial statements and notes give a true and fair view of the company's financial position as at 30 June 2022 and of its performance for the financial year ended on that date; and
- there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

Signed in accordance with a resolution of directors made pursuant to section 295(5)(a) of the Corporations Act 2001.

On behalf of the directors by:



Prof Fran Boyle AM
President

A/Prof Dion Forstner
President-Elect

Sydney
27 September 2022



Tel: +61 2 9251 4100
Fax: +61 2 9240 9821
www.bdo.com.au

Level 11, 1 Margaret St
Sydney NSW 2000
Australia

INDEPENDENT AUDITOR'S REPORT

To the members of Clinical Oncology Society of Australia

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Clinical Oncology Society of Australia (the registered entity), which comprises the statement of financial position as at 30 June 2022, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial report, including a summary of significant accounting policies, and the responsible entities' declaration.

In our opinion the accompanying financial report of Clinical Oncology Society of Australia, is in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) Giving a true and fair view of the registered entity's financial position as at 30 June 2022 and of its financial performance for the year then ended; and
- (ii) Complying with Australian Accounting Standards - Simplified Disclosures and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis for opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's responsibilities for the audit of the Financial Report* section of our report. We are independent of the registered entity in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* (ACNC Act) and the ethical requirements of the Accounting Professional and Ethical Standards Board's *APES 110 Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other information

The responsible entities of the registered entity are responsible for the other information. The other information obtained at the date of this auditor's report is information included in the annual report, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

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In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of responsible entities for the Financial Report

The responsible entities of the registered entity are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards - Simplified Disclosures and the ACNC Act, and for such internal control as the responsible entities determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, responsible entities are responsible for assessing the registered entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the responsible entities either intends to liquidate the registered entity or to cease operations, or has no realistic alternative but to do so.

The responsible entities of the registered entity are responsible for overseeing the registered entity's financial reporting process.

Auditor's responsibilities for the audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website (<http://www.auasb.gov.au/Home.aspx>) at:

http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf

This description forms part of our auditor's report.

BDO Audit Pty Ltd

BDO

L Russell

Leah Russell
Partner

Sydney, 28 September 2022





**Clinical
Oncology
Society of
Australia**

COSA ANNUAL REPORT 2022

320 Pitt Street
Sydney NSW 2000
Ph: (02) 8256 4100
www.cosa.org.au

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