The Sylvia and Charles Viertel Charitable Foundation was established in 1992, following the passing of Mr Charles Viertel, prominent Queensland investor and philanthropist.

In 2004, the Foundation made a significant and ongoing commitment to Cancer Council Queensland in support of the Viertel Centre for Research in Cancer Control.

Cancer Council Queensland gratefully acknowledges the generous support of the Sylvia and Charles Viertel Charitable Foundation and its Chairman, Mr George Curphey OAM.
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Over the past seven years, we have invested more than $20 million in Viertel Centre projects, establishing the Viertel Centre as one of few research institutions in Queensland and Australia to conduct collaborative research and translate findings into outcomes that can be fully integrated with cancer services. Indeed, Cancer Council Queensland’s total funding contribution to research in Queensland since our founding in 1961 is well beyond $100 million, a contribution no other community organisations can match.

The Viertel Centre is fundamental to understanding the cancer burden in our State and for planning the delivery of comprehensive and integrated cancer services, investigating the myriad of factors that influence survival outcomes. And the need has never been so great, with many more Queenslanders diagnosed each year. While it is reassuring that cancer survival rates have also increased (in relative terms, by more than 30 per cent over the past twenty years), we still have more work to do. With continuing research, awareness and support, we can be confidently optimistic that it is only a matter of time before cancer is beaten.

In 2011, the Viertel Centre published the first Atlas of Cancer in Queensland, a historic milestone for cancer control. The Atlas is significant for its contribution to our understanding of how cancer incidence and survival affects Queenslanders differently depending on where a person lives. It showcases how far we have come and provides an inspiring reminder that we have more work to do.

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On behalf of the Viertel Centre’s Executive Committee, I extend my thanks to the Sylvia and Charles Viertel Charitable Foundation and its Chairman, Mr George Curphey OAM, for their ongoing support of the work of the Viertel Centre.

I also acknowledge and thank the staff of the Viertel Centre for their persistent dedication to excellence in research.

I commend this report to you and thank you for being a part of our vision for a cancer free Queensland.

Professor Jeff Dunn
Research highlights from 2011

- In 2011, the National Health and Medical Research Council (NHMRC) recognised the importance of our work by granting over $700,000 in project funding for the project ‘A Randomised Controlled Trial of a Mindfulness Intervention for Men with Advanced Prostate Cancer’. This project follows on from a pilot study in 2009, and will trial a remotely delivered mindfulness-based cognitive therapy (MBCT) program for men with advanced prostate cancer.

- VCRCC researchers were awarded a grant of over $580,000 from Cancer Australia in 2011 for the project ‘The effects of stigma and nihilistic views on lung cancer outcomes’.

- The leader of the Community and Applied Psycho-Oncology Research program, Professor Suzanne Chambers, was named the 2011 Winner of Clinical Research Award in the Australian Society for Medical Research (Qld) Health and Medical Research Awards.

- The VCRCC published over 60 peer-reviewed scientific manuscripts in 2011, a 70% increase over 2010.

- In February 2011 the Cancer Council Queensland released the report Atlas of Cancer in Queensland: Geographical variation in incidence and survival 1998 to 2007. The Atlas provided the first comprehensive picture of how cancer incidence and survival varied across the 478 statistical local areas in Queensland, and was based on data collected by the Queensland Cancer Registry (QCR).

- We have continued to develop the clinical database for colorectal cancers diagnosed in Queensland since 1996, with more than 30,000 colorectal cancers with stage information now coded. This database provides us with a unique opportunity to explore differentials in survival outcomes for colorectal cancer patients in Queensland.

- Work continued on the Breast Cancer Outcomes Study investigating inequalities in clinical and psychosocial outcomes for women newly diagnosed with breast cancer. To date over 1,000 women have consented to participate and 800 have completed their initial telephone interviews. Additionally we have begun collecting blood samples for the joint VCRCC/Griffith University Health Institute BioBank.

- Our work in melanoma continued with findings from a large study indicating that those with higher levels of education were significantly more likely to have had a skin examination by a doctor and were less likely to be diagnosed with more advanced melanoma.

- VCRCC research staff, as part of a NHMRC-funded Centre of Research Excellence in Sun and Health (CRESH) with Queensland University of Technology, Queensland Institute of Medical Research and Australian National University, continued work on examining the adverse and beneficial effects of sun exposure. This research will inform the development of future public health guidelines to optimise the health of the Australian community.

- Our ongoing ProsCan program continued to follow up over 1000 men with prostate cancer to examine patterns of care for these patients. Recent results demonstrate that there are systematic differences in men’s prostate cancer management both for diagnosis and treatment. These differences are not only related to clinical criteria but also access to private hospital care, suggesting that there are inequities in health care service provision that are system based.

- Work began on the ProsCan for Life project, which is trialling a new telephone and internet based supportive care intervention for men diagnosed with localised prostate cancer. Importantly the intervention combines peer support with symptom management and a home-based exercise component to improve overall wellness.
Research Australia Awards 2011

Research Australia is a national not-for-profit alliance of companies and organisations, including leading research and academic institutions, philanthropic organisations, community special interest groups, peak industry bodies, biotechnology and pharmaceutical companies, and small and large businesses that are committed to making health research a higher national priority. With 170 member and supporter organisations, Research Australia’s goal is to raise the profile of health and medical research in Australia.

Each year, Research Australia sponsors the Research Australia Awards recognising achievement in Australia’s health and medical research sector. In 2011, the Sylvia and Charles Viertel Charitable Foundation was awarded Research Australia’s prestigious Great Australian Philanthropy Award for its outstanding contribution and support of medical research in Australia.

The award was accepted on behalf of the Foundation by its Chairman, Mr George Curphey OAM, at a well-attended dinner and award ceremony at the National Gallery of Victoria on November 16.

Mr Curphey addressed more than 160 guests including Research Australia CEO Elizabeth Foley, Victorian Minister for Innovation, Services & Small Business, Hon. Louise Asher MP, former Federal Minister for Health and Ageing Dr Michael Wooldridge, the Deputy Chair of Research Australia, Mr Peter Wills AC, Nobel Laureate Professor Peter Doherty and top ranking representatives of Australia’s scientific, academic and business community.

Following are extracts of the award nomination:

The Sylvia and Charles Viertel Charitable Foundation was established in 1992 following the passing of Mr Charles Viertel, prominent Queensland investor and philanthropist. Mr Viertel’s wish, through the Foundation, was to support medical research, to improve the health of the community and to contribute to the alleviation of hardship among the aged. Mr Viertel directed that funds be given to charities with low administrative expenses.

The Foundation was established with an initial bequest of approximately $60,000,000 and is today one of the largest charitable foundations in Australia. Through the Foundation’s grant programs, almost $9,000,000 is given each year to charitable causes in Australia.

The Sylvia and Charles Viertel Charitable Foundation has provided vital funding for Cancer Council Queensland programs since 1998. This has included $600,000 for the pilot phase of a Melanoma Screening Trial that began in 1998 and was completed successfully in 2001. During this time, over 16,000 people were screened for melanoma and the rate of diagnosis of early curable melanoma more than doubled in the communities receiving the program. This work received national and international recognition.

In 2003, the Foundation provided significant funding of $10,000,000 for the ten-year period 2004 to 2014 to establish and support the Cancer Council Queensland’s Viertel Centre for Research in Cancer Control. With the Foundation’s support, the Viertel Centre has become a leading centre of epidemiologic and psycho-oncological research in cancer in Queensland. It is one of the few research institutions in Australia with the capacity to conduct collaborative research and then to translate the findings directly into improved cancer services for the benefit of the community.

Through the Sylvia and Charles Viertel Charitable Foundation, the legacy of Mr Charles Viertel lives on, supporting community-based charities, funding innovative medical research, and, above all, improving the lives of ordinary people. The Foundation is something of which Mr Viertel would have been justly proud.
Descriptive Epidemiology Research Program

In February 2011 the Cancer Council Queensland released its landmark report *Atlas of Cancer in Queensland: Geographical variation in incidence and survival 1998 to 2007* to coincide with its 50th Anniversary celebrations. The Atlas provides a comprehensive picture of how cancer incidence and survival vary across the 478 statistical local areas in Queensland, and is based on data collected by the Queensland Cancer Registry (QCR). The report makes an important contribution to our understanding of how cancer incidence and survival varies in Queensland depending on where you live. The Atlas highlights the substantial inequalities that exist for cancer patients in regional and disadvantaged parts of Queensland, and provides a key tool for reducing these variations to achieve equal survival rates for all Queenslanders. The Atlas underpins a large body of research aimed at better understanding the reasons for these disparities.
Consistent with the scope of the Cancer Atlas, a key research priority for the VCRCC has been to examine the geographical inequalities in cancer outcomes across Queensland, and nationally. Some of the key findings published from this work include:

- Survival is lower for rectal cancer patients who live further away from radiotherapy facilities.

- A woman’s risk of being diagnosed with advanced breast cancer depends on where she lives, separate from the individual characteristics of the woman herself.

- Survival outcomes for women diagnosed with breast cancer are better for those living in the most affluent areas.

- Cancer incidence is generally higher in more urbanised areas.

- A person’s risk of being diagnosed with advanced colorectal cancer is greater in regional areas of Queensland compared to people in south east Queensland.

- The use of diagnostic and treatment services among men living in rural areas of Australia remains lower than among their urban counterparts, survival outcomes are poorer, and these differentials are continuing.

- Children diagnosed with cancer while living in more regional and remote areas of Australia have lower survival than children living in major cities.

VCRCC research staff published a paper in the Medical Journal of Australia titled “When do I know I am cured? Using conditional estimates to provide better information about cancer survival prospects”. Estimates of conditional survival are important for cancer clinicians, patients and their carers as it helps to answer the question “Now that I have survived for x number of years, what is the probability that I will survive another y number of years?” We found that the prognosis for patients with cancer improves with each additional year that they survive and this is most apparent for those surviving stomach, colorectal, cervical and thyroid cancer and melanoma. This paper generated significant interest in the medical and general community including an article in the Australian Financial Review and an interview on the ABC’s Health Report.
Our work in skin cancer and particularly in melanoma, the most serious form of skin cancer continued in 2011. Utilising our large databases of melanoma patients and information from the Queensland Cancer Registry we examined survival from melanoma, and how socio-economic status impacts on risk of being diagnosed with more advanced melanoma, and we collaborated on the discovery of genes likely to be important in predisposition to melanoma. Our findings included:

- The outlook for people in Queensland who are diagnosed with thin invasive melanoma is positive although continued clinical vigilance is warranted for patients with nodular melanoma and those with the thickest tumours.

- Those diagnosed with more advanced melanoma are more likely to have lower educational attainment and less likely to have undergone a whole-body skin examination by their doctor prior to be diagnosed with melanoma. These findings help to inform the development of targeted interventions to those population groups at higher risk.

- The discovery of a number of genes that play a role in melanoma susceptibility, and better understanding of the relationship between some susceptibility genes and skin and eye colour.
Breast Cancer

Our atlas on cancer incidence and survival identified significant disparities in survival from breast cancer in Queensland with women in rural and regional areas having significantly worse survival after breast cancer compared to the average for Queensland. With funding from Cancer Australia, the Breast Cancer Outcomes Study represents the largest study undertaken that is specifically designed to identify the factors that influence survival and inequalities in psycho-social outcomes. Pilot work was completed in 2010 and the full 5-year study began in 2011.

- To date over 1,000 women have joined the study. Over 800 completed their first interviews in 2011 of whom 45% live in regional, rural or remote areas.

- The average age when first diagnosed is 59 years. Over half of the study participants have told us their breast cancer was diagnosed through a mammogram, while 44% first detected a lump in their breast.

- In a sub-sample of study participants we will be examining how chemotherapy impacts on cognitive impairment, including memory, executive brain functions, and information processing speed. Findings in this sub-study will inform the development of self-management materials to assist women who experience these often-reported side effects.

- In 2011 we formalised the processes and procedures to collect blood samples for the newly established joint VCRCC-Griffith Health Institute Biobank. The Biobank will provide a unique opportunity to better understand the role that genetics play in breast cancer outcomes.
In 2011 we continued our vital work in prostate cancer, a cancer that affects more than 20,000 men in Australia each year.

The Prostate Cancer Supportive Care and Patient Outcomes Study (ProsCan) is examining the patterns of care for men diagnosed with prostate cancer in Queensland, and evaluating the effectiveness of a new supportive care intervention. All participants are at least 3 years post-treatment, with the first of the cohort reaching 6-years post-treatment mid-2011 and follow-up of participants will now continue for up to 10 years post-treatment.

Analysis of data collected from the supportive care intervention trial has shown that younger men experience more difficulties over time than older men; and that younger men with higher levels of education particularly benefited from the intervention in terms of cancer-specific distress and mental health.

The ProsCan for Couples study is trialling a sexuality intervention for men who received surgery for prostate cancer and their partners, comparing peer and nurse support. Pilot and focus group data from the study has recently been published, examining both the adjustment outcomes of couples and the peers’ experiences in delivering the intervention. Early key findings indicate that:

- Distress in couples decreased over time but more so for partners.
- Peers were motivated to become involved in the project by altruism and a belief in research, and reported personal growth from their experience:
  
  “I was looking at it as me being a guide to those who have problems or a lack of knowledge and being able to steer them towards an area where they could gain the information.”

  “There’s three things you learn out of this; one is that you become more compassionate, you gain wisdom and you gain insight.”

  - Peers found working within research protocols and the focus on sexuality and couples challenging at times, but overall felt it was a positive experience.
  - Peer support appears promising as a model to support couples facing prostate cancer. Results from the main study will identify the longer-term outcomes of couples who receive this support.

In 2011 work began on our new NHMRC-funded ProsCan for Life study. The study is a randomised controlled trial of a supportive care intervention for men with localised prostate cancer. The intervention involves self-management resources (both print and web-based) and tele-based group peer support to target unmet supportive care needs and improve overall wellbeing in men recently diagnosed with prostate cancer in Queensland. This will be compared with usual care i.e. currently available resource and support materials. The project aims to recruit 580 men, with 290 men in each arm. Development of the project was completed in 2011, and recruitment of participants commenced in late 2011. Recruitment and intervention delivery will continue throughout 2012.
Developing support services for the families of men with prostate cancer

Men with a family history of prostate cancer are at increased risk of developing prostate cancer and, unlike numerous other cancers, having a family history of prostate cancer does not change the cancer screening guidelines for these men. We are examining the preventive health behaviours of men with a family history of prostate cancer and how men make decisions about their preventive health behaviours. The information obtained from this study will inform the development of information and supportive care programs to address the specific needs of men with a family history of prostate cancer.

Lung cancer research

Lung cancer is the 5th most common cancer in Australia and is the most common cause of cancer-related death. It has been suggested that attitudes to lung cancer may play a role in poor outcomes, and in this regard ‘stigma’ has been proposed as central to the experience of lung cancer. In 2011 the VCRCC in collaboration with Griffith University and Cancer Council NSW were awarded a grant from Cancer Australia to investigate the effects of stigma and nihilism in outcomes from lung cancer. The aim of this study is to build an accessible evidence base on the effects of stigma and nihilistic views on outcomes in lung cancer in Australia. During the study we will be conducting in-depth interviews and a national online survey with health professionals who manage lung cancer patients. We will additionally seek the perspective of lung cancer patients and their carers as well as collecting more detailed clinical and psychosocial data. Key activities during 2011 included:

- The completion and submission of a systematic literature review on the current evidence relating to stigma and nihilism on lung cancer outcomes.
- Commencing a series of qualitative interviews with health professionals from a variety of disciplines to seek their perspectives on the effects of stigma and nihilism.

- In all, 419 brothers and sons of men participating in the ProsCan Program agreed to take part and preliminary results suggest that first-degree relatives have a greater desire for information about prostate cancer prevention, are more concerned about getting prostate cancer, and are tested more often than men without a family history. However, their information needs and motivations for testing are similar to those of all men.
Lifestyle and Cancer

CanChange: A lifestyle intervention for colorectal cancer survivors

There is a need to develop and trial interventions for colorectal cancer survivors with a focus on lifestyle factors as a significant number of colorectal cancer survivors are physically inactive, eat a poor diet and are overweight or obese post diagnosis, which negatively impacts on their cancer recovery, overall quality of life, risk of cancer recurrence and potentially their survival. CanChange is a randomised controlled trial investigating the effects of a telephone-delivered lifestyle intervention on lifestyle factors and health outcomes for recently diagnosed colorectal cancer survivors. A total of 410 colorectal cancer survivors have been recruited into the study. Preliminary analyses indicate:

- Intervention effects on physical activity, mental health, spirituality, post-traumatic growth, body mass index, and dietary (including overall energy intake as well as fat, sodium, fruit and vegetable intake) at six months follow-up

Supportive Care Research Program

Beating the Blues After Cancer

The Beating the Blues after Cancer (BBAC) project is a randomised controlled trial of two approaches to intervention (therapist delivered and self-management) that aim to improve the psychosocial mental health of people with cancer, their families and carers in the community. Importantly, BBAC will also provide information on the potential economic value of these interventions. This study is being conducted by Cancer Council Queensland in collaboration with Cancer Council New South Wales, and has been co-funded by Cancer Australia and beyondblue

- Recruitment for the project was completed in 2010 with 362 participants recruited from Queensland and 328 from NSW.
- Data collection for baseline, 3, 6, and 12 month assessments are now complete (12 month assessments were finalised in November 2011). An additional 24 month follow-up assessment is underway to examine psychosocial distress in cancer patients and their carers over the longer term.
- Analysis and reporting of baseline data found almost half patients and carers reported psychological distress and reached the clinical cut-off for depression, anxiety, or somatisation. Whereas patients reported greater unmet needs in relation to psychological domains, carers reported greater needs in the health service domain and for information related to the patient with cancer.

The outcomes of the BBAC study will provide an evidence-based and applied approach to psychosocial care for people with cancer and their carers.
Professional Research Activity in 2011

Peer-reviewed Publications

In 2011 we published 63 papers in peer-reviewed journals.

*Bolded names belong to VCRCC research staff.


Baade PD, Youlden DR, Chambers SK. How long have I got? Using conditional probability to provide more relevant information about cancer survival outcomes. Medical Journal of Australia 2011;194:73-77.


Chambers SK, Meng R, Youl P, Aitken J, Dunn J, Baade P. A Five Year Prospective Study of Quality of Life after Colorectal Cancer. Quality of Life Research 2011; 28 December [Epub ahead of print]


Chambers SK, Foley E, Galt E, Ferguson M, Clutton S. Mindfulness groups for men with advanced prostate cancer: a pilot study to assess feasibility and effectiveness and the role of peer support. Support Care Cancer 2011; 1 June [Epub ahead of print]

Chambers SK, Girgis A, Occhipinti S, Hutchison S, Turner J, Morris B, Dunn J. Psychological distress and unmet supportive care needs in prostate patients and carers who contact cancer helplines. Eur J Cancer Care (Engl) 2011; 8 September [Epub ahead of print]


Green A, **Baade P**, Coory M, **Aitken J**, Smithers M. Population-based 20-year survival among 26,736 people diagnosed with thin melanomas (≤1.00mm) in Queensland, Australia. Journal of Clinical Oncology (in press 8 December 2011)


Legg M, Occhipinti S, **Ferguson M**, **Dunn J**, **Chambers SK**. When peer support may be most beneficial: The relationship between upward comparison and perceived threat. Psycho-Oncology 2011; 20:1358-1362.


Morris BA, Chambers SK, Campbell M, Dwyer M, Dunn J. Motorcycles and breast cancer: The influence of peer support and challenge on distress and posttraumatic growth. Supportive Care in Cancer. 2011; October 9 [Epub ahead of print]


Descriptive reports produced by the VCRCC


Scientific Conferences

Chambers SK.
ANZUP: Mindfulness based intervention vs. standard care for prostate cancer patients. USANZ-ANZUP Melbourne Meeting. 5 August 2011, Melbourne.

Chambers SK.
Effectiveness and Feasibility of a Mindfulness Group Intervention for Men with Advanced Prostate Cancer: A Pilot Study. 12th Australasian Prostate Cancer Conference. 5 August 2011, Melbourne.

Chambers SK.

Chambers SK.
How do I know when I am cured? (Adjusting to a breast cancer diagnosis and finding the positive) Invited plenary, 16th Reach to Recovery International Breast Cancer Conference, 10 October 2011, Taiwan.

Chambers SK.

Chambers SK.
Life after Prostate Cancer, Invited Presentation, Sydney Adventist Hospital Prostate Cancer Support Meeting, 12 September 2011, Sydney.

Chambers SK.
Low Intensity psychological interventions for patients and their carers, Invited speaker, 46th Australian Psychological Society Annual Conference, 4 October 2011, Canberra.

Chambers SK.

Chambers SK.
Lung Cancer Stigma and Nihilism, Invited Symposium, Livestrong Foundation, 21 November 2011, Austin, USA.

Chambers SK.

Chambers SK.
Psychological experience of women diagnosed with breast cancer, Invited Plenary, 16th Reach to Recovery International Breast Cancer Conference, 11 October 2011, Taiwan.

Chambers SK.
Psycho-oncology and Clinical Practice, Invited Lecture, Griffith University Clinical Psychology Program, 13 September 2011, Gold Coast.

Chambers SK.
The Feasibility of Evaluating Peer Support Within a Controlled Research Design Invited presentation, Anderson Cancer Centre, 23 November 2011, Houston, USA.

Chambers SK.

Chambers SK.
Bayesian modelling of spatial variation in cancer outcomes in Queensland. CRC SI for Spatial Information workshop, 10 May 2011, Queensland University of Technology, Brisbane.

Chambers SK, Baade PD, Mengersen, KL.
Cramb SM, Baade PD, Mengersen, KL. 
Geographic disparities in breast cancer stage at diagnosis: a Bayesian spatio-temporal analysis. Bayes on the Beach, 6-7 October 2011, Surfers Paradise.

Cramb SM, Baade PD, Mengersen, KL. 

Cramb SM, Baade PD, Mengersen, KL. 

Cramb SM, Baade PD, Mengersen, KL. 

Dunn J. 
Closing Plenary Speaker. 16th Reach to Recovery International Breast Cancer Support Conference, 10-12 November 2011, Taiwan.

Dunn J. 
Evidence Based Peer Support, Concurrent Session speaker. 16th Reach to Recovery International Breast Cancer Support Conference, 10-12 November 2011, Taiwan.

Dunn J. 
Forum on the Effects of Stigma and Nihilism on Lung Cancer Outcomes, Invited Speaker. Cancer Australia 23 June, Melbourne, Australia

Dunn J. 
Models and Systems of Care Delivery, Session Moderator. IPOS 13th World Congress, 16-20 October 2011, Antalya, Turkey.

Dunn J. 
Treating the Whole Person, Co-Chair Plenary session. 16th Reach to Recovery International Breast Cancer Support Conference, 10-12 November 2011, Taiwan.

Gordon L, Hawkes AL, Patrao T. 

Hawkes A, Pakenham K, Bell S, Kelly B, Patrao T. 
Overcoming challenges in supporting health and wellbeing for cancer survivors – perspectives from the CanChange Health Coach. 34th Annual Oncology Nurses Conference, April 7-8 2011, Brisbane.

Hawkes A, Patrao T, Green A, Aitken J. 
Short-term effectiveness and acceptability of a telephone-delivered intervention for people at risk of colorectal cancer. Clinical Oncological Society of Australia (COSA) 38th Annual Scientific Meeting, 15-17 November 2011, Perth.

Hawkes AL, Oldenburg B, Patrao T, Atherton J, Taylor B. 

Hawkes AL, Pakenham K, Courneya K.S, Patrao T. 
A randomised controlled trial of the effects of a telephone-delivered program on health behaviours and quality of life for colorectal cancer survivors ('CanChange'). Clinical Oncological Society of Australia (COSA) 38th Annual Scientific Meeting, 15-17 November 2011, Perth.

O’Neil A, Hawkes AL, Chan B, Sanderson K, Oldenburg B. 
Improving psychosocial outcomes of cardiac patients: two real world implementation trials. Society Behavioural Medicine Annual Meeting. April 27 2011, Washington DC, USA.

White KM, Young R, Leske S, Hawkes AL. 

White KM, Young R, Leske S, Hawkes AL. 

Youl P. 

Youl P. 
Research planning, execution and outcomes. Griffith University. Invited Speaker. April 2011, Brisbane.
Youl P.
Skin cancer diagnosis in the primary care setting: a comparison study of skin cancer clinic doctors and mainstream general practitioners. Invited Presentation. 1 December 2011, Canberra.

Youl P.

Youlden D, Baade PD, Valery PC, Hassall T, Ward L, Green AC, Aitken JF.
Area-based differentials in childhood cancer incidence and survival in Australia. 43rd Congress of the International Society of Paediatric Oncology, October 2011, Auckland.

Youlden D, Baade PD, Valery PC, Hassall T, Ward L, Green AC, Aitken JF.
Childhood cancer statistics in Australia. Invited Speaker. 34th Annual Queensland Oncology Nurses Group Conference, April 2011, Brisbane.

Nationally Competitive Grants during 2011

Baade P, Turrell G, Aitken J. Determinants of area-level inequalities in colorectal cancer survival; a multilevel study. NHMRC Grant # 561700 (2009-2011: $374,500)

Baade P. Career development fellowship. NHMRC Grant # APP1005334 ($424,920: 2011-2014)

Chambers SK, Smith D, Berry M, Lepore S, Foley E, Occhipinti S, Frydenberg M, Gardiner RA. Advanced Prostate Cancer Project: A Randomised Controlled Trial of a Mindfulness Intervention for Men with Advanced Prostate Cancer. NHMRC Grant # 1024989 (2012-2014: $706,243)

Chambers SK, Baade, P, Youl, P, Aitken, J, Dunn, J, Garvey, G, Valerie, P, O’Connell, D. A project to build an accessible evidence base on the effects of stigma and nihilistic views on outcomes in lung cancer in Australia that can be used by policy makers, health professionals and cancer control agencies to inform the content of public health messages, clinical practice and supportive care guidelines. Cancer Australia (2011-2013: $588,112)


Steginga (Chambers) SK, Gardiner RA, Nicol D, Aitken J, Occhipinti S. Predicting and promoting long term adjustment for men with prostate cancer: ProsCan NHMRC Project Grant #442301 (2007-2011: $289,564)

Steginga (Chambers) SK. Population health career development awards: NHMRC Grant # 496003 ($370,000: 2009-2011)


Awards

Professor Suzanne Chambers 2011 Winner of Clinical Research Award in the Australian Society for Medical Research (Qld) Health and Medical Research Awards.

Additional service to research and the broader community during 2011

Cancer Council Australia
National Public Health Committee: Pip Youl
Conference Organising Committees

Oceania Tobacco Control Conference, Chair, Organising Committee 2010-2011: Suzanne Chambers

International Psycho-Oncology Society World Congress 2011-2012, Chair, Organising Committee: Jeff Dunn

International Psycho-Oncology Society World Congress 2011-2012, Deputy Chair, Organising Committee: Suzanne Chambers

Expert Advisory Committees

Abbot Patient Program Development Group
ANZUP Cancer Trials Group Limited Quality of Life Committee
ANZUP Cancer Trials Group Limited Scientific Advisory Committee
BreastScreen Queensland
Prostate Cancer Foundation of Australia Nurse Working Group
Union for International Cancer Control Strategic Advisory Panel

Professional Memberships

Andrology Australia
Australasian Brachytherapy Group
Australasian Epidemiological Association
Australian & New Zealand Urological Nurses Society
Australian Psychological Society
Australian Research Council
Cancer Nursing Society of Australia
Clinical Oncological Society of Australasia
International Psycho-Oncology Society
Lance Armstrong Foundation
Multinational Association of Supportive Care in Cancer Oncology Nurses Group
Psycho-Oncology Co-operative Research Group
Queensland Urological Nurses Society
Queensland Epidemiological Group
Union for International Cancer Control
Urological Society of Australia and New Zealand

Reviews for journals

Annals of Behavioural Medicine
Archives of Dermatological Research
Australian Family Physician
Australian New Zealand Journal Public Health
BioPsychoSocial Medicine
BMC Dermatology
BMC Cancer
BMC Family Practice
BMC Gastroenterology
BMC Public Health
British Journal of Cancer
British Journal of Dermatology
British Journal of Urology International
Canadian Medical Association Journal
Cancer
Cancer Causes Control
Clinical and Experimental Dermatology
Health Promotion Journal of Australia
Health Psychology
International Journal of Cancer
International Journal of Gynecological Cancer
Journal of European Academy of Dermatology Venereology
Journal of Health Psychology
Journal of Psychosomatic Research
Journal of Thoracic Oncology
Medical Journal of Australia
Pan American Journal of Public Health
Patient Education and Counselling
Preventive Medicine
Psychology Health and Medicine
Psycho-Oncology
Quality of Life Research
Respirology
Supportive Care in Cancer

Reviews for funding bodies

Australian Research Council: Suzanne Chambers
Icelander Center for Research: Jeff Dunn
National Health and Medical Research Council: Suzanne Chambers
The Prostate Cancer Charity, UK: Suzanne Chambers
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F: 07 3259 8480

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Shop 4, Credit Union Australia Plaza,
Cnr Maroochydore Road
& Baden Powell Street
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F: 07 3259 8470

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24 Warburton Street
North Ward Qld 4810
T: 07 4796 8400
F: 07 3259 8507

Toowoomba
137 Herries Street
Toowoomba Qld 4350
T: 07 4690 5800
F: 07 3259 8481

www.cancerqld.org.au