On behalf of the Australian and New Zealand Urogenital and Prostate (ANZUP) Cancer Trials Group convening committee, I was honoured to convene the 6th Annual Scientific Meeting (ASM). This year’s theme ‘The Art & Science of Best Practice’ provided a platform to discuss innovations in research and practice that have facilitated the delivery of top-quality care for people with genitourinary cancer. Delegates had the opportunity to interact with and learn from six international experts and numerous national leaders in the management of GU cancers, always with the collegial spirit that defines ANZUP.

The ASM was truly multidisciplinary – there were sessions to suit everyone working in GU cancers. The program included a highly successful new Translational Research Symposium, the popular MDT Masterclass and an expanded PCFA ANZUP Nurses Symposium, which this year included an engaging workshop: ‘Transforming ideas into robust clinical questions’.

We were fortunate to have more than 50 speakers, panelists, session chairs and e-poster presenters take part in more than 20 different sessions throughout the three days. This is a great reflection on the diversity and breadth of ANZUP’s now 1,200-strong membership.

In addition, our international faculty was a highly engaged group, providing a global perspective on many of the keys issues facing GU cancer experts.

The pre-conference Sunday opened early with the well-attended Nurses Symposium chaired by Kath Schubach. The workshop, designed to develop understanding of the language of research methodology, was highly rated with attendees enjoying the level of interaction and practical guidance.

In the adjacent room, Arun Azad and Anthony Joshua chaired the equally well-attended Translational Research Symposium, which opened with international speaker Peter Black. For many, the line-up of nine esteemed presenters which brought together scientists and clinicians was the highlight of the ASM. I congratulate the working group responsible for this symposium: Arun Azad, Lisa Butler, Anthony Joshua and Ian Vela.

For the first time, the four MDT Masterclasses were made available via webcast, with live polling via the ASM app across all sessions adding a unique opportunity for delegates to interact with the panels. Each panel was led by an expert chair and highlighted key controversies and research opportunities, as well as covering important practice points for less experienced audience members. I commend the MDT Masterclass convenors, Nick Brook and Craig Gedye, for their efforts in bringing it together.

On Sunday afternoon, the annual Community Engagement Forum attracted more than 80 members of the public who heard excellent presentations and panel discussions covering important issues such as quality of life, treatment choices, survivorship, impacts on intimacy and how to find reliable information online.
In keeping with this year’s ASM theme, the Evening Symposium featured two of our impressive international speakers, Robert Lee and Silke Gillessen, discussing how to communicate science and research outcomes and implement research into practice.

Monday’s program commenced with the PCFA-sponsored Supportive Care Breakfast covering practice, policy and challenges in prostate cancer survivorship with session chair Suzanne Chambers and international guest Kevin Stein.

Concurrently, the Translational Breakfast chaired by Ian Vela featured Peter Black, Renea Taylor and Peter Croucher sharing their expertise in immunotherapy development in uro-oncology, the genomic landscape of BRCA2-mutant prostate cancer and bone metastases in prostate cancer. This session was highly engaging and prompted a flurry of discussion, both in person and on Twitter.

Following breakfast, we were honoured to be joined by Professor Helen Zorbas AO, Cancer Australia CEO, and the Hon Frank McGuire MP, Parliamentary Secretary for Medical Research, to officially open the 2017 ASM.

Leading on from the plenary session, the full sphere of GU cancer topics was covered by a range of national and international speakers and lively question and answer sessions. Updates were also provided by each of the subcommittee chairs, along with a concept pipeline update. The Monday daytime program wrapped up with the high quality Best of the Best Orals and the new e-Poster presentations in the trade area.

Also new to this year’s ASM was a cycling challenge which saw long pants swapped for Lycra as delegates turned pedal into power on stationary ‘body bikes’ during session breaks on Monday. The team scores were tallyied for a place in the highly competitive ride off at the conference dinner, which you can read more about on page 9.

In addition to the ride off, this year guests at the conference dinner were thoroughly entertained by the dulcet tones of Dickon Hayne and his unforgettable rendition of The Verve’s ‘The Drugs Don’t Work’.

On Tuesday morning, delegates at the Emerging Leaders Breakfast were inspired by the personal career journey of international guest Alex Kutikov and embraced the joy of good research with Liz Kenny.

The final day’s program featured sessions on immuno-oncology in GU Cancers, maximising quality in research and practice, addressing some of the challenges with trials and managing uncertainties in practice. Presentations drew to a close with the eagerly anticipated ANZUP debate, which pitted art against science in celebration of the 2017 ASM theme.

The ASM closed with the presentation of a number of awards, scholarships and fellowships, including the Below the Belt Pedalthon Research Fund recipients. See the list of winners on page 12.

I would like to thank this year’s convening committee (Nick Brook, Prue Cormie, Ian Davis, Craig Gedye, ...
Hello and welcome to ‘UPdate’

2017 ANZUP ASM Convenor’s Report

George Hruby, Joseph Ischia, Belinda Jago, Mei Krishnasamy, Margaret McJannett, David Pook, David Pryor, Kath Schubach, Shomik Sengupta, Ian Vela, Deborah Whalley and Henry Woo) for their tireless efforts, enthusiasm and commitment towards ensuring another highly successful program. Thanks also to our conference organisers YRD, especially Kate Murphy and Jenny Lawler, and of course the wonderful ANZUP team.

Without the generous support of our sponsors we would not be able to provide such a high quality program with a stellar cast of national and international speakers. We thank and acknowledge our platinum sponsors: Prostate Cancer Foundation of Australia and Janssen; gold sponsors: Astellas and Novartis; silver sponsors: Amgen, Bayer, Ferring, Ipsen, Pfizer, Roche and Tolmar; bronze sponsors: BMS, Pfizer and Bayer; as well as MDT Masterclass sponsor Janssen; Translational Symposium sponsor MSD; Travel Fellowships sponsor Bayer; and exhibitors. We are also very grateful for the invaluable support ANZUP receives from Cancer Australia.

With a record number of delegates in attendance, (and a record Twitter engagement with more than 2.65 million impressions and 2,136 tweets during the meeting), I’m delighted this year’s ASM again raised the bar. We look forward to seeing you in Sydney for #ANZUP18.

CARMEL PEZARO
2017 Convenor

Contents

2017 ASM Convenors Report . . . . 1
Message from the Chair. . . . . . 4
Community Engagement Forum . . . . . . . . 7
Lutetium-PSMA (TheraP) trial launched . . . . 8
Talking Urology . . . . . . . 8
Cycling Challenge . . . . . . . 9
ASM awards . . . . . . . 10
ASM by numbers . . . . . . . 14
2017 ASM highlights . . . . . . . 16
Thanks to our 2017 ASM sponsors . . . . . . . . 19
BTB Pedalthon Sydney . . . . . . 20
BTB Pedalthon Melbourne . . . . 21
Updates from SAC and Subcommittees . . . . . . . . 22
Concept Development Workshops . . . . . . . . 30
Events . . . . . . . 31
Other news . . . . . . . 33
Welcome to the Spring 2017 edition of UPdate, the newsletter of the Australian & New Zealand Urogenital and Prostate Cancer Trials Group Ltd (ANZUP), with apologies for any calendar confusion caused if you are in the Northern Hemisphere!

ANZUP exists to improve outcomes for people affected by genitourinary cancers. We do this by performing clinical trials so that we and the people we care for are better informed and can make better treatment decisions. We also recognise that in order to do this well, we also need to educate ourselves, learn from each other, listen to our patients, foster the next generation of clinicians and researchers, be well informed about what is happening in our own fields as well as others, and forge links to ensure that we can work more effectively and inclusively.

We had another record attendance at this year’s ASM, with new initiatives such as the Translational Research Symposium. The ASM is a packed program that is not to be missed. Our Concept Development Workshops have become a major activity in themselves, complementing the ongoing work throughout the year of the various committees. New funding initiatives, such as the agreement with Prostate Cancer Foundation of Australia, mean that we can now develop and run some trials without having to wait for the vagaries and uncertainty of grant funding. The first trial under this new scheme, the Lutetium-177 PSMA ‘TheraP’ trial, is about to open at the time of writing. This is a very exciting and important milestone for ANZUP but also represents just one of many extraordinary achievements that have resulted from the work of so many of our members.

ANZUP is particularly proud to have developed new systems and programs for supporting researchers, trainees and specific projects. These are supported either by industry (such as the Tolmar, Astellas or Janssen fellowships), or from ANZUP’s own fundraising initiatives. An important example is the Pedalthon, now in its fourth year. The ANZUP Board has resolved that all the funds from the Pedalthon events should be devoted to supporting research projects that ideally will lead to future ANZUP trials.

Message from the Chair

The Lutetium-177 PSMA ‘TheraP’ trial, is about to open at the time of writing. This is a very exciting and important milestone for ANZUP but also represents just one of many extraordinary achievements that have resulted from the work of so many of our members.
We recognise that not all of these projects will result in new trials; however we also recognise the importance of this support including its ability to help researchers develop ideas so that they will become competitive for future funding applications. You will read details of the recipients of the 2016 Below the Belt research grants inside this newsletter. The 2017 Pedalthon in Sydney once again will provide much-needed resources for future research projects. It is never too late to contribute to this important initiative. However, if you missed it: pencil in the inaugural Melbourne Below the Belt Pedalthon at Sandown on 18 March 2018.

Another date for your diary is the 2017 Best of GU which will take place in Sydney on Wednesday 8 November. This evening symposium in collaboration with USANZ will feature highlights from the 2017 GU calendar representing cutting edge research and treatment in prostate and urogenital cancer. We are delighted to have an outstanding line up of speakers alongside Chair Henry Woo. This is an exceptional opportunity to hear from some of oncology’s most respected professionals including Shankar Siva, Mark Frydenberg AM, Haryana Dhillon, Peter Croucher, Daniel Heng and Venu Chalasani. Free registration is just one of the many benefits of being an ANZUP member. See page 32 for more details.

ANZUP has grown in less than a decade to be an international organisation of over 1,300 members, covering all disciplines and disease types under the heading of the genitourinary cancers (by the way, have a look at the last newsletter, where we said “over 1,100.”) It is quite amazing to think on how far we have come in such a short time. Our first newsletter

“We are now entering our tenth year of existence. That milestone warrants celebration, so it would be a Very Good Idea for you to take the time right now to pencil in your attendance at the 2018 ASM to be held in Sydney on 8–10 July.
published in September 2009 was 12 pages long. Even then, though, we had plenty to report in terms of our trial and committee activities. Now the newsletter is triple that size and includes a whole lot more activity on top of our core trial programs. No correspondence will be entered into regarding my photo then compared to now, but it is wonderful to see how many more people are actively engaged in trials and in other ANZUP activities throughout the year. You will read all about those in the following pages.

We are now entering our tenth year of existence. That milestone warrants celebration, so it would be a Very Good Idea for you to take the time right now to pencil in your attendance at the 2018 ASM to be held in Sydney on 8–10 July. Our convening committee led by Henry Woo is already well advanced in planning and there will be a few surprises. The 2018 ASM promises to be one for the ages, so we look forward to seeing you there to make history!

We did not anticipate in 2009 being where we are in 2017. Our achievements have been entirely due to the efforts of all of our members, and we are very grateful to you. You set the benchmark for multidisciplinary and collaborative involvement in all of our activities, to the envy of many other groups. You continually give of your time and expertise, which is just as well, because we cannot afford to pay for it! Our tireless staff led by Marg McJannett work very effectively with all our members and collaborating organisations; the smoothness of the operation is real but only happens because of their amazing efforts.

In the end, though, it’s all about our patients and their families. It will always be about doing the best we can for that person coming to us with needs to be met. Some of us do that directly, through our clinical work; others of us facilitate it by working behind the scenes, or in the labs, or with stakeholders or government, or in countless other ways to make sure that it can all happen. My profound thanks go to you all.

Please enjoy this edition of UPdate.

IAN DAVIS
Chair

“We did not anticipate in 2009 being where we are in 2017. Our achievements have been entirely due to the efforts of all of our members, and we are very grateful to you. You set the benchmark for multidisciplinary and collaborative involvement in all of our activities, to the envy of many other groups.”
The annual Community Engagement Forum brings together patients, their families and clinical experts in an open and welcoming setting. The 2017 forum attracted more than 80 members of the public.

After a brief overview of ANZUP and an explanation of how ideas become clinical trials by Ian Davis, Suzanne Chambers spoke about the importance of quality of life and international speaker Kevin Stein discussed cancer survivorship. Kath Schubach tackled the impact of cancer on sexuality and intimacy and Haryana Dhillon provided a guide to finding reliable information online.

An engaging panel led by David Pook and ENZAMET trial patient Donald Lorimer, discussed treatment choices and decision making before Leonie Young facilitated questions from the floor.

Members of the public commented they were impressed by the event and found the speakers to be informative and well prepared. Others said they were able to take home new information relevant to their particular situation.

The forum was promoted online and in print media (including The Saturday Paper), as well as via PCFA, Cancer Council VIC, Cancer Action Victoria and ANZUP Victorian members’ clinics.

“I attended the Community Engagement Forum and thought it was fantastic, really good information and interaction with consumers.”
– ASM delegate
Talking Urology started because I could not find a good (or even listenable) regular urology podcast discussing the literature and level 1 evidence that defines our everyday urological practice. There is a smattering of level 5 expert opinion pieces but I wanted to have something that would prepare us for robust evidence-based discussions in multidisciplinary meetings or chatting with our colleagues.

The key to having a strong opinion on a point is to know your evidence. The prime focus of Talking Urology is the analysis of landmark papers with insights and discussion with the key authors of those papers. It was a natural extension of Talking Urology to chat to key opinion leaders and experts in their fields to give us the highlights of their plenary talks at the major meetings such as the USANZ ASM in Canberra, ANZUP ASM in Melbourne, or the recent AUA in Boston.

At the ANZUP ASM we had more than 20 interviews with experts and plenary speakers giving us the highlights of their talks. Interviewers included myself, but more interestingly, other local urologists, oncologists and allied health professionals also chatted to speakers about their presentations.

On Monday 17 July, ANZUP partnered with the PCFA to launch the upcoming Lutetium PSMA (TheraP) trial to the media with strong interest from Channel 7, Network Ten and AAP. Thanks to the firsthand account of a pilot study experience by patient Barry Elderfield and presentations from Professor Ian Davis, Associate Professor Anthony Lowe and Investigator Associate Professor Louise Emmett, the trial received broadcast coverage on both TV networks.

Following the launch, an FAQ page was added to the ANZUP website with enquiring patients referred back to their treating team to discuss options applicable to them. The TheraP working group continues to meet via teleconference to progress the protocol and ethics submission with the first site expected to be initiated towards the end of the year.

The Lutetium PSMA (TheraP) FAQs are available on the ANZUP website.

Talking Urology is supported by Ipsen. We hope that these will make short, sharp and interesting podcasts that you can listen to in your car while driving to work highlighting the key messages presented at the ASM, straight from the mouths of the experts themselves.

Podcast links will be tweeted (follow @Talking_Urology), or can be accessed through www.talkingurology.com.au.

JOSEPH ISCHIA
Cycling Challenge

Riding on the success of the Below the Belt Pedalthon and the launch of the Melbourne event on 18 March 2018, this year the ASM brought the bikes indoors for a fiercely contested cycling challenge.

More than 30 delegates signed up to the ASM Cycling Challenge in an effort to generate the most power on stationary ‘body bikes’ in the trade area. Team members wore heart rate chest straps and each took their turn to ride for two minutes with their combined scores tallied for a place in the ride off at the conference dinner.

In a precursor to the main course, Giddy Up Oncology (Peter Grimison, David Pook and Sang Tran) squared up against ASM Team 4 (Chris Brown, Peter Fong, Fritha Hanning and Andrew Weickhardt) to a soundtrack of Eye of the Tiger. As the tension (and sweat) mounted, ASM Team 4 powered on to take out the 2017 title. Thank you to Body Bike Indoor Cycles, MYZONE Belts and everyone who got involved in the challenge at the ASM.
ANZUP/Bayer Travel Fellowships

Malmaruha Arasaratnam  Manasi Jiwrajka  Andrew Mant  Natasha Roberts
Adel Aref  Andrew Joshi  Shannon McGrath  Andrew Schmidt
Ross Calopedos  Nishi Karunasinghe  Brian Ngo  Susan Scott
Daniel Christidis  Daljit Kaur  Edmond Kwan  Gavin Wei
Dorothy Chua  Kirstyn Laurie  Michael Lee  Milita Zaheed
Julia Corfield  Gabrielle Lie  Wee Loon Ong  Alison Zhang
Megan Crumbaker  Todd Manning  Krishan Pratap
Simon Fu  Matthew Roberts
Dora Huang

Trial Coordinator Scholarships

Beth Caudwell  Lauren Mitchell  Andrew Mant
Jennifer Edmunds  Nathan Reader Wilson  Natasha Roberts
William Evans  Natasha Roberts  Andrew Schmidt
Cynthia Hawks  Leanne Terry  Susan Scott
Natalia Innes  Courtney Thornely  Gavin Wei
Faizan Jameel  Robert Tobler  Milita Zaheed

NEW Janssen ANZUP Nursing /Allied Health Scholarship Award

Janssen and ANZUP are delighted to partner to support the 2017 Janssen ANZUP Nursing/Allied Health Scholarship Award valued at up to $10,000. The scholarship is awarded to a nurse or allied health practitioner ANZUP member with proven clinical expertise in the area of urogenital cancer, to support a project in their clinical research area of interest.

The 2017 Scholarship was awarded to Natasha Roberts. Natasha is a clinical trial coordinator and has looked after a number of ANZUP studies at the Royal Brisbane and Women’s Hospital. She is very interested and engaged with patients who experience urogenital and prostate cancers. She is currently studying her PhD full time.
ANZUP Nursing /Allied Health Scholarship Award

This year ANZUP was delighted to announce an additional Nursing/Allied Health Scholarship Award valued at up to $10,000. The scholarship is awarded to a nurse or allied health practitioner ANZUP member with proven clinical expertise in the area of urogenital cancer, to support a project in their clinical research area of interest.

The 2017 Scholarship was awarded to Cynthia Hawks. Cynthia has been involved in urological research since 2007 in a variety of roles and has been part of ANZUP since 2011. Cynthia’s role is a combination of data manager, research nurse and trial coordinator for a number of ANZUP trials recruiting at Fiona Stanley Hospital. Her project is: ‘Economic and efficiency impact of a rapid access prostate cancer diagnostic service in WA: Analysis from provider and patient perspectives’.

ANZUP Tolmar Fellowship

The Tolmar ANZUP Uro-Oncology Clinical Research Fellowship (CRF) valued at $60,000 supports an early/mid-career clinician or researcher of any health care discipline. This year’s Tolmar Fellowship was awarded to Shahneen Sandhu.

Shahneen Sandhu is a Consultant Medical Oncologist at the Peter MacCallum Cancer Centre. Shahneen is a clinician researcher with an interest in translational research and advancing treatments for patients with prostate cancer through rational drug design and optimal patient selection. Her research project is titled: Immune profiling of tumours with germline DNA repair defects to define a subset of patients that may benefit from immune checkpoint inhibitors.

Astellas Young Investigator of the Year Award

The Astellas Young Investigator of the Year Award recognises an outstanding early career researcher in prostate cancer clinical trials research with up to $10,000 to support his/her attendance at an international GU meeting and ANZUP ASM.

The 2017 award was presented to Shankar Siva. Associate Professor Shankar Siva is a consultant radiation oncologist at the Peter MacCallum Cancer Centre, principal fellow at the University of Melbourne and an NHMRC ECF Fellow.
Thank you to all 2017 Below the Belt Research Fund applicants. ANZUP received a large number of high quality applications. After careful consideration, the review panel selected seven successful applicants – Camille Short, Megan Crumbaker & Anthony Joshua, Dickon Hayne, Lisa Horvath, Haryana Dhillon, Dennis Taaffe and Ben Tran.

Camille Short – Delivering personalised and evidence-based exercise support to men with metastatic prostate cancer via the internet

Men with metastatic prostate cancer experience a high level of morbidity. Participation in moderate amounts of physical activity can help to improve quality of life, but few men have sufficient support to do so. A key challenge is providing support in a way that is accessible and affordable, while also individualised, evidence-based and safe. This novel pilot study will address this by providing evidence-based physical activity advice through an innovative web-based platform. Objectively assessed physical activity and health-related quality of life will be assessed as main outcomes.

Megan Crumbaker & Anthony Joshua – Bipolar androgen therapy (BAT) in men with metastatic castrate-refractory prostate cancer

BAT has shown promising activity in men with advanced CRPC but biomarkers to guide patient selection would be beneficial. BAT involves oscillating between supraphysiologic and castrate levels of testosterone through use of an ongoing LHRH agent in combination with pulsed IM testosterone. The Kinghorn Cancer Centre at St. Vincent’s Hospital is conducting a phase II trial of BAT in men with advanced CRPC and homologous recombination deficiency (HRD) in their tumour or circulating DNA to test if HRD may serve as a predictive biomarker of treatment response.

Dickon Hayne – ANZUP co-operative multi-centre cystectomy database (ACCEPT)

Radical cystectomy, an operation to remove the entire bladder, may be required to cure bladder cancer but involves significant risk and complications. Complication rates (within 90 days of surgery) are frequently reported in more than half of patients with mortality rates between 0.8% and 8.3%. To improve outcomes in Australia and New Zealand accurate data is required. The primary objective of the study is to create a bi-national prospective clinical audit to collect data around radical cystectomy. This data will inform strategies to improve patient outcomes and help design future clinical trials.

Lisa Horvath – Statins in Metastatic Castration-Resistant Prostate Cancer (CRPC)

To date, biomarker studies in castrate-resistant prostate cancer have mainly focused on changes in the cancer and their effects on therapeutic resistance and prognosis. However, the host environment (i.e. the patient) and its interactions with cancer is increasingly important, especially in light of the increasing association of prostate cancer and obesity. We have identified and validated a prognostic three-lipid signature consisting of ceramide, sphingomyelin and phosphatidylcholine. This study aims to determine whether treatment with simvastatin during docetaxel chemotherapy can modulate circulating lipid profile by reducing levels of sphingolipid subclasses from baseline, thereby reverse a poor prognostic lipid signature.
Haryana Dhillon – Patient perception of adherence to treatment advice in urogenital and prostate cancers: a qualitative exploration

It is important people with urogenital and prostate cancers complete their planned treatment and follow-up. However, little is known about how this is for patients and how we can help them complete their treatments. We will explore patients’ thoughts about the advice they have been given and what may help or hinder their ability to adhere to treatment advice. We will use this information to develop better support to help patients complete treatments and improve clinical outcomes.

Dennis Taaffe – Exercise Medicine Prior to Open Radical Cystectomy: Feasibility and Preliminary Efficacy

The aim of the study is to improve the functional status of patients prior to radical cystectomy and improve patient outcomes following surgery. A single-arm trial will be undertaken with patients undergoing supervised resistance and aerobic exercise for up to 4 weeks prior to surgery with follow-up at 3 months post-surgery. The primary outcome is feasibility while secondary outcomes include length of hospital stay and complications, physical function, quality of life, body composition, and time to return to work or usual activities.

Ben Tran – iTestis: Bioinformatics for Testis Cancer

iTestis is a user-friendly, multi-disciplinary, web-based interface to facilitate collection of high quality clinical data. iTestis will describe the current practice patterns of Australian clinicians, facilitate both local and multinational retrospective research projects, facilitate translational research and provide a platform from which a series of registry-based clinical trials can be conducted. Additionally, it will record tissue location data from germ cell tumour (GCT) patients treated in Australia. Successful implementation of iTestis will result in ongoing Australian contribution to high impact global GCT literature.

ASM Awards

2017 ANZUP/Astellas Best of the Best Awards

The Best of the Best Awards are given based on the content, degree of innovation, significance, and quality of oral or poster presentations given at the ASM, as judged by an independent panel.

2017 winners:

Best of the Best Oral – Kirstyn Laurie
Best of the Best Poster – Alison Zhang
Best of the Best Trainee / Fellow – Daniel Christidis
Best of the Best Nursing / Allied Health – Melissa Hyde
ASM by numbers

31
ANZUP/BAYER TRAVEL FELLOWSHIPS

12
TRIAL COORDINATOR SCHOLARSHIPS

20
TALKING UROLOGY PODCASTS

32
CYCLING CHALLENGERS

15
SPONSORS

1,273
CUPS OF COFFEE

2,464
MENTOS/FANTALES

16,832
TOTAL PAGE VIEWS

392
PAGE VIEWS DURING BLADDER MDT MASTERCLASS

391
TOTAL UNIQUE VISITORS

119
UNIQUE VISITORS DURING PROSTATE MDT MASTERCLASS

#ANZUP17 Twitter

2.65 MILLION IMPRESSIONS

2,136 TWEETS
(UP FROM 1,500 IN 2016)

383 PARTICIPANTS
2017 ASM Highlights

For ASM resources, including presentations and photo albums, visit http://www.anzup.org.au/content.aspx?page=asm-home

“The translational research symposium was one of the main highlights for me. Organisers and presenters did an incredible job.”

“Having all disciplines present within the same focus group is very beneficial as it gives all disciplines insight into what is happening holistically for the patient.”
2017 ASM Highlights

“Multidisciplinary attendance provides a rare opportunity to mix with various specialities at the one meeting.”

“[The ASM] addressed many current issues of uncertainty.”

“The medium is the message”
2017 ASM Highlights

“I will be sharing the new information and emerging positive treatments with my colleagues, patients and prostate cancer support groups.”
### Thanks to our 2017 ASM Sponsors

#### PLATINUM:
- Janssen Pharmaceutical Companies of Johnson & Johnson
- Prostate Cancer Foundation of Australia

#### GOLD:
- Astellas Oncology
- Novartis Oncology

#### SILVER:
- Amgen Oncology
- Bayer
- Ferring Pharmaceuticals
- Ipsen
- Pfizer Oncology
- Roche
- TOLMAR Australia

#### BRONZE:
- Bristol-Myers Squibb
- Janssen Pharmaceutical Companies of Johnson & Johnson
- MSD

#### INTERNATIONAL SPEAKER SPONSORS:
- Astellas Oncology
- Ipsen
- Novartis Oncology

#### MDT MASTERCLASS SPONSORS:
- Astellas Oncology
- Novartis Oncology

#### EVENING SYMPOSIUM SPONSORS:
- AstraZeneca
- TOLMAR Australia

#### TRAVEL FELLOWSHIPS SPONSORS:
- Janssen Pharmaceutical Companies of Johnson & Johnson
- Prostate Cancer Foundation of Australia

#### MDT MASTERCLASS WEBCASTING SPONSOR:
- AstraZeneca

#### NURSES’ SESSIONS SPONSORS:
- Astellas Oncology

#### BEST OF THE BEST SPONSOR:
- AstraZeneca

#### ASM APP SPONSOR:
- Abbvie

#### EXHIBITORS:
- AstraZeneca

#### COFFEE CART SPONSOR:
- Amgen Oncology
It’s been four years since we established the Below the Belt Pedalthon and we’re steadily approaching the milestone of $1 million raised in this time. Will you join us in 2017 to celebrate all that has been achieved in just four years?

The Pedalthon is a race for riders of all levels and from all walks of life.

This event welcomes everyone, from large corporates to healthcare practitioners, pharma, small businesses, hardworking police, fireys and Olympic cyclists all lined up in lycra on the starting line. They’ll all be there to help beat genitourinary cancers, with all funds raised going to the Below the Belt Research Fund.

Of course it’s also incredibly important we have ANZUP members as part of the race, and there’s nothing better than seeing familiar faces on the track. Last year, we were delighted to see a synergised group of ANZUP members from different areas join us on the day.

We are inviting all ANZUP members to join us in 2017 for free. Or if you’re not the cycling type, please support the ANZUP team, who are currently in training for their best year yet.

**How do I register?**

Click here to become a rider on the ANZUP team

**I don’t ride, can I support the ANZUP team?**

Absolutely! Click here

If you have any questions contact lucy.byers@anzup.org.au

It’s time to get ready to race!
Following on from the success of the Sydney Pedalthon, ANZUP is thrilled to launch the Below the Belt Pedalthon in Melbourne.

With the generous support of the Melbourne Racing Club (MRC) Foundation, the inaugural ride will be held at Sandown Racecourse on Sunday 18 March 2018.

During ANZUP’s recent ASM, MRC Foundation’s Chair, Patricia Faulkner AO, alongside Ian Davis, officially launched the event to more than 300 delegates.

“We are delighted to be supporting ANZUP in launching the Below the Belt Pedalthon in Melbourne with the use of Sandown as the venue for the event. We look forward to seeing the Victorian community at the event on Sunday 18 March 2018,” said Ms Patricia Faulkner AO.

In line with ANZUP’s strategic plan, the Below the Belt Pedalthon in Melbourne will provide a platform to engage with the Victorian community, whilst raising awareness of genitourinary cancers. The event will promote important health messages, educate the public on clinical trials and attract a new fundraising stream to support ANZUP’s research activities.

“As members of ANZUP, we are excited to be involved in the inaugural event, and using the Pedalthon, as a mechanism to communicate ANZUP’s mission, to improve treatments, and outcomes for those living with testicular, prostate, bladder and kidney cancers. See you at Sandown on 18 March 2018.”

Jeremy Shapiro and David Pook

The event is open to all with challenges for riders of different levels and ages. To register your interest email pedalthon@anzup.org.au
The ANZUP Scientific Advisory Committee oversees the scientific direction of ANZUP. It reviews the various trial proposals that come from the subcommittees or through external links, and advises how to prioritise them and move them towards realisation. Sometimes members of the SAC are involved closely in development of concepts or ideas, which often involves a mentorship function with less experienced researchers. The SAC composition stretches across many of the key disciplines involved in the care and research of these cancers, ensuring that all perspectives are considered. This often leads to surprising insights and consequent substantial increases in the potential value of trial outcomes. The SAC is also instrumental in overseeing research grants made possible by ANZUP’s growing fundraising efforts and initiatives, led by the highly successful Below the Belt Pedalthon.

The SAC had its quarterly teleconference in March and its annual face-to-face meeting at the ASM in July. This meeting is open to any interested ANZUP member and attendance is usually excellent, particularly since it occurs late in what is usually quite a long day of activity. The agenda comprises a component relating to ongoing strategic planning and implementation of the strategic plan, as well as reports and discussion through the various subcommittee chairs. Action items arising from the July SAC meeting include providing feedback on the new clinical guidelines for intravesical therapy, discussion around the development of a database of all ANZUP sites, and submission of ideas for future translational research.

The members of the SAC are appointed by the ANZUP Board on the basis of recommendations from their various professional groups, with annual review of membership; and the subcommittee chairs are also SAC members by virtue of that appointment. However, any ANZUP member is welcome to contribute to the overall scientific processes of the group through participation in the various subcommittees. The level of your interaction can be as much or as little as you wish: you may want only to be kept informed, or you might want to participate actively in the discussions, other processes, and trial leadership functions. ANZUP members can check whether they are involved in any subcommittees by logging on to their section of the website. You can add or remove membership of any subcommittee on request.

ANZUP relies strongly on the generous donations of time and expertise from all of its members. Thank you to all the members of the SAC and its subcommittees for your commitment to what we do.

IAN DAVIS
Chair, ANZUP Scientific Advisory Committee
The Bladder Cancer Subcommittee has seen a busy few months of activity.

The concept development workshop held in Sydney on 21 April included a number of interesting proposals covering not only bladder cancer but also upper tract urothelial cancers. Following on from the day’s discussions, many of these are being further progressed and will hopefully lead onto trial development.

The ANZUP ASM held in Melbourne from 16–18 July provided an opportunity for an update on the subcommittee’s activities from Chair Dickon Hayne. The program also included exciting clinical and translational insights on bladder cancer, particularly from Peter Black from Vancouver, Canada. It is hoped that this may provide additional impetus to the development of bladder cancer translational research to build onto existing and future ANZUP trials.

Currently recruiting trials

- **PCR-MIB (Pembrolizumab with chemo-radiotherapy for muscle-invasive bladder cancer):** has recruited the first two patients, and is now open at Austin Health, Prince of Wales, Peter MacCallum, Lifehouse and Sir Charles Gairdner. Interested clinicians are urged to refer suitable patients to their accessible centres for consideration.

- **BCG-MM (BCG vs BCG alternating with Mitomycin for high-risk non-muscle invasive bladder cancer):** is close to completing planned accrual of 130 patients for stage 1 of the trial and preliminary results are eagerly awaited. Further progress of the trial will depend on these results as well as ongoing funding, an application for which is currently under assessment.

- **BL-12 (Nanoparticle albumin-bound (NAB)-Paclitaxel vs. Paclitaxel as second line in metastatic urothelial cancer):** this trial from the Canadian Cancer Trials Group has now completed accrual, with ANZUP having contributed well (39 of 199 patients). Further clinical trials in this patient population are being considered for development and could lead to further collaboration between the two groups.

- **NMIBC-SI (Non-muscle invasive bladder cancer symptom index):** this ANZUP co-badged trial is developing and evaluating a tool for assessing patient reported outcomes. The tool is now in the first field test phase across several sites.

- **ACCEPT cystectomy database:** Accrual of patient data has started at the Fiona Stanley Hospital, with planned roll-out to multiple other sites. It is hoped that this will lead onto the implementation of standardised enhanced recovery interventions and the assessment of their impact on outcomes.

As always, sincere thanks to all ANZUP members who have contributed to the Bladder Cancer Subcommittee. There is an open invitation to anyone with an interest in bladder cancer to join in however they can.

SHOMIK SENGUPTA
Deputy Chair Bladder Cancer Subcommittee

“Friends of ANZUP” is a new initiative connecting people whose lives have been impacted by prostate, kidney, bladder or testicular cancer.

**Membership aims to provide:**
- Information about the benefits of clinical trials and how to access them
- Support from people who understand the challenges
- Information about research conducted by ANZUP
- Biannual community magazine, ‘A little below the belt’
- Invitation to Community Engagement Forums
- Practical resources and regular e-news

Please refer your patients and their families to ‘Friends of ANZUP’ and help us achieve our mission to improve the outcomes and treatment for those living with prostate, kidney, bladder and testicular cancer. Find out more at: http://www.anzup.org.au/friendofanzup.aspx
Phase III RCT of Accelerated BEP (plus translational sub study)

This randomised trial of chemotherapy with accelerated BEP versus standard BEP for patients with intermediate or poor-risk advanced germ cell tumours is supported by Cancer Council Australia and Cancer Australia, and is currently open at 29 ANZ sites. To date, 38 patients have been recruited.

We continue to work with collaborators from Cambridge Clinical Trials Unit and Children's Oncology Group to open the study in the UK and USA. Version 3.0 of the protocol, which allows recruitment of paediatric patients aged 11 years and over, and female patients, has been approved at most ANZ sites. If you have any questions in relation to this study, please email p3bep@ctc.usyd.edu.au.

ANZUP Stage I Testicular Cancer Follow-up Recommendations

Evidence-based recommendations for the follow-up of stage I testicular cancer are now available on the ANZUP website. They include a clinician guideline, patient handout, and excel calculator (which generates a personalised schedule). Developed by Andrew Weickhardt, Nicola Lawrence, Annie Yeung and Fritha Hanning, with the assistance of the ANZUP Germ Cell Subcommittee and Consumer Advisory Panel; they have been endorsed by the Medical Oncology Group of Australia, and promoted by the Oncology Network Newsletter (http://oncologynews.com.au/anzup-stage-1-testicular-cancer-surveillance-recommendations/).

The Germ Cell Subcommittee is developing methods to further promote and evaluate the impact of the recommendations, which aim to reduce unnecessary variance and radiation exposure in this group of patients, and would welcome input from members.

STUDIES IN ONGOING DEVELOPMENT

e-TC 2.0: a prospective study of an eHealth intervention for testicular cancer (TC) survivors led by Drs Ben Smith and Louise Heniger in collaboration with PoCoG, building on the successful e-TC study.

The study team are making excellent progress and the website is now finalised. A pilot study for patients with significant anxiety and/or depression will be completed by quarter three of 2017. Louise is stepping down from her role as project officer and we thank her for her excellent management of this study. Thankfully, she will remain on the advisory group!

TIGER: Movember is generously supporting ANZUP’s participation in the TIGER study. This very important international randomised trial for refractory and relapsed germ cell tumours, of high-dose chemotherapy with TI-CE versus conventional dose chemotherapy with TIP, is led by Alliance. ANZUP continues to work with the CTC and Alliance to open the study at up to seven ANZ sites in 2017.

iTestis: iTestis is a detailed database with a user-friendly web-based interface that will facilitate prospective collection of high quality clinical data. Additionally, it will record tissue location data from germ cell tumour (GCT) patients treated in Australia.

In doing so, iTestis will add to the academic milieu by:

- describing the current practice patterns of Australian clinicians
- facilitating both local and multinational retrospective research projects
- facilitating translational research
- providing a platform from which a series of registry based clinical trials can be conducted.

Initially, iTestis will be rolled out to selected high volume centres with interested and engaged investigators. The vision is for 70% of Australia’s germ cell tumour patient population to have data collected within iTestis, and then to consider rolling out to interested international parties.
INTERNATIONAL COLLABORATIONS

Translational Research Projects (Movember GAP5)

Dr Ben Tran, Deputy Chair of the ANZUP Germ Cell Subcommittee, is leading ANZUP’s involvement in two important translational research projects. The first is the GAP5 Translational Research Project, funded by Movember, which aims to identifying the biological drivers of platinum resistance in this cohort of men. The study will start very soon, with some ANZUP sites contributing tissue to this collaboration. It is hoped that ANZUP and its Australian collaborators will have the opportunity to participate in these projects.

IGCCCG 2.0

Prof Guy Toner, ANZUP co-chair, together with ANZUP fellow Dr Nicola Lawrence and ANZUP statistician Dr Andrew Martin are coordinating the provision of data to an EORTC-led international collaboration to update clinical prognostication in metastatic germ cell tumours, ‘IGCCCG 2.0’. Data from the ANZ Germ Cell Trials Group “Good prognosis” study and the ANZUP Phase II study of accelerated BEP are being provided.

CALL FOR NEW MEMBERS

The Germ Cell Subcommittee always welcomes new members including trainees who will contribute to research activity. Please encourage your interested colleagues and trainees to join the subcommittee. 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. Again, I thank the efforts of investigators, staff from ANZUP and the CTC, and patients for these achievements.

BEN TRAN
Deputy Chair, Germ Cell Subcommittee

The Renal Cell Subcommittee has continued to move forward with the UNISoN and KeyPAD studies mentioned in the previous newsletter. Both studies are undergoing ethics approval and will begin to recruit patients in the next few weeks. UNISoN is a sequential trial of nivolumab and then ipilimumab with nivolumab in patients with untreated metastatic non-clear cell renal carcinoma, a disease for which there are no funded options for treatment in Australia. KeyPAD is a phase II trial in metastatic clear cell renal carcinoma which has progressed on sunitinib or pazopanib, to test the combination of the PD-1 inhibitor, pembrolizumab with denosumab.

Nivolumab gained PBS approval for kidney cancer at the beginning of August which is fantastic news for patients. It is funded for clear cell renal cell carcinoma which has progressed on pazopanib or sunitinib. However, despite being well tolerated, there are many patients who do not respond to this treatment. Future treatments are likely to involve various combinations of immune stimulating agents and other targeted therapies.

The subcommittee continues to plan clinical trials involving novel drug combinations to improve the number of patients who respond to therapy. We are also trying to establish the optimal sequence in which to use the multiple agents we now have available to treat kidney cancer.

I’d like to thank all members for their ongoing contribution and inviting anyone interested to join the Renal Cell Subcommittee.

DAVID POOK
Deputy Chair RCC Subcommittee

The Renal Cell Subcommittee

Germ Cell

The Renal Cell Subcommittee has continued to move forward with the UNISoN and KeyPAD studies mentioned in the previous newsletter. Both studies are undergoing ethics approval and will begin to recruit patients in the next few weeks. UNISoN is a sequential trial of nivolumab and then ipilimumab with nivolumab in patients with untreated metastatic non-clear cell renal carcinoma, a disease for which there are no funded options for treatment in Australia. KeyPAD is a phase II trial in metastatic clear cell renal carcinoma which has progressed on sunitinib or pazopanib, to test the combination of the PD-1 inhibitor, pembrolizumab with denosumab.

Nivolumab gained PBS approval for kidney cancer at the beginning of August which is fantastic news for patients. It is funded for clear cell renal cell carcinoma which has progressed on pazopanib or sunitinib. However, despite being well tolerated, there are many patients who do not respond to this treatment. Future treatments are likely to involve various combinations of immune stimulating agents and other targeted therapies.

The subcommittee continues to plan clinical trials involving novel drug combinations to improve the number of patients who respond to therapy. We are also trying to establish the optimal sequence in which to use the multiple agents we now have available to treat kidney cancer.

I’d like to thank all members for their ongoing contribution and inviting anyone interested to join the Renal Cell Subcommittee.

DAVID POOK
Deputy Chair RCC Subcommittee

Germ Cell

The Renal Cell Subcommittee has continued to move forward with the UNISoN and KeyPAD studies mentioned in the previous newsletter. Both studies are undergoing ethics approval and will begin to recruit patients in the next few weeks. UNISoN is a sequential trial of nivolumab and then ipilimumab with nivolumab in patients with untreated metastatic non-clear cell renal carcinoma, a disease for which there are no funded options for treatment in Australia. KeyPAD is a phase II trial in metastatic clear cell renal carcinoma which has progressed on sunitinib or pazopanib, to test the combination of the PD-1 inhibitor, pembrolizumab with denosumab.

Nivolumab gained PBS approval for kidney cancer at the beginning of August which is fantastic news for patients. It is funded for clear cell renal cell carcinoma which has progressed on pazopanib or sunitinib. However, despite being well tolerated, there are many patients who do not respond to this treatment. Future treatments are likely to involve various combinations of immune stimulating agents and other targeted therapies.

The subcommittee continues to plan clinical trials involving novel drug combinations to improve the number of patients who respond to therapy. We are also trying to establish the optimal sequence in which to use the multiple agents we now have available to treat kidney cancer.

I’d like to thank all members for their ongoing contribution and inviting anyone interested to join the Renal Cell Subcommittee.

DAVID POOK
Deputy Chair RCC Subcommittee

Germ Cell

The Renal Cell Subcommittee has continued to move forward with the UNISoN and KeyPAD studies mentioned in the previous newsletter. Both studies are undergoing ethics approval and will begin to recruit patients in the next few weeks. UNISoN is a sequential trial of nivolumab and then ipilimumab with nivolumab in patients with untreated metastatic non-clear cell renal carcinoma, a disease for which there are no funded options for treatment in Australia. KeyPAD is a phase II trial in metastatic clear cell renal carcinoma which has progressed on sunitinib or pazopanib, to test the combination of the PD-1 inhibitor, pembrolizumab with denosumab.

Nivolumab gained PBS approval for kidney cancer at the beginning of August which is fantastic news for patients. It is funded for clear cell renal cell carcinoma which has progressed on pazopanib or sunitinib. However, despite being well tolerated, there are many patients who do not respond to this treatment. Future treatments are likely to involve various combinations of immune stimulating agents and other targeted therapies.

The subcommittee continues to plan clinical trials involving novel drug combinations to improve the number of patients who respond to therapy. We are also trying to establish the optimal sequence in which to use the multiple agents we now have available to treat kidney cancer.

I’d like to thank all members for their ongoing contribution and inviting anyone interested to join the Renal Cell Subcommittee.

DAVID POOK
Deputy Chair RCC Subcommittee
Activity in the Prostate Subcommittee continues at a great rate with tremendous work in clinical trial accrual and development.

The highlight in the past quarter has been the successful completion of accrual of ENZAMET. A truly collaborative effort, the study closed with 1,125 participants in March 2017, having gone from a discussion between a few interested parties to a fully accrued international study in less than four and a half years. Thanks go out to the trial management group, the team at CTC, our international collaborators, and the patients involved for making this an outstanding success and highlighting ANZUP on the international stage. The countdown to the initial analysis has begun – hopefully we won’t have to wait long! We also encourage everyone to submit ideas for translational studies to address the large bioresource collected in parallel with clinical data.

ENZARAD now has over 550 of the planned 800 participants enrolled. Several EORTC sites are now open to complement our network throughout Ireland, UK, Australia and New Zealand, with Dana Farber Cancer Centre (Boston) thrown in for good measure. Current projections have this as another fully accrued international ANZUP study within a year. We thank sites for their ongoing commitment and also encourage proposals for research involving the tissue resource of the study.

Our other ANZUP-led multicentre randomised trial, the Pain-Free TRUS-B study, is now progressing steadily, with 110 men randomised to date (of 420). This trial will determine whether the addition of inhaled methoxyflurane to local anaesthesia improves the pain, discomfort and experience of TRUS biopsy. We still have a way to go with the study, and we are constantly looking to support sites to maximise recruitment to this important study.

In a major media event at the ASM in Melbourne recently, we announced a multicentre trial of Lutetium-177 PSMA radionuclide therapy in men with advanced prostate cancer, co-badged with ARTnet. This was based on an exciting concept which was the inaugural recipient of the ANZUP-PCFA Partnership Grant at the Concept Development Workshop in 2016. Now with industry support from ABX and ANSTO, we have developed a randomised trial to assess the impact of LuPSMA in men being considered for Cabazitaxel chemotherapy following progression after first-line chemotherapy. The study has an accrual target of 200 men, and has now passed through central ethics review. We look forward to having it open in two centres by the end of this year, soon followed by several more early next year. It is exciting to see another “home-grown” and potentially high impact clinical trial come to fruition within the group.

The proPSMA trial is the randomised trial of first-line 67Ga-PSMA imaging compared to conventional CT and bone scan imaging, led by ARTnet and co-badged with ANZUP. This study is now open at two centres with another eight soon to activate. So far, 41 of 200 patients have been enrolled and we continue to actively promote the study through our members.

The other highlight recently was the running of another highly successful concept development workshop. A full day of active discussion was undertaken in Sydney in April, with 15 varied concepts discussed spanning a range of disciplines and disease states. Some proposals were mature enough to be suitable for application to the Below the Belt fund, while others were deemed ideal for development via the subcommittee. It is encouraging to see the strength of concepts and the processes we manage them with growing each year. It certainly looks very positive for the future of prostate cancer research in Australia and New Zealand.

As always, we encourage the proposal of new concepts through the subcommittee at any time, along with identification of opportunities for ANZUP to co-badge studies. As always, we remain open to new subcommittee members and welcome anyone with a prostate cancer interest to join and contribute.

SCOTT WILLIAMS
Chair, Prostate Cancer Subcommittee
The Translational Research Subcommittee, led by myself as Chair and Anthony Joshua as Deputy Chair, remains an active contributor to ANZUP.

This year’s ANZUP Annual Scientific Meeting featured the inaugural Translational Research Symposium. The Symposium was run across three sessions and featured 11 speakers led by Professor Peter Black, an internationally renowned urologist and scientist from University of British Columbia and Vancouver Prostate Centre. Peter gave two fantastic presentations on bladder cancer and it was enlightening for all to hear about the molecular and genomic sub-classification of this disease and, in particular, how it may facilitate personalised medicine strategies. We also had talks from a broad group of Australian-based researchers including Craig Gedye, Sharon Del Vecchio, Jennifer Gunter, Mitchell Lawrence, Niall Corcoran, Lisa Butler, Luke Selth, Elizabeth Williams, Renea Taylor and Peter Croucher. The presentations spanned a diverse range of topics including cancer genomics, cell and molecular biology, imaging, biomarkers, metabolism, bone biology and pre-clinical models. We had excellent feedback from those of you who attended and look forward to running this Symposium again next year. Thank you again to Peter and all our wonderful presenters. Many thanks also to my fellow Translational Research Symposium steering committee members Anthony Joshua, Ian Vela, Lisa Butler as well Carmel Pezaro and of course Marg McJannett and her team for all their efforts.

In regards to existing trials, biospecimen collection continues for several studies including P3BEP, ENZARAD and BCG-MMC. We are now also at the stage of beginning to plan experimental work with biospecimens from recently closed studies such as ENZAMET. We have fielded a broad range of proposals from investigators requesting access to samples from ENZAMET (+/- ENZARAD in some cases). The Translational Steering Committee for ENZAMET and ENZARAD is currently working through these proposals and will make decisions about how best to use these precious patient samples. We will also need to make strategic decisions about how to use these samples for grant submissions and, in particular, consider how recent changes to the NHRMC funding schemes might impact on us.

In terms of upcoming studies, the Keypad and Unison studies led by Craig Gedye will soon open and we will be in discussion about pursuing funding opportunities for the wide array of translational studies planned by the brilliant mind of Dr Gedye! We also have several other translational studies at earlier stages of development. These include a neoadjuvant trial led by Anthony Joshua that would be an ideal study for a multi-disciplinary cooperative group such as ANZUP to be involved with.

Lastly, please approach myself or Anthony Joshua if you have a translational research proposal that you would like to take forward either as part of a trial or a separate study.

A/PROF. ARUN AZAD
Chair Translational Research Subcommittee

Free ClinTrial Refer ANZUP App
The ClinTrial Refer ANZUP app provides a current list of clinical research trials conducted in cancer centres in Australia and New Zealand.
Designed for oncologists, general practitioners, research unit staff and patients, ClinTrial Refer ANZUP has searchable clinical research trial details, hospital locations and contacts, and inclusion and exclusion criteria.

Available for download from
The NHMRC funded Centre of Research Excellence (CRE) in Prostate Cancer Survivorship held its inaugural face-to-face meeting on 15 July as a lead-in to the 2017 ANZUP Annual Scientific Meeting. Chief Investigators (CI) and leading ANZUP members met to discuss progress and future research directions for each of the four themes: psychosocial and psychosexual health, exercise medicine, the economic costs of prostate cancer, and geographic inequalities in prostate cancer outcomes.

The centre published its first major piece of work in July 2017 in the Psycho-Oncology journal led by CI Professor Chambers and other CI and ANZUP leaders. This invited editorial reported a systematic review of psychological interventions for prostate cancer survivors and their partners, clinical and research implications (http://onlinelibrary.wiley.com/doi/10.1002/pon.4431/full). An expert commentary on this work was also published in this issue (http://onlinelibrary.wiley.com/doi/10.1002/pon.4461/full).

The Prostate Cancer Foundation of Australia led development of a website for the Centre and this is now live at http://prostatecancersurvivorship.org.au/, with accompanying social media sites on Twitter (@PCaSurvivorship) and Facebook (http://www.facebook.com/PCaSurvivorship).

For more information about the prostate cancer survivorship centre, please email enquiries@prostatecancersurvivorship.org.au.

Support needs of men with advanced prostate cancer

Qualitative research about the areas where men with advanced prostate cancer would like better support and how we can best deliver this support was completed in July 2017. We initially surveyed, via mail, 39 men with advanced disease about their support needs, and followed up 28 of these men with an in-depth telephone interview. Analysis of interview transcripts identified two over-arching themes: men’s lived experience of the disease and the elements of care that were critical for men to feel supported. Within these themes, men’s discussion of their lived experience of advanced disease focused on: regret about late diagnosis and treatment, being discounted in the health system, fear/uncertainty about the future, acceptance of their situation, being a man, and treatment effects. Regarding elements of care, men discussed: communication, care coordination, accessible care, shared experience/peer support, and involvement of their partner/family in their care. A manuscript reporting on these results is in progress. For more information about this research please email Dr Mel Hyde, melissa.hyde@griffith.edu.au.

MASH-PC

The Men and Sexual Health – Prostate Cancer (MASH-PC) Study is an international longitudinal survey that seeks to better understand the impact of prostate cancer and its treatment on men’s concerns about their sexual health, their decisions to seek support, and from whom they prefer to receive this support.

To date, 744 men have enrolled in the study from Australia, Ireland, New Zealand and Canada. So far, 441 of these men have completed the six-month follow up. The 12-month follow up has begun with 97 responses from men at this stage. For more information about this study, please visit www.menandprostatecancer.org or contact the Project Manager, Ms Kirstyn Laurie, on (07) 3634 5115 or email kirstynlaurie@cancerqld.org.au.

SUZANNE CHAMBERS
Chair, Quality of Life and Supportive Care Subcommittee
The CAP report at this time of the year is dominated by ANZUP’s informative and inclusive ASM and 2017 certainly didn’t disappoint. It is a special gathering for the CAP as it is our annual face-to-face meeting and allows us to meet with ANZUP members who we teleconference with for the rest of the year.

One special mention from this year’s ASM was the welcome appointment of Leonie Young as an official CAP member – not just an invited guest! Leonie has worked with the ANZUP CAP since 2012 and has been a fantastic supporter and mentor. This has helped us establish a dedicated group of enthusiastic volunteers able to participate across all of ANZUP’s research activities from a consumer perspective. We thank Leonie for her valuable contribution both past and in the future.

The Sunday of the ASM was very much our ‘CAP’ day where we spent the morning working up a CAP project in line with ANZUP’s strategic objective to increase and improve engagement with the community building on the ‘Friends of ANZUP’ initiative. We were very grateful to have Sarah Lowe and Haryana Dhillon to help coordinate the discussion.

We identified there are gaps in the availability of good patient information at the various stages in the cycle of a clinical trial from the recruitment of patients through to results being published often many years later. The CAP agreed we need to start right at the beginning of the trial cycle where there are still many negative preconceptions and myths. We need to continue to educate the community about the many positive aspects of being able to participate in a clinical trial. As the saying goes: “think treatment think trials”.

We are excited at the progress made during the morning and while there is still much to do, the project is being scoped out properly with a progressive plan to be put in place.

The Sunday afternoon was all about the Community Engagement Forum. The ANZUP team work really hard to promote this event through various media and social networks. It’s a valuable opportunity to showcase what ANZUP does and to continue to build on the Friends of ANZUP network within the community.

We would like to thank the panel who gave up their time to prepare and participate at this forum. A highlight was David Pook’s patient Donald Lorimer who gave an informative personal story about his treatment, his participation on a clinical trial and the effect that cancer has had on his life. It was a great example of the benefits of a trial and we thank David for encouraging his patient to share with us.

The attendees all went home with the latest edition of the consumer magazine: ‘A little below the belt’. It is now distributed to more than 400 cancer centres around Australia and New Zealand. Please contact the ANZUP team if you are interested in making this available to your patients.

In recent months the CAP was able to participate in reviews for Patient Information and Consent Forms (PICF), KeyPAD, UNISON and Lutetium PSMA (TheraP) trials. The CAP also took part in review panels for the Tolmar Fellowship, BTB Research Fund and the ANZUP Nursing & Allied Health Award.

The CAP was really pleased to see two kidney cancer trials come through for review as they will offer much needed treatment options for this group of patients by the end of 2017.

For the year ahead the CAP’s focus outside of reviewing ANZUP’s research will be on increasing engagement through the Friends of ANZUP and the broader community. We will keep you up to date on progress being made.

We are committed to growing our community audience and educating patients and their families on the importance of clinical trial research to prompt them to consider if there’s a clinical trial that’s right for them.

We are looking forward to what’s ahead as ANZUP continues to build upon its clinical trials research activities.

BELINDA JAGO
Chair, Consumer Advisory Panel
Bladder CDW
21 April 2017

The Bladder Concept Development workshop was held in Sydney with 22 people attending from eight disciplines to provide thought-provoking, multidisciplinary expert discussion on both the scientific merit and the practicalities of the proposals.

Although concepts can be brought to the Bladder Cancer Subcommittee at any time, the workshops are an increasingly important part of ANZUP’s core business and most new concepts are discussed at one in the first instance. The invaluable feedback enables research to be further developed into high quality, innovative proposals. In fact, two concepts from the 2016 workshop were successful in receiving Below the Belt funding this year.

Six proposals were presented at the workshop, including two concepts to establish registries to better inform practice.

2017 proposals:

- Registry-based Randomised Clinical Trials comparing Standards of Care (RedSoCs) (Ben Tran)
- Upper Tract Urothelial Cancer Registry (Shomik Sengupta)
- A diagnostic test to improve the early detection of recurrent bladder cancer: Does Cxbladder predict outcomes in patients undergoing intravesical therapy for high-risk non-muscle-invasive bladder cancer? (Steve McCombie)
- Three therapy based concepts including two with international collaborators:
  - A Phase II study of intermittent PD1 therapy for metastatic urothelial cancer (Andrew Weickhardt)
  - BL-13 Follow up to BL-12 (Ben Tran)
  - ANZUP/CCTG collaboration – SCOPE 2nd line sequential vs. combined NAB Paclitaxel and Atezolizumab – SCAMPI 1st line Sequential vs Combined NAB Paclitaxel and Atezolizumab for platinum ineligible patients (Ben Tran)

We hope to see at least one or two progress to well-developed proposals in the coming year.

ANNE WOOLLETT
ANZUP Clinical Trials Project Manager

Germ Cell CDW
10 May 2017

The 2017 Germ Cell Concept Development Workshop was attended by a focused group of multidisciplinary members including medical oncologists, psychologists, statisticians and clinical trial operation experts.

James Lynam led the discussion on how we can develop a tool to help patients decide between treatment options for stage 1 testicular cancer. Peter Grimison followed with a review of the highly successful surveillance recommendations for stage 1 testicular cancer, and plans to develop similar recommendations for advanced testicular cancer after chemotherapy. ANZUP fellow Namrata Nagar will lead its evaluation.

The GAP5 Translational Project is an international collaboration supported by Movember looking to establish a secure platform for identifying, collecting and analysing clinical and biospecimens and data to answer clinical questions. Ben Tran will be the ANZUP lead for this project in Australia, which we hope to contribute to in the coming months. The link between registries and clinical trials allows rapid translation of research into practice. Ben Tran presented the Australian Electronic Germ Cell Tumour Database which will facilitate registry-based trials and potentially centralise testis cancer management.

Ben Smith presented eTC 2.0, which is an online psychological intervention for testicular cancer survivors. This was developed through previous workshops and showcased as an example of the concept development process.

The day concluded with an ideas generating brainstorming session with everyone contributing to the discussion, highlighting the truly collaborative nature of the ANZUP Germ Cell Subcommittee members.

ANNE WOOLLETT
ANZUP Clinical Trials Project Manager
2017 ANZUP Prostate Cancer Seminal Advances Preceptorship

More than 30 applications have been accepted for the 2017 ANZUP Prostate Cancer Seminal Advances Preceptorship in collaboration with Monash Institute for Health and Clinical Education (MIHCE).

Convenor Professor Eva Segelov and Preceptors Arun Azad, Howard Gurney, George Hruby, Jarad Martin, Declan Murphy and Henry Woo will lead the 1.5 day workshop for trainees and junior specialists in medical, radiation and surgical oncology at the Novotel Melbourne Glen Waverley on 3 and 4 November.

Areas to be covered include screening, multi-modality management of early, locally advanced and metastatic disease and supportive care.

Feedback from the 2016 Preceptorship

“It was an excellent two days and I couldn’t recommend it more.”

“Extremely well organised and I gained a lot... Great to see how enthusiastic the preceptors were!”

“Absolutely loved it and will recommend it to my colleagues until the cows come home!”

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tue 19 Sep</td>
<td>ANZUP Below the Belt Pedalthon, Sydney</td>
<td><a href="http://www.belowthebelt.org.au">www.belowthebelt.org.au</a></td>
<td></td>
</tr>
<tr>
<td>Wed 4 – Fri 6 Oct</td>
<td>AGITG ASM, Cairns</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fri 13 – Sat 14 Oct</td>
<td>ASSG Annual Conference, Adelaide</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thu 19 – Sun 22 Oct</td>
<td>RANZCR ASM, Perth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fri 3 – Sat 4 Nov</td>
<td>ANZUP Prostate Cancer Seminal Advances Preceptorship, Melbourne</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wed 8 Nov</td>
<td>ANZUP Best of GU, Sydney</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mon 13 – Wed 15 Nov</td>
<td>COSA ASM, Sydney</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fri 17 – Sun 19 Nov</td>
<td>ESMO Asia 2017, Singapore</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Best of GU Oncology Evening Symposium

The Best of GU Evening Symposium will feature highlights from the 2017 ASM representing cutting edge research and treatment in prostate and urogenital cancer.

**Date:**
Wednesday 8 November 2017

**Venue:**
L’Aqua, Terrace Room,
Top Level, Cockle Bay Wharf
Darling Park, Sydney

**Time:**
6.30pm – 10.30pm

**Symposium Chair:**
Professor Henry Woo

For more information and to register visit www.anzup.org.au
How the ANZUP CAP can help you with research ideas

In May 2016 the Consumer Advisory Panel was asked to review a letter authored by Carmel Pezaro along with two Swedish colleagues in response to an article published in the Journal of Clinical Oncology.

The CAP’s comments were sought around use of the term “castrate resistant” prostate cancer. It was considered to be a very harsh and negative term and the suggestion was for a change in terminology to “gonadal suppression”. The CAP wholly supported the response put forward with two CAP members who have been affected by prostate cancer particularly abhorred with the use of the term “castration” and its negative connotations. The CAP was able to offer some other suggestions about the wording used in the letter and thank Carmel and her co-authors as noting the ANZUP CAP in the authorship.

The CAP was pleased to be advised that the letter was accepted for publication on the Annals of Oncology website in early August 2017.

Terminology used in patient care often needs to be different to the technical jargon used by medical professionals when speaking with each other – a fact you all know. However, being asked to formally respond to letters like this really highlights how the use of negative terminology can make a patient feel. It is not simply about being understood.

The ANZUP CAP is always willing and available to assist ANZUP members with their research from a consumer point of view through the ANZUP team.

BELINDA JAGO
CAP Chair

Landmark report reveals economic benefits of trials

A new report released by the Australian Commission on Safety and Quality in Health Care (ACSCHC) and the Australian Clinical Trials Alliance (ACTA) has found the cost of clinical trials is outweighed almost six to one by savings in both patient health improvements and the health system.

The report, which analysed 25 Australian clinical trials initiated by clinicians, found that if the results were implemented in just two-thirds of the relevant groups of patients for one year, $1.4 billion would be saved through improvements in patient health outcomes, and a further $580 million in reductions in health costs.

The savings are equivalent to a benefit-to-cost ratio of 5.8:1 – meaning that for each $1 invested in clinician-driven trials in Australia, benefits of $5.80 can be realised.

This is the first time the consolidated economic impact of trials conducted by dedicated clinical trials networks in Australia has been evaluated. The report finds that not only was there an overall saving of $2 billion, but also that results from the 25 trials only needed to be implemented in 11% of the eligible patient populations for benefits to exceed costs.
ASCO Annual Meeting, 2-6 June, Chicago

The first week of June saw attendees from around the globe gather in Chicago for the 2017 ASCO Annual Meeting. Adopting an inclusive theme of “Making a Difference in Cancer Care With You”, this year’s meeting saw the convergence of clinicians, scientists, industry and patients alike to explore latest developments in the field – from practice-changing clinical trials to evolving approaches of personalised medicine in routine clinical care.

The diverse programme offered opportunities to personally engage with latest research across all tumour types. Poster sessions and discussions offered unique insights from both junior and senior investigators. Well-attended oral abstract and plenary sessions highlighted particularly notable and practice-informing research. Scientific symposia and education sessions also made for a very busy few days.

It was certainly a big year for GU oncology, in part due to the presentation and concurrent publication of the LATITUDE and STAMPEDE-abi studies, which investigated the role of abiraterone acetate in high-risk/metastatic hormone sensitive prostate cancer. These studies showed a significant benefit for abiraterone in addition to androgen deprivation therapy in this particular patient group. In addition, we saw presentation of notable studies in prostate, bladder and kidney cancer – in particular highlighting the benefit of immunotherapy. Trials in Progress poster sessions saw presentation of the ANZUP-sponsored ENZARAD and P3BEP trials, among a slew of other interesting posters including a genomic comparison of primary and metastatic germ cell tumours.

The ASCO Annual Meeting remains a key meeting for networking and collaboration with colleagues from Australia, New Zealand and around the world. It allows us to discuss ideas for future collaborative studies, building on ANZUP’s strong track record for completed and ongoing clinical studies in GU cancers, with the aim of refining care and ultimately improving patient outcomes.

We also took the opportunity of having investigators together at ASCO to hold an International Trial Steering Committee (ITSC) meeting for the ENZAMET and ENZARAD trials. This was very timely, with the recent completion of recruitment to ENZAMET and the imminent entry of EORTC sites for recruitment to ENZARAD. Data presented at ASCO for the STAMPEDE and LATITUDE studies also were relevant for considerations about ENZAMET, and the ITSC agreed that additional interim analyses should be added in case a positive signal might be able to be detected earlier. The ITSC also discussed ENZARAD recruitment logistics, future amendments, and translational issues relating to both studies.

Upcoming meetings include the ESMO Congress (September 2017) in Madrid, Spain and ASCO GU Cancers Symposium (January 2018) in San Francisco, USA which will see presentation of exciting novel research in the ever-evolving field.

DR ANIS HAMID
GU Oncology Research Fellow,
Dana-Farber Cancer Institute
Trial milestones

PCR MIB recruits first patients

The first four patients for the PCR MIB study were registered in July and August (at the Chris O’Brien Lifehouse and the Austin Hospital). This study aims to enrol 30 patients with maximally resected (via transurethral resection (TURBT) non-metastatic muscle invasive bladder preservation therapy or those who are ineligible for cystectomy. Patients must have adequate organ function and performance status to receive cisplatin based chemoradiotherapy, and no contraindications to the use of pembrolizumab.

Launch of KeyPAD, UNISoN and TheraP

Work is continuing to progress the protocol and ethics submissions for KeyPAD (Kidney Cancer Pembrolizumab and Denosumab), UNISoN (Nivolumab, then Combination Ipilimumab + Nivolumab in Metastatic or Unresectable Non-Clear Cell Renal Cell Carcinoma) and Lutetium PSMA (TheraP) trials with the first sites for these trials expected to be initiated in October.

New members see the benefit of ANZUP

ANZUP’s membership continues to grow with more than 80 new members joining since 31 March 2017 bringing our multidisciplinary, international network to 1,233. Membership provides opportunities to contribute to the development of ANZUP, support investigator-initiated studies, mentor young investigators, access educational resources and workshops and apply for grants and scholarships. Membership is free and does not need to be renewed annually. To apply, visit www.anzup.org.au.

Hello and goodbye

Leonie Young

Clinical trials advocate Leonie Young was welcomed as an official member of the ANZUP Community Advisory Panel (CAP) at this year’s ASM. As Chair of the Australia and New Zealand Breast Cancer Trials Group CAP, Leonie has supported the ANZUP CAP since 2012. Leonie has provided invaluable mentorship as ANZUP has worked to establish the CAP over the past 5 years. We are delighted to formally welcome her onto the ANZUP CAP.

Michelle Bowers

Michelle joined ANZUP in July replacing Nina Olle. Michelle has a strong communications, publications and copywriting background with 17 years’ experience in the private and public sectors. In her most recent role as Manager Corporate Communications at Fire & Rescue NSW, she was responsible for internal communications for more than 7,000 firefighters and admin staff. Her role included managing communications on behalf of the Commissioner, producing a quarterly internal magazine, strategic brand and reputation management and overseeing the organisation’s intranet, website and broadcast capabilities.

Nina Olle

ANZUP sadly said goodbye to Internal Communications and Project Manager Nina Olle in June. Nina made a considerable contribution to the planning and preparation for the 2017 ASM (which she also attended) and the management of ANZUP publications (including UPdate and the 2016/17 Annual Report), website and media. We thank Nina and wish her all the best as she spends more time with her young family.
ANZUP ANNUAL SCIENTIFIC MEETING
8-10 JULY 2018
HYATT REGENCY SYDNEY

2018 ASM
CELEBRATING ANZUP’S 10 YEAR ANNIVERSARY