Message from the Chair

Welcome to the April 2012 edition of the Australian & New Zealand Urogenital and Prostate Cancer Trials Group Ltd (ANZUP) newsletter.

To conduct clinical trial research to improve treatment for Bladder, Kidney, Testicular and Prostate Cancers.

ANZUP exists to perform clinical trial research to improve treatment for our patients so that they survive longer and the quality of their lives is improved. This requires a better understanding of their cancers and an ability to bring a diverse range of treatments to bear on the problem. Our trials include more conventional treatment approaches using drugs, surgery or radiotherapy; but also basic laboratory research and trials designed to assess and improve supportive care and quality of life. ANZUP is able to perform the types of trials that address these key questions but that will not be performed by industry or other bodies. We also have as a key imperative a desire to build for the future by mentoring the next generation of cancer clinicians and researchers, and link to the community for strategic planning and better communication.

Once again the newsletter is full of information about our diverse activities. These include:

Annual Scientific Meeting

Our partnership with COSA in 2011 was a great success and significantly raised the profile of ANZUP. We are now in a position to run the scientific meeting we always wanted to run. This will be held from 15-17 July 2012 at the Four Points by Sheraton in Sydney. The program can be found here http://www.anzup.org.au/content.aspx?page=asm-program and more information follows in the newsletter. We will include an ANZUP trainee day; opportunities for presentation of original research; information about current trials; brainstorming workshops for new clinical trials opportunities; plenary sessions from our four fantastic international speakers; presentations from our stellar local speakers; a community forum; ANZUP/Novartis travel grants; and a great social program. Earlybird registration is still open and you also receive a discount on registration if you are a member, great value for your membership fee - that is and is intended to remain at $0. Abstract submissions are now underway. Please block out this time in your diaries to ensure you can attend and also look to make opportunities for your colleagues to attend also, particularly trainees.

Finally thanks to all of our sponsors and exhibitors for their wonderful support especially our Platinum sponsor, Janssen Cilag; Gold: Pfizer & Sanofi; Silver: Prostate Cancer Foundation of Australia, Amgen and Ipsen; Bronze: Cancer Institute NSW and Novartis.

Other meetings

It’s not all just about us. We live and work in a vibrant community of clinicians and researchers all aiming for the same goals. In 2011 we strengthened our links with USANZ and held a joint meeting in Melbourne in lieu of the meeting intended to be held earlier in the year in Christchurch. It was obvious to all that USANZ and ANZUP shared common goals and could benefit from working together. ANZUP will have a presence at the 2012 USANZ meeting to be held in Darwin from 21-24 April 2012, and we are working to see how together we can enhance the 2013 meeting planned for Melbourne. ANZUP will also have a presence at the CNSA Winter meeting in July.

Please do not forget to attend our company Annual General Meeting, which will be held on Monday 16 July 2012 at 5pm. The AGM is a requirement for us under the Corporations Act and we need a good quorum of members to attend.

Membership

Membership continues to grow and we welcome new members. ANZUP’s total membership recently ticked over 400. We see this as a great start and we want to see it continue. Please continue to promote ANZUP to your friends, colleagues, institutions and professional organisations. We offer something for everyone and your involvement can be as great or as little as you like. Why not participate more directly in one of our subcommittees?

Strategic planning and fundraising

The ANZUP Board recognises that we need more resources to do the work we really want to do. We want to be able to perform more and better trials; start a trial without the need to wait long periods of time for uncertain grant funding; and run more meetings where we can meet face to face, which is where the real work most often gets done. ANZUP is now in a situation where it is able to undertake meaningful fundraising activities. These will involve quite a bit of work in terms of publicity, the web site, making new connections with industry and philanthropy, and strategic partnerships with other stakeholders. These processes have already begun and we will keep you up to date with them. One exciting initiative has been the launch of our corporate partnerships with a number of organisations. See the web site www.anzup.org.au for more information on this.

ANZUP now has appropriate donor gift recipient and fundraising status in all Australian states and territories. You may have links to people in business or finance. Many of these organisations might be interested in supporting cancer research, not forgetting that we look after some male-specific cancers but also that women also get bladder and kidney cancer as well as men.
Message from the Chair continued

New opportunities to tap into philanthropic sources like these will be very useful to us. If you have any suggestions or ideas, or if you know someone who might be interested in supporting us, please call (02) 9562 5033 or email us at Margaret@anzup.org.au. Donations over $2 are tax-deductible. We are grateful to those of you who have chosen to donate your honoraria to ANZUP and don’t forget that we are able to invoice on your behalf if you wish.

Clinical trials and related research
As always, you will find in this newsletter information about our ongoing programs of clinical and translational research across all genitourinary cancer types and involving all disciplines. I would encourage you all and in particular all trainees to join and participate actively.

As you can see, we remain very active and we are growing steadily in both numbers and activity. Thanks as always to Marg McJannett and our project officer Yi Feng for their great work. Also, thanks to you all for all that you do for ANZUP.

IAN DAVIS
Chair

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Executive Officer’s Report

The first quarter of the year has been incredibly busy but very enjoyable. Some of the highlights include:

- **New Appointment**
  In January this year we learnt that our very own Ian Davis was appointed the new Professor of Medicine and Head of Eastern Health Clinical School, Faculty of Medicine and Nursing and Health Science Monash University and Senior Oncologist, Eastern Health. Ian took up his new role in a part-time capacity earlier this year and will assume full responsibility from June 2012. I am sure you will all join me in congratulating Ian on this most prestigious and well deserved appointment. We are also delighted to confirm that Ian’s appointment will not affect his role as Chair of ANZUP.

- **Staff Changes at ANZUP’s Clinical Trial Operations Team**
  In February we said good bye to Amy Boland who has overseen clinical trial management at the NHMRC CTC for ANZUP over the past 4 years. We are indebted to Amy for her invaluable support and contribution to ANZUP and we wish her the very best with her new role with AGITG clinical trials team. We welcome our new Associate Oncology Program Manager Trevor France who joins the team having overseen the clinical trials activities of COGNO collaborative group at CTC. Trevor comes to the group with 15 years experience in drug development and life cycle management. Before moving to academic clinical trial management in the last two years Trevor has worked within pharmaceutical companies in clinical trial management. Our thanks also to Jennifer Thompson and Angus McDonald for their ongoing efforts to support ANZUP trial activities at CTC.

- **Annual Scientific Meeting (ASM) July 15-17 Four Points by Sheraton Sydney**
  A major focus has been our first stand alone Annual Scientific Meeting (ASM) with the Convening Committee: Peter Grimison, Amy Hayden and Paul Sved doing an outstanding job in pulling together an extremely high quality program with an exceptional international and national faculty. The theme “State of the art multi-disciplinary care in urological cancers” will showcase the most up-to-date cancer treatment, research and education in prostate and other urogenital cancers. You can view the preliminary program; learn about our international faculty; our Trainee Day: Community Engagement Forum and any other updates via our website: http://www.anzup.org.au. Don’t forget to get your abstracts submitted!!

  I am also pleased to announce Novartis have generously agreed to once again support the ANZUP/Novartis Travel Grants. The grants aim to support ANZUP’s multidisciplinary members who have successfully submitted an abstract for either oral or poster presentation to attend this year’s ANZUP ASM. You can read more about these grants in the newsletter.

  I especially wish to thank all our major sponsors, without their support we could not have undertaken this inaugural scientific meeting and deliver a high quality educational program that our members will enjoy and draw benefit from.

- **Sponsors for this Year’s ASM:**
  - Platinum: Janssen Cilag;
  - Gold: Pfizer & Sanofi;
  - Silver: Prostate Cancer Foundation of Australia, Amgen and Ipsen;
  - Bronze: Cancer Institute NSW and Novartis.

- **Annual General Meeting**
  ANZUP will hold its third Annual General Meeting @ 5pm on Monday 16 July 2012 in the Grand Ballroom Four Points by Sheraton Sydney during the ASM. Members are encouraged to attend. Following the AGM we will have a poster walk around with a glass of vino!!

- **ANZUP website:**
  Our website is currently being revamped and will include information around all our activities e.g. clinical trials, fundraising & our new corporate supporters program. We look forward to launching our new look site to members and the community as a means to promote ANZUP activities.

- **Consumer Advisory Panel:**
  Working with John Stubbs, Chair CAP, and our project officer Yi Feng, we have now broadened the membership to include representation across the 4 cancers (prostate, kidney, bladder and testicular), so they can engage in all our activities. We are planning a CAP workshop on Sunday 15 July. Later that day we will host our first Community Engagement Forum – “A little below the belt”. You can read more about this in the newsletter and on our website but we will be circulating a flyer shortly and hope you will encourage your consumers to consider attending. We are particularly grateful to Leonie Young who is one of the inaugural members of the ANZ BCTG CAP which was established in 1999. Leonie is now Chair of their CAP and her knowledge and guidance has been extremely valuable as we look to expand our ANZUP CAP. We look forward to providing you updates on our CAP and introducing you to the members over the coming months.

As always we are very grateful to John Stubbs for his ongoing support and commitment to ANZUP.
Executive Officer’s Report continued

• **Corporate Supporter Program:**
  We have established a Corporate Supporter Program to generate much needed funds to support ANZUP’s activities. We will have a Corporate Supporter section on our website listing our Corporate Supporters. We are pleased to have signed up Amgen, Sanofi and Pfizer in this program and will be announcing additional corporate supporters over the coming month/s.

• **Board Strategy Meeting:**
  The ANZUP Board held a face to face meeting in Melbourne on 30 January. The major focus was to discuss strategies around increasing revenue to ensure the sustainability of the organisation. The Board worked extremely hard to reach agreement around some short, medium and longer term priorities. We are very much indebted to Mr Trevor Back who generously donated his time and effort to facilitate the day.

• **Collaborations with Key Stakeholder Updates:**
  - The Urological Society of Australia and New Zealand (USANZ): USANZ will be holding its ASM in Darwin at the Darwin Convention Centre, 21-24 April. ANZUP will have a presence and a co-badged session on Tuesday 24 April. We are looking at other opportunities for collaboration.
  - Cancer Nurses Society of Australia (CNSA): we continue discussions with CNSA re engagement and participation of nurses in all of ANZUP’s clinical trials and activities. As a consequence of these discussions this year we will be taking the opportunity to share one of CNSA’s international speakers Dr Donna Berry. Dr. Berry has lead a program of research at Dana Faber, beginning in 1998, to improve the treatment decision making process for men with localized prostate cancer and their clinicians to ultimately improve health outcomes. She has kindly agreed to come a little earlier and participate in our ANZUP ASM. We thank both CNSA and Dr Berry for this.
  - Prostate Cancer Foundation of Australia (PCFA): Firstly we continue our discussions with PCFA around funding for clinical trials and looking for other opportunities to collaborate. One of the most recent tangible outcomes of these discussions has been PCFA’s National Board agreement to support our ASM. We are grateful to them for this support and we will continue to provide updates through Update on the progress of these discussions.

Please don’t hesitate to contact me if you have any questions or suggestions. Wishing you a very Happy Easter.

MARGARET MChANNetT
Executive Officer

UPDATES FROM SAC & SUBCOMMITTEE CHAIRS

Scientific Advisory Committee

The SAC advises the Board on scientific issues and sets strategic directions for ANZUP’s research. It is composed of members appointed by the Board for their expertise and their ability to ensure representation of a broad range of disciplines. In addition, as new chairs are elected by the subcommittees they also take a seat on the SAC. In this way ANZUP can be sure that we are able to receive input from as broad a group of representatives as possible and also is able to take advantage of the cycling of chairs and influx of people with fresh thoughts and ideas. The SAC meets quarterly and plans to have at least one face to face meeting per year, usually at the ASM. Our last face to face meeting was at the joint ANZUP/COSA ASM in Perth in November 2011 and our next will be at the ANZUP ASM in Sydney in July.

The SAC oversees the conduct of our current trials and those in various stages of development. In addition it considers proposals coming from the various subcommittees and prioritises them according to the strategic plan. The strategic plan is available on the ANZUP website www.anzup.org.au and is regularly updated by the Board on the advice of the SAC. The SAC also engages in “horizon scanning” and most importantly works to bring the various groups together including opportunities for working across the groups. An example of how this has worked recently is that circulating tumour cell technology, used primarily for research in prostate cancer and currently available only at one site in Australia (Colleen Nelson’s group in Brisbane), is now being applied in the translational EVERSUN-T project, which is a study of ANZUP’s EVERSUN renal cell carcinoma trial. This is a first in many respects and will provide valuable information to inform future laboratory and clinical research using these tools.

The SAC would have little to do without the input of the disease-specific subcommittees (prostate, renal, bladder [includes other urothelial cancers too] and germ cell), as well as the Correlative and Translational Research and the Quality of Life and Supportive Care subcommittees, plus of course the Consumer Advisory Panel which advises ANZUP at all levels. Within the subcommittees the trials are run, new concepts are developed from scratch or in collaboration with other groups, and links between groups are capitalised upon. Each committee is a place where your imaginations can run wild while still being productive and scientifically rigorous. I encourage all ANZUP members to participate.

I would like to thank our hardworking SAC members and also welcome two further additions since our last newsletter: Nick Buchan, urologist and additional New Zealand representative; and Peter Grimison, new chair of the Germ Cell subcommittee. Guy Toner, the outgoing chair, has led cooperative clinical trial activity in germ cell cancer for nearly two decades in this country and this work has changed clinical practice internationally. Thank you Guy for your extraordinary dedication and leadership. Guy remains a director and Board member for ANZUP and continues as a medical oncology representative on the SAC.

IAN DAVIS
Chair, ANZUP Scientific Advisory Committee
**Bladder**

The bladder cancer subcommittee held its last teleconference on 22/2/12 and concepts are progressing well. The intravesical sequential BCG and mitomycin study has been re-submitted for funding to Cancer Australia. If successful, we hope to start the trial in early 2013. A new trial concept involving the use of cisplatin in patients with advanced urothelial cancer but low GFR has been proposed by A/Prof Howard Gurney and Dr Liz Hovey. This will be further developed in the next few months. Another study is the systematic review of psycho-social interventions in NMIBC which is a collaboration between our committee and the QoL committee and is led by Dr Venu Chalasani and Dr Haryana Dhillon. This study will hopefully identify major gaps in our knowledge in the area of QoL and NMIBC, laying the foundations for a trial. The committee is keen to enrol new members and also encourage the submission of more trial concepts.

**MANISH PATEL**  
Chair, ANZUP Bladder Cancer subcommittee

**Consumer Advisory Panel**

The Consumer Advisory Panel (CAP) continues to be involved at all levels of ANZUP governance with some key areas of work especially around developing and updating the consumer portal of the website including resources and links to and from the ANZUP website.

ANZUP consumers participate in and support the Cancer Australia funded project “Enhancing Consumer Engagement in Clinical Cancer Research Project” which aims to develop a strategy for increased consumer involvement at all levels of clinical cancer research through increased training, mentoring and collaboration.

ANZUP CAP chair, John Stubbs, is working to expand the membership of its CAP across the four major GU cancers and tumour sites we study (prostate, kidney, bladder/urothelial, testicular) and/or in the disease-specific subcommittees to ensure more effective consumer involvement with ANZUP research activities. This issue is mirrored in other disease specific trials group where multiple tumour sites would ideally be represented. The CAP realises that clinicians play an important role in reaching many patients/consumers and potential CAP members.

ANZUP consumers were invited to present during the ANZUP/COSA ASM and this proved to be a most beneficial for consumers and clinicians.

ANZUP clinical trials information is continually being revised in consultation with CAP in order to make the information more accessible and relevant to their role.

Regular CAP updates are circulated through email and ANZUP newsletter Update.

A teleconference was held recently to introduce our new members to ANZUP and to plan for a face to face workshop at our upcoming ASM to engage all ANZUP CAP members and to allow forward strategic planning. An inaugural ANZUP Consumer Engagement Meeting will be convened at the ASM in July 2012 in Sydney. See more details later in newsletter.

**JOHN STUBBS**  
Chair, ANZUP Consumer Advisory Panel

**Correlative and Translational**

The Correlative and Translational Research Committee continues to grow in membership. The Committee has contributed substantially to the conduct of several ongoing studies and also is involved from an early stage in all new concepts.

Our broad membership ensures that we have an overview of the science and the available platforms that can underpin each new trial and allow great value to be added. As an example, EVERSUN-T is a substudy of the renal cell carcinoma EVERSUN trial that is looking at circulating tumour cells in RCC patients using technology previously almost exclusively applied to prostate cancer. This substudy is giving very valuable information that will be used in planning future studies.

We have also contributed to several grant applications for the current round of NHMRC and priority-driven grants. The committee plans to continue to expand and, as for the other committees, we wish to meet face to face at least once per year. Our next opportunity will be at the ASM in July and I encourage all members to participate in what will be an exciting and interesting program.

The committee also wishes to become more inclusive so please encourage your basic science or clinician-scientist colleagues to join.

**COLLEEN NELSON**  
Chair, Correlative and Translational Research Committee
Germ Cell

Current study – Chemotherapy and Cognition

Our current germ cell study is the “Chemotherapy and Cognition”, which is prospectively monitoring cognitive function in patients managed with and without chemotherapy for testicular cancer.

The study is open at 14 sites in Australia and New Zealand and led by Ian Olver. The revised target for accrual is 150 patients, and at least 145 patients have been recruited. Recruitment is expected to be completed in mid-2012. We require only 1 more patient due to receive cisplatin-based chemotherapy, and about 6 patients receiving surgery +/- radiation.

Marion Fournier from the NHMRC Clinical Trials Centre has led a substudy investigating the prevalence of hypogonadism amongst study participants, and its correlation with quality of life. This substudy will be presented at the ANZUP ASM in July 2012.

Initial results from the study are expected in 2013. We thank investigators and trials staff who have diligently recruited to this important study, and answered queries relating to data integrity.

Leaderboard as at Feb 2012:

<table>
<thead>
<tr>
<th>Site</th>
<th>Patients Recruited</th>
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<tbody>
<tr>
<td>Austin Health</td>
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</tr>
<tr>
<td>Royal Prince Alfred Hospital</td>
<td>17</td>
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<tr>
<td>Peter MacCallum Cancer Centre</td>
<td>17</td>
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<tr>
<td>Auckland Hospital</td>
<td>16</td>
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<tr>
<td>Concord Hospital</td>
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<tr>
<td>Royal Adelaide Hospital</td>
<td>13</td>
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<tr>
<td>Princess Alexandra Hospital</td>
<td>11</td>
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<tr>
<td>Border Medical Oncology</td>
<td>7</td>
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<tr>
<td>Wollongong Hospital</td>
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<tr>
<td>Port Macquarie Base Hospital</td>
<td>5</td>
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<tr>
<td>Royal Melbourne Hospital</td>
<td>3</td>
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<tr>
<td>Royal Hobart Hospital</td>
<td>2</td>
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<tr>
<td>Bendigo Health</td>
<td>2</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>145</strong></td>
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</tbody>
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Updates from studies in follow-up

1. Phase II study of accelerated BEP for advanced germ cell tumours: A combined analysis has been conducted of our ANZUP study, and a related phase I trial of accelerated BEP conducted in the United Kingdom. Results will be presented at a poster-discussion session of the American Society of Clinical Oncology Annual Meeting, June 2012 in Chicago, and are hoped to inspire international collaborators to join our proposed randomised trial.

2. Single-arm phase II study of aprepitant to reduce nausea and vomiting in patients receiving cisplatin-based chemotherapy for advanced germ cell tumours: Final analyses have now been completed by Mark Chatfield, and a manuscript is in preparation led by Ian Olver and Damien Thomson.

3. “Understanding the psychosocial sequelae of surviving testicular cancer”: This study, conducted in collaboration with the Oncology Co-operative Research Group (PoCoG), identified higher levels of anxiety and depression, and a number of psychological and sexual unmet needs. Mr Ben Smith from PoCoG is currently preparing a manuscript reporting results from this study.

4. Development of an EORTC questionnaire to assess health-related quality of life in patients with testicular cancer (QLQ-TC26): ANZUP contributed to recruitment of 32 of 156 patients for this study in conjunction with the survivorship study, which has developed a standardised and validated disease-specific questionnaire that can be used in future observational and interventional studies involving patients with testicular cancer. Results have been published in Quality of Life Research (Holzner et al, 2012).

Future studies

We have resubmitted a project grant application to NHMRC for funding by Cancer Australia to initiate the proposed international randomised trial of Accelerated BEP, with outcomes expected at the end of 2012. We were unsuccessful in our application for funding in the previous round to support this study, or to support Australian and New Zealand participation in an MRC study of imaging with CT or MRI as part of a surveillance program for stage I seminoma (TRISST).

In collaboration with PoCoG, the Germ Cell Sub-Committee is developing an online intervention to address the psychosocial and sexual needs of survivors of testicular cancer. A number of patients in the recently completed survivorship study have expressed interest in helping to develop and pilot the intervention, which would then be subjected to a randomised trial.

The G3 group has invited Australian and New Zealand investigators to contribute to an international retrospective registry of patients with advanced germ cell tumours with brain metastases. The register involves completion of a simple 3-page questionnaire for eligible patients between 1990 and 2010. There is a paucity of data on appropriate management for this group of patients. Results of a similar register for patients with relapsed germ cell tumours have generated valuable insights (see Lorch et al, JCO 29:2178-2184, 2011). Please contact me if you are able to identify 1 or more suitable patient, and would like to be involved.

Other concepts currently under consideration include a comprehensive follow-up program for patients with stage I testicular cancer undergoing surveillance (led by Dr Fritha Hanning from Auckland), development of novel predictors of bleomycin toxicity, and a trial of a novel anti-emetic combination involving palonosteron and netupitant.

Farewell and thanks to staff from NHMRC Clinical Trials Centre

I would like to acknowledge the excellent work done by Amy Boland (Associate Oncology Program Manager for ANZUP, previous Trial Coordinator for the ANZ Germ Cell Trials Group) and Mark Chatfield (ANZUP Statistician). Amy has moved to AGITG, and Mark has moved to a senior position in Darwin.

ANZUP ASM – Call for concepts and abstracts

There will be a strong profile for germ cell tumours at the ANZUP ASM in Sydney, July 2012. This will include a session with an expert national panel about the management of germ cell tumours at the trainees day, plenary presentations on emerging strategies for germ cell tumours, and updates on recent research. In addition, Dr Ben Tran from Royal Melbourne hospital has been invited to present outcomes of translational research conducted during a fellowship in Toronto.

Members are encouraged to register for the ASM, submit concepts for new trials, and submit abstracts reporting on research about germ cell tumours.

(continued)
**Germ Cell continued**

**G3 meeting at ASCO 2012**

The 3rd meeting of the G3 Global Germ Cell Trial Group will be conducted during the ASCO Annual Meeting in Chicago in June 2012. Potential studies for discussion will include the TIGER randomised trial of conventional versus high-dose chemotherapy for relapsed germ cell tumours, our proposed randomised trial of accelerated versus standard BEP as first-line chemotherapy, and an international registry for patients with germ cell tumours and brain or bone metastases. This is an open meeting, and I can provide details of the meeting for investigators who would like to attend.

**Call for new members**

The Germ Cell Sub-committee welcome new members who will contribute to research activity. Please encourage your interested colleagues and trainees to join the sub-committee. We are a multi-disciplinary group, and we encourage participation of members not only from medical oncology, but also from surgery, radiation oncology, nursing, psycho-oncology and basic science.

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**Quality of Life and Supportive Care**

**Living Well with Prostate Cancer: A Randomised Controlled Trial of a Mindfulness Intervention for Men with Advanced Prostate Cancer**

After last year’s NHMRC grant success, work has commenced on the Living Well with Prostate Cancer Project being led by Suzanne Chambers and conducted in collaboration with ANZUP. The project team have been busy meeting with investigators and recruiting clinicians around the country and initial ethical approval has been received from Griffith University. Development of the intervention and the project database have commenced and applications for ethical approval at recruiting sites will be submitted over the coming months in order for recruitment to begin in September 2012.

**Qualitative Assessment of Men’s Experiences of Biochemical Recurrence**

A sub study to undertake an in-depth prospective qualitative assessment of men's experiences of biochemical recurrence and subsequent treatment was developed as part of a larger clinical trial proposal being led by Shomik Sengupta. The aims of this sub study are to:

- Describe the psychological challenges men experience at biochemical recurrence;
- Prospectively explore men’s psychological and physical experiences of early androgen deprivation treatment;
- Derive a conceptual framework for explaining men's responses to this phase of the prostate cancer experience.

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**Renal Cell Cancer**

The RCC subcommittee oversees two currently active trials both of which contain significant substudies. Our meetings include oversight of these studies but mainly concentrate on the key clinical and scientific questions we have identified that need to be addressed in renal cell carcinoma. New concepts at various stages of development include a protocol assessing sequencing of active therapies; correlation of outcomes with clinical and pharmacokinetic parameters; intermittent dosing; radiation questions; and non-clear-cell RCC strategies.

**Our two current trials are SORCE and EVERSUN:**

1. **SORCE** (adjuvant sorafenib vs placebo in intermediate - or high-risk resected RCC). SORCE has now accrued 111 patients or 56% of its ANZUP recruitment target of 200 patients. ANZUP is the highest-recruiting site outside the UK and many individual ANZUP centres have accrued more patients than certain whole European countries. The two substudies are (i) the TRANSORCE substudy of blood and tissue collection, and (ii) the “PAS in SORCE” patient preferences substudy, developed by ANZUP researchers (Prunella Blinman and Martin Stockler). PAS in SORCE is open at all Australian centres and now at several UK sites also, and is accruing well.

2. **EVERSUN**. EVERSUN is the flagship ANZUP first-line RCC study and aims to assess the safety and feasibility of alternating sunitinib and everolimus. At the time of publication we have entered 46 patients or 84% of its target of 55 participants. We anticipate that accrual will be completed within the next few months and preliminary data available by the end of 2012.

Thank you all for your participation in the RCC subcommittee. Please continue to recommend ANZUP and its committees to your colleagues and trainees.

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**PETER GRIMISON**

Chair, ANZUP Germ Cell subcommittee

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**SUZANNE CHAMBERS**

Chair, Quality of Life and Supportive Care Committee

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**IAN DAVIS**

Chair, RCC subcommittee
OTHER NEWS

We learnt in January that Mr Graeme Johnson was planning to stand down as the National Chairman of the Prostate Cancer Foundation of Australia in February. Graeme was Chairman for 5 years and a Director for over 10 years. We congratulate Graeme on his leadership of PCFA in which we have seen a remarkable growth and recognition of PCFA as the peak Australian body providing support, information and advocacy to men and their families impacted by prostate cancer.

We welcome and congratulate the new National Chairman Mr David Sandoe, OAM and Jim Hughes AM as the Deputy Chairman. David is well known to most of us and I have no doubt PCFA will continue the momentum that has been established to improve awareness, advocacy and support for people impacted on by prostate cancer. We look forward to continuing to build and strengthen the relationship between ANZUP and PCFA into the future.

MR DAVID SANDOE, OAM,
PCFA NATIONAL CHAIRMAN

Medical Oncology Group of Australia
Annual Scientific Meeting 8-10 August 2012
Sofitel Brisbane, Queensland, Australia
Targeting Cancer from Diagnosis to Cure
Meeting details, registration and abstract submission
http://www.mogaasm2012.com

Registration is now open.
Take advantage of the early bird discount! To register visit
www.urologymeeting.com.au

Urological Society of Australia
and New Zealand 65th Annual Scientific Meeting
Including the Australian and New Zealand Urological Nurses Society Inc. 17th Annual Meeting
21–24 April 2012
Darwin Convention Centre • Darwin • Australia

International Faculty Includes:
• Steven W. Siegel • Christopher Cheng
• Roger Kirby • Alex Bachmann
• Sender Herschorn • James E. Lingeman
• Christopher R. Chapple • Christopher K. Payne
• Stephen J. Freedland • Piet Hoebeke • John Fitzpatrick
More speakers to be confirmed

usanz@eventplanners.com.au | www.urologymeeting.com.au
ANZUP COMMUNITY ENGAGEMENT FORUM:

“A little below the belt”

Sunday 15 July 2012
Four Points by Sheraton, Sydney Darling Harbour

TIME: 1:00pm - 4:30pm
VENUE: Bridge Room

ANZUP’s first Community Engagement Forum “A little below the belt” will provide information on the importance of clinical trials and the impact that a diagnosis of either a prostate, bladder, kidney or testicular cancer can have on a person and their family.

Topics will include: overview of ANZUP and its clinical trials activity, a patient perspective of participating in a clinical trial, the impact of a diagnosis of a urogenital cancer (prostate, bladder kidney or testicular cancer) which will include discussion around the financial impact and sexuality issues. Attendees will then have the opportunity to address a panel during a question and answer session.

Admission is free but seating is limited, so if you could please register if you are planning to attend. To register for the Community Engagement Forum please visit: www.anzup.org.au/content.aspx?page=asm-registration
To view program updates go to: www.anzup.org.au/content.aspx?page=asm-preconference

ANZUP is pleased to announce Novartis will once again support the ANZUP/Novartis Travel Grants. The grants aim to support ANZUP’s multidisciplinary members who have had an abstract accepted for either oral or poster presentation to attend this year’s ANZUP ASM. To be considered for an ANZUP/Novartis Travel Grant you must:

• Be an ANZUP member;
• Have an abstract accepted for presentation at the ANZUP ASM (either oral or poster);
• Have not received any other travel grants for this meeting.

Please click here for the ANZUP/Novartis Travel Grant application form

ANZUP would like to acknowledge Novartis for the ANZUP/Novartis Travel Grants:

CONCEPT DEVELOPMENT SESSION

Monday 16 July 2012
Four Points by Sheraton, Sydney Darling Harbour

CALL FOR CONCEPTS:
Concept Submissions are now open – with plans to close 30 April 2012. For further information: ANZUP Concept Development Session Flyer
“Challenging Cases in Uro-oncology, a Multidisciplinary Approach”

9:00AM - 5:00PM
Sunday 15 July 2012
Wharf Room
Four Points by Sheraton, Sydney Darling Harbour

The Day will be inclusive and multidisciplinary, involving a series of interactive case-based discussions that cover the major urological cancers. They will include aspects of medical management and supportive care across disciplines; as well as clinical, psychosocial and translational research. Attendees will have the opportunity to discuss cases with national and international experts, develop greater understanding & confidence in the management of urological cancers, and be inspired to participate in urological cancer research.

ANZUP would like to acknowledge the funding we receive from the Australian Government through Cancer Australia.

Program outline

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Cases</th>
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<tbody>
<tr>
<td>9:00 - 9:15am</td>
<td>Opening &amp; Welcome</td>
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<tr>
<td>9:15 - 10:15am</td>
<td>Prostate Cancer</td>
<td>Case 1: Low-risk disease: is active surveillance the new gold standard?</td>
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<td>Case 2: Metastatic disease with symptomatic primary: Getting the balance right</td>
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<td>10:15 - 10:30am</td>
<td>MORNING TEA</td>
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<tr>
<td>10:30 - 11:30am</td>
<td>Kidney Cancer</td>
<td>Case 1: Localised renal mass: Optimal surgery</td>
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<td>Case 2: Oligometastatic disease: how aggressive should we be?</td>
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<td>11:30 - 12:30am</td>
<td>Germ Cell Tumours</td>
<td>Case 1: Stage I seminoma: is radiotherapy still an option?</td>
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<td>Case 2: Metastatic disease: Optimal chemotherapy and surgery</td>
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<tr>
<td>12:30 - 1:30pm</td>
<td>LUNCH</td>
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<td>1:30 - 2:30pm</td>
<td>Trial Development</td>
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<tr>
<td>2:30 - 3:30pm</td>
<td>Bladder Cancer</td>
<td>Case 1: High-risk NMIBC – therapeutic choices, and management of treatment failure</td>
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<td>Case 2: Muscle-invasive disease: bladder preservation vs radical surgery</td>
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<td>3:30 - 3:45pm</td>
<td>AFTERNOON TEA</td>
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<td>3:45 - 4:45pm</td>
<td>Psycho-Oncology/QoL Forum: Bladder cancer</td>
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<td>4:45 - 5:00pm</td>
<td>Closing</td>
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Cost: If you are attending the entire ANZUP ASM the Trainee Day is included. If you are not attending the ANZUP ASM but would like to attend the Trainee Day, fees apply.

Further Information
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ANZUP Cancer Trials Group Ltd is pleased to announce its first stand alone Annual Scientific Meeting (ASM) to be held at Four Points by Sheraton Sydney, 15-17 July, 2012. The theme is “State of the art multi-disciplinary care in urological cancers” which will showcase the most up-to-date cancer treatment, research and education in prostate and other urogenital cancers. It will provide a forum for junior researchers to present new concepts; opportunity for all health professionals involved in urogenital cancer care and research, to network and share their knowledge; and to learn more about existing and planned ANZUP trials while encouraging involvement of and collaboration with, the various professional disciplines.

Highlights include:

- Presentations from leading international and Australian experts;
- ANZUP Trainee Day: Challenging cases in Uro-oncology, a Multi-disciplinary Approach”;
- A Concept Development Session;
- A Translational and Research Methods Session;
- Community Engagement Forum.

INTERNATIONAL FACULTY CONFIRMED INCLUDE:

Dr Daniel Heng
Clinical Assistant Professor, University of Calgary Staff Medical Oncologist, Tom Baker Cancer Center
Sponsored by Pfizer

Dr Donna Berry
Associate Professor of Medicine, Harvard Medical School
Director, Phyllis F. Cantor Center for Research in Nursing and Patient Care Services, Dana-Farber Cancer Institute
Sponsored by CNSA & ANZUP

Prof Michel Bolla
Professor, Department of Radiotherapy, Grenoble University Hospital, Grenoble, France
Sponsored by IPSEN

Dr Shahrokh F. Shariat
Associate Professor of Urology & Assistant Professor of Medical Oncology
Director, Bladder Cancer Outcomes and Translational Research Weill Cornell Medical Center and New York-Presbyterian Hospital
Sponsored by ANZUP

For more information and updates please visit our ASM page at www.anzup.org.au.