



Mercy Health

Care first

Research and Development Report **2014**



**Mercy Health gratefully acknowledges
funding support from all contributing
sources in 2014, including:**

Medical Research Foundation
for Women and Babies

Mercy Health Foundation

Federal and state governments

Academic, Research & Development Committee
Small Project Grants

National Health and Medical Research Council
(NHMRC)

Cover image: Dr Fiona Brownfoot, University of
Melbourne Department, Mercy Hospital for Women

ISSN: © Mercy Health 2015



Mercy Health

Care first

Contents

- 4 Message from Group Chief Executive and Chairman, Mercy Health**
- 5 Message from Chairman, Academic Research and Development Committee**
- 6 Health Services, Women's and Children's Services Program**
- 6** Urogynaecology Department, Mercy Hospital for Women
- 8** Profile: Assoc Prof Joseph Lee, Urogynaecology Department, Mercy Hospital for Women
- 10** Department of Endosurgery, Mercy Hospital for Women
- 10** Department of Paediatrics, Mercy Hospital for Women
- 12** Department of Gynaecological Oncology, Mercy Hospital for Women
- 14** University Department, Mercy Hospital for Women
- 20** Profile: Dr Fiona Brownfoot, University of Melbourne Department, Mercy Hospital for Women
- 22** Professor Emeritus Norman Albert Beischer AO
- 23 Health Services, Surgical and Specialist Services**
- 23** Department of Anaesthesia, Mercy Hospital for Women
- 24** Midwifery Professorial Unit/Professional Development & Research Unit (Nursing and Midwifery) Mercy Hospital for Women
- 26** Profile: Ms Kerri McEgan, Breastmilk Bank, Mercy Hospital for Women
- 28 Health Services, Medical, Subacute and Palliative Care Services**
- 28** Health Independence Program (HIP), Werribee Mercy Hospital
- 29** Mercy Palliative Care
- 30** Profile: Lucy Forrest, Mercy Palliative Care
- 32 Health Services, Ambulatory, Allied Health and Community Services Program**
- 32** Mercy Health O'Connell Family Centre
- 32** Mercy Health Lymphoedema Services
- 33** Multicultural Services, Mercy Hospital for Women
- 35 Health Services, Mental Health Services Program**
- 35** Perinatal Mental Health, Mercy Hospital for Women
- 36** Mercy Health, Human Research Ethics Committee
- 41** In print and online
- 48** Conferences and presentations



Caring first through innovation

Mercy Health is privileged to serve some of our community's most vulnerable members. From unborn babies to people facing end of life, our mission to care first for those in greatest need demands an unflagging focus on real world health outcomes.

Our research is firmly grounded in our mission of compassionate care, seeking to deliver the best in health, aged and community services for our community rather than focus on discovery for its own sake.

Yet we recognise, indeed celebrate, the value of passionate questing after new methods of prevention and treatment that respond to the most critical health challenges we face today. Our researchers, many of whom are clinician scientists witnessing daily the impact of some of those challenges, have continued to pursue innovations which have rich potential to transform local and global health. In laying the foundations for better health tomorrow, with a particular focus on women and babies, they are a source of great pride for Mercy Health today.

In recognising their myriad achievements we also warmly acknowledge the support of our government and private sector research partners, who share our commitment to advancing care.

Lastly we thank our community for their generous support of our research work. The many people who willingly and selflessly participate in studies that will benefit others are the bedrock of innovation.

Adjunct Professor Stephen Cornelissen
Group Chief Executive Officer



Message from the Chairman

Academic Research and Development Committee.

Welcome to the *Mercy Health Research and Development Report 2015*.

The past 12 months have again witnessed a diverse and highly productive research output across Mercy Health. This report highlights significant advances our teams have made in many areas. These include perinatal care, with strides made towards combatting preeclampsia, fetal growth restriction, preterm labour and other life-threatening perinatal conditions; paediatric care; ovarian cancer care; prolapse and incontinence, and anaesthesia among many others.

Our sociological research has also flourished with new ground broken in managing breastmilk donation after neonatal loss and in paediatric palliative care.

I wish to commend all of our researchers for their continued focus on innovation and excellence in caring for those we serve. Although growing, our research community is relatively

small, yet we consistently produce world class research in areas which demand but do not always receive adequate attention: namely those that seek to improve the lives of the most vulnerable in our society.

I wish to thank the many funding bodies who have made our research achievements possible.

I also wish to thank the Human Research Ethics Committee for their ongoing commitment to supporting our research. Particular thanks must be extended to Ms Geraldine Gray, Assoc Prof Michael McKay and Mr Kevin Fell who have left the committee in 2014 after many years of service.

Finally, I thank all who have contributed to this year's report, including my Executive Assistant Ms Vicky Karitinos.

Associate Professor David Allen

Chairman, Academic Research and Development Committee

Health Services, Women's and Children's Services Program

Urogynaecology Department

Mercy Hospital for Women

The Urogynaecology Department assesses and manages women with pelvic floor problems such as uterovaginal prolapse and urinary incontinence.

The department is also involved in research so we can better understand and manage these disorders.

In January 2014 Prof Peter Dwyer, Dr Kris Cvach and Dr Julio Alvarez were invited to Chennai India by the Urogynaecology & Reconstructive Pelvic Surgery Society of India to teach pelvic surgery and give lectures to Indian gynaecologists.

Research projects

MiniMo: MiniArc Monarc suburethral sling in women with stress urinary incontinence – a randomised controlled trial
Lee J (Principal Investigator), Lim Y, Dwyer P (Rosamilia A), Thomas E, Murray CJ

HUUT: Hysterectomy or Uphold Uterine Conservation in women with apical prolapse – a Comparative Trial
Lee J (Principal Investigator), Lim Y, Dwyer P, Kvach K, (Rosamilia A), Thomas E, Murray CJ

Female voiding: correlation of voiding symptoms with urodynamics voiding dysfunction in woman
Lee J (Principal Investigator), Murray L, Thomas E

Supra pubic catheter survey: use of suprapubic catheter usage amongst Australasian gynaecologists (in progress: ethics approval)
Lee J (Principal Investigator), Ow L

Use of ICIQ-VS questionnaire for prolapse surgery (evaluation of female sexual function after prolapse surgery)
Lee J (Principal Investigator), Dwyer P, Lim Y, Ulrich D

How Does Native Tissue (NT) Repair Compare to Transvaginal Mesh (TVM) Repair in Recurrent Prolapse?
Ow L, Lim Y, Murray C, Karmakar D, Thomas E, Rosamilia A, Dwyer P

Efficacy of cloripactin in bladder pain syndrome/interstitial cystitis: a randomised controlled trial
Cvach K (Principal Investigator), Dwyer P, Rosamilia A, Schierlitz L, Lim Y, De Souza A, Lee J, Chao F, Thomas E, Murray C, Leitch A (Associate researchers)

The effect of two test positions on the assessment of pelvic floor muscle function in women with pelvic organ prolapse undergoing surgery or not
Dwyer P, Frawley H (Principal Investigators), De Souza A, Homsy Jorge Ferreira C, Alvarez Ugarte J, Schierlitz L, Cvach K, Thomas E, Murray C (Associate researchers)

An analysis of the effectiveness of intravesical Dimethyl Sulfoxide (DMSO) in the treatment of interstitial cystitis
Lim Y, Thomas E, Murray C

Hysterectomy or Uphold Uterine Conservation in women with apical prolapse – a Comparative Trial
Dwyer P (Principal Investigator), Lim Y, Lee J, Cvach K, Thomas E, Murray C (Associate researchers)

Pelvic organ prolapse surgery with and without tension-free vaginal tape in women with occult or asymptomatic urodynamic stress incontinence: a randomised controlled trial long-term follow up
Walsh C; Schierlitz L, Dwyer P

Efficacy of cloripactin in bladder pain syndrome/interstitial cystitis: a randomised controlled trial
Cvach K (Project Lead); Dwyer P, Schierlitz L, Rosamilia A, Lim Y, De Souza A, Lee J, Chao F, Thomas E, Murray C, Leitch A (Co-investigators)

Key achievements

Dr Joe Lee was made an Associate Professor by the University of Melbourne for his academic achievements.

Professor Peter Dwyer completed his fifth year as Editor in Chief of the *International Urogynecology Journal*.

Dr Yik Lim has served on the Urogynaecological Society of Australasia for a number of years and was the convenor for the 2014 Scientific Meeting held in Melbourne.

Dr Alison De Souza, Liz Thomas, and Dr Lore Schierlitz have finalised their research on sexual function in pregnancy

and the 12 months postpartum which has been accepted for publication in the *British Journal of Obstetrics and Gynaecology*.

Dr Kris Cvach successfully completed her fellowship training and received the Certificate of Urogynaecology from the Australian and New Zealand College of Obstetrics and Gynaecology. She is now a consultant in the department.

In 2013/14 two new fellows, Dr Lin Li Ow and Dr Carly Walsh, commenced their two year clinical terms and research projects. Dr Li Ow has been looking at the surgical outcomes of native tissue versus mesh augmented repair in patients with recurrent pelvic organ prolapse.



Prof Peter Dwyer operating and demonstrating surgery in Chennai India in January 2014



Salving a secret pain

Associate Professor Joe Lee

Urogynaecology Department, Mercy Hospital for Women

They're two of the most prevalent women's health problems, but among the least discussed. Prolapse and incontinence don't make headlines, but Mercy Hospital for Women's Assoc Prof Joe Lee is determined to end the silent suffering they cause.

"Have a guess at what the lifetime risk is for a woman needing prolapse or incontinence surgery," Joe begins. "The risk of women experiencing breast cancer is one in eight. Ovarian cancer risk is one in twelve. They both attract a lot of research funding.

"Prolapse and urinary incontinence risk is one in five. They are under-reported; no one would appear on Oprah to say they are incontinent or have a prolapse. They don't even want to tell their mother, let alone their friends."

Witnessing the widespread impact of these conditions drives Joe's clinical practice and research. As a urogynaecologist and project lead on a global trial of the Miniarc Monarc

Suburethral Sling to treat stress incontinence, and a study on prolapse surgery, both run in Mercy Hospital for Women's University of Melbourne department, he is committed to changing outcomes for women who have had to cope in silence for too long.

"These conditions deserve attention simply because of the burden of suffering," Joe contends. "My patients may have a bulge the size of a football between their legs which they feel every time they sit down. It can interfere with sexual function.

"If you have incontinence you may not want to explain why you can't queue to buy tickets, or jump on a trampoline

with your children. Eventually you may not want to go out. It's common and it's life changing."

Silence has stymied progress on these conditions throughout history. This is where Assoc Prof Lee's work can be an agent of change.

"The science in this area is less mature than in cancer research because it doesn't attract the same focus, publication or funding," Joe points out. "We need more research to improve our basic understanding of tertiary prevention (when disease has already occurred); secondary prevention (when people already have risk factors but have not developed the condition); and primary prevention (identifying ways to prevent it in people who never had risk factors).

"We're about to publish outcomes of the MiniArc Monarc trial in the *American Journal of Obstetrics and Gynaecology*. The other project, called the Uphold Trial, evaluates whether to conserve the uterus in someone with prolapse. While there are many programs in place to tackle primary and secondary prevention, we're still struggling at the tertiary level, which is why my trial seeks to evaluate which treatments are optimal.

"I'm also involved with other research in the department on treating stress incontinence and female voiding difficulty, interstitial cystitis and recurrence of prolapse."

Working in such a delicate and difficult area of women's health takes a particular brand of compassion and dedication.

"Traditionally not many obstetrician/gynaecologists focus on conditions like prolapse and incontinence," Joe says. "There are only 43 subspecialists in urogynaecology in all of Australasia. It requires a different approach to information gathering. We do comprehensive evaluation: bowel, bladder, sexual function. The median age for both conditions is forties/fifties but it may take sufferers years to ask for help. So they're usually only too happy to finally tell someone who understands."

The opportunity to pioneer treatments that may transform countless women's lives is a clear attraction of this field, but Joe has discovered many additional rewards.

"The clinical practice requires skill and passion. The research also requires and creates passion; it stimulates you to ask 'Can we improve outcomes from 60 to 65 per cent? Or reduce complications from 10 to five per cent?'

"Areas we want to explore in future include pain management. A condition like interstitial cystitis, which affects young and old, can leave people in so much pain they can't walk. Mercy Hospital for Women is one of the

few public hospitals doing research on this area, including the use of Botox and instillation of agents such as DMSO and Chlorpactin.

"We are also working on the value of perineal ultrasound, which allows us to see beyond surface anatomy, so we can better understand and manage complicated presentations."

It will be only the latest achievement in Joe's long history of innovative work in urogynaecology, conducted for the past seven years at Mercy Health. He came to Mercy Hospital for Women in 2008 after completing his medical degree and specialist training in New Zealand, then further training in urogynaecology in the UK and Sydney.

The hospital was a natural destination for someone in Joe's field. "Head of Department Prof Peter Dwyer is known internationally as one of the leading urogynaecologists in the world," Joe confirms. "The work he's done over the past few decades to set up our research department, not to mention training a lot of leading urogynaecologists in Australia, is tremendous. He likes to do specific research but he's also open-minded if you want to do something different. You have to earn the right from an academic standpoint, which is great. It's what science is all about!"



Ms Meg Matey

Patient of Assoc Prof Joe Lee

I had become very insecure and didn't feel as able to get on with doing things. I was starting to feel reluctant to go out.

I was lucky enough to be referred to the clinic here by a community group. I was a little apprehensive but the first time I saw Joe he made me feel I wasn't alone in facing this problem.

The surgery I had was very beneficial. The problem has improved dramatically and the ongoing treatment and contact the clinic has given me have been very supportive.

Department of Endosurgery

Mercy Hospital for Women

The Department of Endosurgery was established to provide a service in minimally invasive gynaecological surgery.

The department is active in teaching and clinical research with a fellowship program, rotation of trainees and residents through the unit and courses throughout the year.

We have a special interest in the treatment of severe endometriosis and work closely with the ultrasound department at Mercy Hospital for Women, as well as with the colorectal and MRI departments from Austin Hospital.

A collaboration with the Australian/Mongolian Medical Project saw Dr Emma Readman donate her time and expertise with a teaching visit to Ulaan Baatar in June 2014.

Research projects

Research at the endosurgery unit is supported by grants from the Medical Research Foundation for Women and Babies.

Comparison between transvaginal sonography and magnetic resonance imaging for the diagnosis of deep infiltrating endometriosis and prediction of the need for colorectal team involvement

Ma T, Ellett L, Stone K, Yang N, Esler S, McIlwaine K, Manwaring J, Readman E, Maher P

This project is looking at the ability of MRI and ultrasound, combined with the use of a multidisciplinary meeting, to predict the severity of deep infiltrating endometriosis and hence the need for colorectal surgical involvement at surgery. The cohort study is currently recruiting.

Can narrowband imaging improve the laparoscopic identification of endometriosis?

Ma T, Ellett L, McIlwaine K, Manwaring J, Readman E, Maher P

Narrowband imaging (NBI) uses light of a specific wavelength (415 and 540nm) that has been shown to make blood vessels more apparent at laparoscopy. As endometriosis is associated with excessive vessel formation, NBI is proposed to make identifying it at laparoscopy more accurate. The cohort study is currently recruiting.

Pilot study to assess the role of Mirena intrauterine device in the management of endometrial polyps

Ma T, Ellett L, McIlwaine K, Manwaring J, Maher P, Readman E

Endometrial polyps are a common disorder which may be asymptomatic or associated with unscheduled or heavy bleeding. The Mirena IUD contains levonorgestrel which causes thinning of the lining of the uterus. This pilot study hypothesizes that Mirena may cause the regression of endometrial polyps. The cohort study is scheduled to start recruiting in 2015.

Department of Paediatrics

Mercy Hospital for Women

Research is an essential part of tertiary neonatal care to allow further progress in interventions in the delivery room, neonatal intensive care, postnatal wards and neurodevelopmental outcomes throughout childhood and adolescence.

Research activity

Interventions in the delivery room

The Australian Placental Transfusion Study is a large multicentre randomised controlled trial to examine the effect of delayed umbilical cord clamping in the delivery room. Preliminary studies suggest a potential benefit but this large trial will help provide substantive data to inform future clinical practice.

Respiratory management and prevention of chronic lung disease

Our respiratory research spans laboratory benchwork through to randomised clinical trials and collaboration with industry to develop respiratory equipment. The cytokine study in collaboration with the Ritchie Centre examined the association of inflammatory markers in the blood of premature infants and the development of chronic lung disease of prematurity. This study is now in the analysis phase and due to report in 2015.

The neonatal unit at Mercy Hospital for Women is a leader in the research and development of respiratory support via

high-flow nasal cannulae. The HIPSTER trial is currently investigating the utility of this mode of non-invasive support as a primary therapy for infants >28 weeks of gestation.

Research comparing different high-flow devices has been carried out in collaboration with the Department of Biomedical Engineering and will be presented in Europe in 2015.

Nutrition

There are a number of research studies investigating the optimisation of nutrition for postnatal growth. The N3RO study is a multicentre randomised controlled trial investigating whether the inclusion of fish oil in infant feeds can reduce the risk of chronic lung disease. The ProPremsNeuro trial investigates the effect of probiotics in infant feeds on infection rates and neurodevelopment. Both of these studies have been recruiting successfully throughout 2015.

The infant feeding study (FLIP study) investigated the impact of early exposure (smell and taste) of mothers' breast milk on feed tolerance and growth in extremely preterm infants. Study recruitment is now in the analysis phase and will report late in 2015.

Brain injury

Brain injury is a complication of prematurity and term infants. In collaboration with the Department of Biomedical Engineering, the OCHIE study is investigating optimal duration of therapeutic hypothermia in term infants with hypoxic ischaemic encephalopathy.

Infection and immunity

Infection is a major cause of infant mortality and morbidity. The Melbourne Infant Study: BCG for allergy and Infection reduction (MISBAIR) is a randomised controlled trial to investigate whether administration of BCG vaccine soon after birth to term infants can decrease the risk of infection and allergies. This study is currently recruiting.

Long-term neurodevelopmental outcome

The Growth and Development Clinic provides long-term neurodevelopmental outcome data for extremely sick newborns. These research studies are essential to provide information for current parents with extremely preterm infants and also to inform clinicians on the impact of therapeutic interventions beyond the nursery period.

Research projects

Our research is made possible only by the support of the families of infants in our care, clinical staff, research nurses and grant funding bodies.

Australian Placental Transfusion Study
Holberton J, Watkins A

High Flow and Primary Support for respiratory Distress
Collins C

Comparison of Set and Delivered Gas Flow by Different High Flow Devices
Collins C, Holberton J

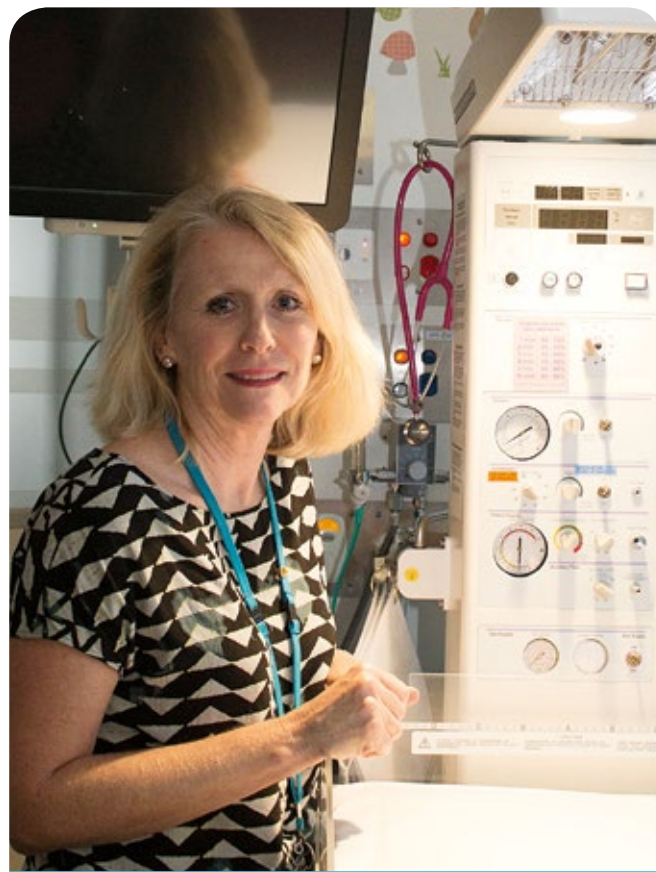
N3RO Study
Holberton J

PropremsNeuro Study
Opie G

FLIP Study
Beker F, Opie G

UCHIE Study
Forster D

MISBAIR Study
Casalaz D



Ms Elizabeth Noble, Research Nurse, Department of Paediatrics

Department of Gynaecological Oncology

Mercy Hospital for Women

The Gynaecological Oncology Unit continues to provide multidisciplinary care to women with gynaecological cancer which includes complex surgery, chemotherapy and all aspects of supportive care.

The Unit also provides a colposcopy/dysplasia service to evaluate and treat pre-invasive abnormalities of the genital tract. We are also increasingly involved in complex surgery related to benign gynaecology and obstetrics.

While maintaining a significant research and publication/presentation output the Unit has seen a 20% increase in our case load of multidisciplinary meetings over 2014.



Assoc Prof Peter Grant, Department of Gynaecological Oncology, Mercy Hospital for Women

Research projects

Ovarian Cancer Prognosis and Lifestyle Study (OPAL).

NHMRC funded national study

Webb P, Friedlander M, Grant P, Obermair A, deFazio A
(Principal Investigators)

PARAGON- Phase 2 study of aromatase inhibitors in women with potentially hormone responsive recurrent/metastatic gynaecological neoplasms: ANZGOG 0903

Grant P (Site Principal Investigator)

SOLO 1. Phase 3 randomised trial of Olaparib vs placebo as maintenance treatment in patients with BRCA mutated advanced ovarian cancer following primary chemotherapy

Grant P, Allen D, Hyde S, Lamont J, Milishkin L, Rischin D, Foo S, Au-Yeung G

SOLO 2. Phase 3 randomised trial of Olaparib vs placebo in platinum sensitive relapsed BRCA mutated ovarian cancer

Grant P, Allen D, Hyde S, Lamont J, Milishkin L, Rischin D, Foo S, Au-Yeung G

ICON 8. Randomised phase III trial evaluating the safety and efficacy of dose-dense, dose-fractionated carboplatin-paclitaxel chemotherapy in the 1st line treatment advanced ovarian cancer (GCIG Trial)

Milishkin L, Au-Yeung G, Grant P, Hyde S, Lamont J, Foo S, Rischin D

Adjuvant treatment, tumour recurrences and survival rates of uterine serous carcinomas: a single institution review

Pol F, Allen D, Bekkers R, Grant P, Hyde S

Treatment satisfaction of women having Laser or LLETZ for cervical dysplasia

Heys D, Conway C

Representative bodies

- NEMICS Governance Committee, Member (past Chairman)
- Australian Society of Colposcopy and Cervical Pathology, President
- Quality and Safety Monitoring Committee (Cervical Cancer), DoHA, Member
- Victorian Surgical Consultative Council, DoH, Member (Ministerial appointment, representative for Gynaecology in Victoria)
- Surgical Outcome Information Initiative Committee (SOII), DoH, Member
- CGO Examination Committee RANZCOG

Assoc Prof Peter Grant

- Cancer Australia. Chair, Clinical Expert Advisory Panel
- Medical & Scientific Advisory Committee (MSAC). Expert Sub Committee, Commonwealth Department of Health and Ageing
- Clinical Network Gynaecological Cancer Committee, Cancer Council Victoria
- Australian Gynaecological Cancer Foundation Scientific Advisory Committee

Dr Simon Hyde

- RANZCOG Gyn Oncology Examination Committee
- Gynaecological Oncology, Subspecialty Training Supervisor
- Australian Society of Colposcopy and Cervical Pathology, board member



Ms Simone Sunitsch

Patient of Assoc Prof Peter Grant,
Gynaecological Oncologist

I had no hesitation in being a part of the PARP inhibitor trial, knowing it could be pivotal in the treatment of ovarian cancer. If people can see research going into early detection and treatment, maybe women will be less likely to ignore early, vital symptoms and go have that check done.”

University Department

Mercy Hospital for Women

Mercy Health consistently receives the top ranking students in obstetrics and gynaecology from the University of Melbourne's graduates and undergraduates.

Research activity

Professor Sue Walker Research Group

Sue Walker, Elizabeth McCarthy, Alexis Shub, Alison Fung, Lisa Hui, Nadia Bardien, Dani Wilson, Melissa Graetz

The vision of the Maternal Fetal Medicine centre is to integrate the three professional domains of clinical care, education and research. Prioritising academic engagement is an important strategic direction of the centre. We have close clinical and scientific collaborations with the Translational Obstetrics Group (led by Prof Stephen Tong), the other University of Melbourne Obstetric Research Groups (led by Prof Michael Permezel, Assoc Prof Martha Lappas and Dr Harry Georgiou), as well as Austin Health, LaTrobe University, Deakin University, University of Papua New Guinea, Royal Women's Hospital and Monash Medical Centre.

Dr Cathy Cluver returned to South Africa in 2014 to commence her PhD with Prof Tong, Prof Walker and local collaborators at Stellenbosch University in the first double blind randomised controlled trial of a new potential therapeutic for preeclampsia.

Sleep disordered breathing in pregnancy

This is a continuing collaboration with the Institute for Breathing and Sleep, Austin Health. Sleep disordered breathing and obstructive sleep apnoea are more common in pregnancy, and are increased further among women who are obese. This year, we have published on the potential benefit of Continuous Positive Airway Pressure on severe preeclampsia, and Ms Dani Wilson continues her work on sleep disordered breathing and the hypertensive disorders of pregnancy as part of her PhD. We are soon to publish on the impact of maternal position during sleep on fetal wellbeing. Dr Alison Fung is continuing her research into the impact of sleep disordered breathing on fetal growth restriction.

Improved diagnosis of fetal growth restriction

Fetal growth restriction is the single biggest contributor to stillbirth. Improved methods of identifying babies who are not growing well are urgently needed. In 2015, Dr Teresa MacDonald will commence her PhD on the importance of slowing growth in late pregnancy on measures of fetal wellbeing. This NHMRC-funded project will also involve examining placental transcripts released into the maternal blood stream to better detect those pregnancies where the baby is likely to be growth restricted at term.



Bringing research into clinical practice

- The midwifery and genetic counsellors in the department have provided important leadership in their fields. Melissa Graetz and Jo Kelly presented at the European Meeting on Psychosocial Aspects of Genetics conference in Milan on 'Case illustrations of the utilisation and uptake of NIPT: Counselling and Management Issues.'
- Dr George MacGillivray, head of Medical Genetics at Mercy Hospital for Women, has continued to publish widely in the areas of prenatal and neurogenetics.
- Inspired by the example of Nadia Bardien, two outstanding perinatal midwives, Caitlin O'Brien and Thuy Truong are commencing Masters of Midwifery in 2015 under the supervision of Prof Sue McDonald. Nadia's research has led to the development of an ultrasound teaching package in fetal surveillance for midwives, which has been extremely well received by medical and midwifery staff.
- The dynamic trial culture of Mercy Hospital for Women is assisted by clinicians from the Maternal Fetal Medicine Group providing obstetric lead for the following national and international externally funded major obstetric trials:
 - o the Australian Placental Transfusion Study
 - o the EPPI Trial – Enoxaparin for the Prevention of Preeclampsia and Intrauterine growth restriction
 - o the MAGENTA trial: Magnesium Sulphate at 30-34 weeks' gestational age: neuroprotection trial.

Improving pregnancy outcomes in obese women

The obesity epidemic brings with it substantial risks to both women during their pregnancy and their babies. Dr Alexis Shub and Dr Elizabeth McCarthy continue their important clinical research into managing obesity in pregnancy. Results of their randomised controlled trial into methods of modifying gestational weight gain are about to be published. In a collaborative project underway with Deakin University, this group is examining the role of using an MHealth online portal to inform and empower women regarding healthy gestational weight gain, diet and activity.

New genetic technologies in prenatal diagnosis

The widespread uptake of non-invasive prenatal testing in pregnancy has been an important area of research for Dr Lisa Hu in 2014. She is recognised internationally for her expertise in the area of non-invasive prenatal testing. This year she has not only published widely in this area, but has also been invited onto the Editorial Board of Ultrasound in Obstetrics and Gynaecology and the RANZCOG Women's Health Committee and Prenatal Screening Working Party. Lisa has also developed the Perinatal Infectious Diseases Clinic and has published in the area of congenital cytomegalovirus (CMV).

Translational Obstetrics Group

Stephen Tong, Tu'uhevaha Kaitu'u-Lino, Natalie Hannan, Owen Stock, Fiona Brownfoot, Roxanne Hastie, Kirsten Palmer, Sally Beard, Natalie Binder, Ping Cannon, Laura Touhey.

Professor Tong leads the Translational Obstetrics Group, dedicated clinicians-scientists and scientists whose focus is to pursue scientific discoveries that directly improve bedside care of pregnant women.

In 2014, the team consisted of seven scientists and four clinician-scientists. The seven scientists were two post-doctoral fellows, Dr Kaitu'u-Lino and Dr Natalie Hannan, and five highly skilled research assistants, Ms Sally Beard, Ms Natalie Binder, Ms Laura Tuohey, Ms Roxanne Hastie and Ms Ping Cannon. The clinicians were Assoc Prof Stephen Tong, Dr Owen Stock, and two clinical trainees: Dr Fiona Brownfoot (second year of her PhD) and Dr Kirsten Palmer.

Medication based treatments to replace surgery for ectopic pregnancies

Current treatments for ectopic pregnancy often entail invasive surgery. Since 2009, the Translational Obstetrics Group has been developing a promising treatment approach that consists of a single injection (methotrexate) and seven oral gefitinib tablets taken daily.



Translational Obstetrics Group. Back row: Natalie Hannan, Natalie Binder, Owen Stock, Sally Beard, Tu'uhevaha Kaitu'u-Lino. Front row: Roxanne Hastie, Laura Tuohey, Fiona Brownfoot, Stephen Tong, Ping Cannon, Minh Nguyen

The team published a cohort study of eight women who had large ectopic pregnancies presenting in particularly dangerous sites other than the fallopian tube (extra-tubal ectopic pregnancies). They showed all eight ectopic pregnancies were successfully treated with combination gefitinib and methotrexate, avoiding the need for surgery.

Prof Tong, along with his collaborator Prof Andrew Horne and other major UK centres, has prepared a large grant application for a phase III randomised clinical trial (submission awaiting outcome). If funded, this may be the final trial required; if the outcome is positive, the use of combination gefitinib and methotrexate may become the new standard of care to treat ectopic pregnancies. This may allow many women to avoid surgery and make the treatment of ectopic pregnancy safer.

Treatments for severe preeclampsia

The Translational Obstetrics Group is working to develop drugs to treat preeclampsia. In 2014, the team developed a number of very promising approaches.

These included the use of proton pump inhibitors. In laboratory experiments, the team has shown these therapeutics (prescribed widely for gastric reflux and safe in pregnancy) can drastically decrease the production of sFlt-1 and soluble endoglin from the preeclamptic placenta. These are the main 'toxins' released into the maternal bloodstream and cause high blood pressure and organ injury. Furthermore, they have found proton pump inhibitors protect blood vessels and reverse features of preeclampsia in an animal model of the disease. In collaboration with Dr Cathy Cluver in South Africa (and Prof Walker) the team is seeking to translate this concept into the clinic with a randomised clinical trial.

Dr Fiona Brownfoot has led investigations of other treatment approaches including the use of pravastatin and of sulfasalazine, both of which may prove successful.

Diagnostics to monitor wellbeing of the sick fetus in the womb

In a 2013 study led by Dr Clare Whitehead, the Translational Obstetrics Group discovered molecules that are released from the placenta into the mother's bloodstream when the baby is significantly starved of oxygen and in peril. Measuring these mRNA molecules could be a new way to identify babies at risk of stillbirth.

In 2014, Dr Owen Stock extended this work by heading the international FOX study, which is collecting blood samples from eight tertiary referral centres from across Australia and New Zealand. The object of this NHMRC funded study is to attempt to validate the earlier findings and develop a clinically useful blood test

to identify babies with low oxygen in utero. If successful, we may have developed a new test that could improve outcomes and decrease the stillbirth risk.

Dr Martha Lappas Research Group

Assoc Prof Martha Lappas, Dr Ratana Lim, Dr Stella Liong, Gillian Barker, Amelia Brickle, Gemma Chase, Stephanie Quak

Preterm birth is one of the most significant health care issues globally. Prematurity is the leading direct cause of early neonatal death, responsible for approximately one million annual neonatal deaths globally. Survivors of preterm birth have greatly increased rates of long-term disabilities including cerebral palsy, intellectual handicap and chronic lung disease requiring oxygen. With long-term health consequences, the emotional and financial stress on the family of the prematurely born infant is sizeable.

Over the last 15 years, the Lappas group has identified a number of proteins that can activate or suppress the machinery regulating human labour. One such protein is sirtuin 1 (SIRT1). In 2014, the team secured a \$500,000 NHMRC grant to study whether targeting SIRT1 using specific activators can reduce the incidence of preterm birth and related perinatal morbidity and mortality.

The effect of maternal diabetes and obesity on placental function: implications for fetal growth and development

Maternal diabetes and obesity during pregnancy is associated with cellular and metabolic damage in the placenta. This results in a critically adverse fetal environment, enhancing susceptibility to a number of chronic diseases later in life including obesity, diabetes, cardiovascular disease and certain cancers. This project seeks to gain a better understanding of how maternal diabetes and obesity in pregnancy damage the placenta. The outcomes may be used to develop clinically useful interventions to improve fetal outcomes that are of critical importance for our public health future.

Phytophenols as therapeutics to improve pregnancy outcomes

Preterm birth and gestational diabetes mellitus (GDM) are seemingly disparate conditions but are linked by common pathways in their pathogenesis. Affecting up to 20% of all pregnancies, they have an impact that extends well beyond pregnancy and childbirth, with the potential for lifelong morbidity or mortality for both mother and baby.

Recent epidemiological studies have linked high fruit and vegetable consumption with a reduced risk of poor pregnancy outcomes. Many of these beneficial properties

“The object of the international FOX study is to attempt to validate the earlier findings and develop a clinically useful blood test to identify babies with low oxygen in utero and at risk of stillbirth.”

have been attributed to phytophenols (such as those found in citrus fruits).

In this project, the Lappas group will use various phytophenols to determine if they can delay preterm birth, or prevent the development of GDM.

In 2014, the Lappas group published a study that showed the phytophenol silibinin (found in milk thistle) prevented brain injury evident in pups born at preterm. This study was generously funded by the Medical Research Foundation for Women and Babies.

Can proteins and lipids be used to identify women with early type 2 diabetes in a high-risk population?

We are trying to identify changes that occur in women that may allow for the prediction and/or earlier diagnosis of Type 2 diabetes. It is hoped these studies will lead to the development of a screening test to identify at-risk women. Predicting disease before its occurrence would allow preventative management strategies to be initiated.

Over the last few years, the Medical Research Foundation for Women and Babies has also funded our study to determine if proteins and lipids can be used to predict Type 2 diabetes in women with a previous GDM pregnancy. For these studies, we have used samples that were collected over 10 years at the Mercy Hospital for Women as part of the GDM follow-up study.

In 2014, we published a significant study which profiled the levels of 10 metabolic proteins. We found that high postpartum C-peptide and low postpartum ghrelin levels are significant risk factors for the development of Type 2 diabetes in women with a previous history of GDM.

Assoc Prof Lappas, together with Prof Peter Meikle and his team at the Baker IDI Heart and Diabetes Institute, have also profiled the expression of more than 300 lipid species. Notably, we have identified four lipid species that are predictive of Type 2 diabetes. The inclusion of these four lipid species to a risk-factor base model has

increased the predictive ability to identify women with a previous GDM pregnancy at risk of developing Type 2 diabetes. This paper is currently under review.

Dr Harry Georgiou – Dr Megan Di Quinzio Biomarkers of Disease Research Group

*Dr Harry Georgiou, Dr Megan Di Quinzio,
Gabrielle Pell, Debra Jinks, Dr Stella Liong*

Predicting preterm labour

*Dr Harry Georgiou, Dr Megan Di Quinzio,
Dr Stella Liong, Gabrielle Pell*

Understanding the causes of preterm labour and implementing useful preventative therapies remains an elusive goal in contemporary obstetrics. Developing diagnostics that can accurately predict preterm birth is an essential step towards improved and targeted therapies for preventing this common condition, which is associated with significant perinatal morbidity and mortality.

Supported by research coordinator Ms Gabrielle Pell and past PhD students Jan Heng and Stella Liong, work has continued this year on identifying predictive biomarkers associated with preterm labour and preterm rupture of fetal membranes. These biomarkers have been evaluated in both symptomatic and asymptomatic pregnant women and have shown promising predictive potential.

PhD student Ms Stella Liong graduated in 2014 and was responsible for four principal author and two co-author publications. Team leaders, Dr Harry Georgiou and Dr Megan Di Quinzio plan to conduct a comprehensive multicentre diagnostic trial to evaluate the predictive efficacy of these putative biomarkers in the general obstetric population.

Gestational diabetes follow-up project

*Debra Jinks, Connie Louizos, Dr Harry Georgiou,
Assoc Prof Martha Lappas*

This project extends the work of the well-known Gestational Diabetes Follow-Up Program, Australia's longest running clinical service and epidemiological study into the development of Type 2 diabetes among women with a history of gestational diabetes mellitus. Funded over many years by the Medical Research Foundation for Women and Babies, the project builds on the pioneering work of Emeritus Prof Norman Beischer who made significant contributions to our understanding of the epidemiology of gestational diabetes and its immediate and long-term consequences.

Research coordinators Ms Debra Jinks and Ms Connie Louizos have continued to recruit and follow up the thousands of women who have previously experienced gestational diabetes. Research scientists Assoc Prof Martha Lappas and Dr Harry Georgiou, assisted by Ms Gillian Barker, continue to evaluate various blood-borne proteins and lipids that may indicate Type 2 diabetes onset. The early detection of Type 2 diabetes would allow early intervention strategies to be implemented so that common debilitating complications of diabetes such as cardiovascular disease, kidney disease and blindness can be prevented or delayed.

Research projects

Gestational diabetes mellitus follow-up program: Recruitment of Participants
Georgiou H

The role of inflammation in pregnancies complicated by diabetes
Lappas M

Understanding what triggers birth – New opportunities for prevention of early delivery
Lappas M

Investigation of soluble endoglin: the toxin responsible for severe preeclampsia
Lino TJ

Developing molecular therapeutics and diagnostics for pregnancy complications
Tong S

Measuring RNA in maternal blood to monitor the wellbeing of growth-restricted fetuses
Tong S, Walker SP, Said J

Developing diagnostics and therapeutics for preeclampsia: targeting a novel placental specific sFlt-1 variant
Tong S, Palmer K, Lino TJ

Improving the prediction and detection of contributors to term stillbirth
Walker SP, Tong S, Whitehead C

The role of sirtuin (SIRT) proteins in the mechanisms that regulate infection induced preterm birth
Lappas M, Permezel M, Tong S

Lansoprazole as a novel therapeutic for preeclampsia
Hannan N

Targeted placental therapeutic delivery to treat preeclampsia
Hannan N

Targeting the toxins of preeclampsia
Lino TJ

Corin, a cardiac enzyme, is critical to pregnancy success
Hannan N

Development of a novel animal model to examine preeclampsia therapeutics
Hannan N

The GAP study. Towards adequate national provision of genomic testing in pregnancy
Halliday J, Walker SP et al.

DAME: diabetes and milk expressing; an RCT
Forster D, Walker SP et al.

PIE: a double blind RCT for treatment of early onset preeclampsia
Walker SP, Cluver C, Tong S

Improving consent for Caesarean Section
Walker SP, Truong A

Treating severe preeclampsia with Pravastatin: An early phase clinical trial
Brownfoot F

Treating early onset severe preeclampsia with pravastatin: an early phase clinical trial
Brownfoot F

Use of a multimedia module in antenatal education for epidural anaesthesia in labour
Carty J, Ellett L, Permezel M

Developing a clinical blood test for women with preterm ruptured membranes (<32 weeks gestation) to identify those developing chorioamnionitis
Tong S, Stock O, Hannan N, Whitehead C, Walker SP

PIE: a double blind RCT for treatment of early onset preeclampsia
Walker SP, Cluver C, Tong S

Safety and efficacy of antenatal milk expressing for women with diabetes in pregnancy: protocol for a randomised controlled trial.
Forster DA, Jacobs S, Amir LH, Davis P, Walker SP, McEgan K, Opie G, Donath SM, Moorhead AM, Ford R, McNamara C, Aylward A, Gold L

Key achievements

PhDs were awarded to Drs Monika Skubisz, Clare Whitehead and Kirsten Palmer.

The Translational Obstetric Group published 10-15+ papers, mainly in prestigious international journals.

Professor James Boyer Brown Fellowship was awarded to Assoc Prof Martha Lappas by Medical Research Foundation for Women and Babies (2014-2015).

Funding of a machine to measure glycated haemoglobin was awarded to Assoc Prof Martha Lappas by Medical Research Foundation for Women and Babies (2014-2015).

Funding for purchase of the Floid Cell Imaging Station awarded to Dr Tu'uhevaha Lino.



Dr Nadia Bardien, Maternal Fetal Medicine Group, Mercy Hospital for Women



“Research on these conditions can have a big impact on improving outcomes for our women and babies.”

Delivering a brighter future for mothers and babies

Dr Fiona Brownfoot

University of Melbourne Department, Mercy Hospital for Women

Obstetrician/gynaecologist Dr Fiona Brownfoot sees the highs and lows of childbirth every day in her clinical work. While the medical care most Australian mothers receive means the former still outweigh the latter, Fiona has witnessed an inexorable rise in the number of pregnancies endangered by preeclampsia. Fast becoming a crisis in perinatal health, preeclampsia now affects up to eight per cent of pregnancies — a figure Fiona has made it her mission to reduce.

“I’ve always had a real interest in research, inspired by my clinical work,” Fiona says. “I was quite surprised that even now, very little is known about some of the

most common obstetric complications, including preeclampsia, and there are very few medical treatments for them.

"Preeclampsia is one of the most common complications of pregnancy. It can be a devastating disease leading to multisystem organ damage. Currently the only way we can stop it progressing is to deliver the baby. At term gestation, that has very good outcomes, but at preterm — when the disease is often critical — it leads to high rates of morbidity and mortality in the infants. So our main goal is to find a medical therapeutic that might allow mothers to extend their pregnancies until it's safe to deliver their babies.

"My work uses laboratory-based assays to develop new medical treatments or look at treatments that have been effective in other diseases to see if they might reduce markers of preeclampsia. Our lab-based studies and clinical trial on pravastatin as a possible medical therapeutic are looking really promising.

"We've recruited four women for the trial so far. They were really excited that we may be able to come up with a treatment. Together we hope we'll be able to make a difference for them, for other women and for their children."

Finding a cure for preeclampsia will not only avoid the immediate tragedy of neonatal death but will negate its lifelong effects.

"There can be long-term implications for mothers and children," Fiona confirms. "For mothers, there is ongoing cardiovascular risk and an increased risk of preeclampsia in subsequent pregnancies; for children, all the complications that accompany prematurity. Developing a medical therapeutic could give women a much brighter future in terms of their own health and that of their baby."

The opportunity to watch the real-world benefits of translational research in action has set the path of Fiona's career to date.

"I commenced my clinical training at The Royal Women's Hospital, then moved to Mercy Hospital for Women as I was interested in a PhD in translational obstetrics with Professor Stephen Tong and Dr Tu'uhevaha Kaitu'u-Lino," Fiona says. "The Translational Obstetrics Group has a very strong research track record and a focus on taking concepts from the laboratory to the bedside to try to improve clinical outcomes. Importantly I have learnt the skills required to become a clinician-scientist. I couldn't have had a more supportive environment or more inspiring role models." Fiona has published a number of articles so far on preeclampsia and will submit her thesis early in 2016.

While balancing the demands of study with a heavy clinical workload is far from easy, Fiona has no trouble staying motivated. "Research on these conditions can have a big impact on improving outcomes for our women and babies," she affirms.

Ms Anita Erceg

mother of Maja and
pravastatin trial participant

I had been diagnosed with severe preeclampsia in the second trimester of my pregnancy with Maja and transferred to Mercy Hospital for Women.

Fiona came in and asked me if I'd like to take part in the trial of a drug to stop the preeclampsia progressing. I thought about how, if my daughter Maja ends up in the same situation one day years down the track, this might have been part of finding something to help her.



Even though we had to deliver Maja at 25 weeks and 2 days, I'm happy I may have been able to help others.”

Community support for our research is vital

Mercy Health's mission to care for those in greatest need began with a donation from foundress Catherine McAuley.

Donations from the community continue to play an essential role in funding care, including research to build a healthier future for at-risk mothers and babies.

mercyhealth.com.au/donate

Professor Emeritus Norman Albert Beischer AO

15 April 1930 – 2 February 2015



In February this year Mercy Health lost one of its pioneers in women's health with the passing of Professor Beischer.

A leading researcher, teacher and clinician for more than 50 years, Prof Beischer's determined advocacy for women's health has created enduring, measurable public health improvements for women, babies and children.

Prof Beischer was born in Bendigo in 1930. After matriculating from Geelong Grammar School in 1948, Prof Beischer progressed to The University of Melbourne where he graduated MBBS in 1954. He achieved numerous honours including the Fulton Scholarship in Obstetrics & Gynaecology, and the Hubert Sydney Jacobs Prize in Clinical Gynaecology.

His early postgraduate years included training at the Alfred and Royal Children's Hospitals and specialist training in Northern Ireland at several hospitals, including the Royal Maternity Hospital, Belfast.

On returning to Melbourne Prof Beischer began a 12-year association with the Department of Obstetrics & Gynaecology at the Royal Women's Hospital under the mentorship of the late Prof Sir Lance Townsend.

In 1968, Prof Beischer was appointed inaugural Chair in the second University of Melbourne Department of Obstetrics & Gynaecology at the Mercy Maternity Hospital (now Mercy Hospital for Women) and the Austin Hospital, a post he held for 28 years.

The strength of Mercy Hospital for Women's current Department of Obstetrics & Gynaecology is testament to his work in building it across two sites. As Prof Beischer's appointment to Mercy Maternity Hospital took place three years before the hospital opened he was also deeply involved in its planning.

In addition to a heavy clinical and teaching commitment, Prof Beischer was the author of more than 180 peer-reviewed publications and editor of the *Australian & New Zealand Journal of Obstetrics & Gynaecology* for 17 years. He also edited a number of landmark undergraduate textbooks; 'Beischer and Mackay' became authorities whose texts on obstetrics, gynaecology and neonatology ran to multiple editions and have been translated into three languages.

Prof Beischer continued in the role of Departmental Chair until 1996, forging an international reputation for productive research. The current status of gestational diabetes mellitus research, and assessment of foetal wellbeing in the third trimester of pregnancy, are largely due to his focus on these crucial areas.

Following his retirement as Chair of the University Department at Mercy Hospital for Women, Prof Beischer remained active as Chair of the Medical Research Foundation for Women & Babies, which he established in 1981 as the Mercy Maternity Hospital Research Foundation.

The Foundation has funded important research in areas including prevention of Type 2 diabetes in women who have had gestational diabetes, and the causes of preterm birth. It continues to be a strong supporter of research at Mercy Hospital for Women.

Prof Beischer served on the Consultative Council on Obstetric and Paediatric Mortality and Morbidity of Victoria. He took over as Chair in 1984 until his retirement in 1999. From 1967-2002, he was a member of the National Health and Medical Research Council Committee for compilation of maternal deaths in Australia. Through his tireless efforts and meticulous attention to detail, Prof Beischer ensured the council became the gold standard for Australian reporting and analysis of maternal, perinatal and child deaths.

In 1994, he was awarded the Officer of the Order of Australia with the citation: 'For service in the field of obstetrics and gynaecology and for clinical research into the causes and prevention of maternal and perinatal deaths'.

In 2013, Prof Beischer was awarded an Honorary Doctorate of Medical Science from the University of Melbourne.

Among the many warm tributes Prof Beischer's family has received from his colleagues and friends, one encapsulates his standing in the Mercy Health community: "He was a remarkable man in every way; a passionate advocate and pioneer in advancing women's health through teaching, research and leadership. He was a mentor and inspiration to me, among so many others."

Health Services, Surgical and Specialist Services

Department of Anaesthesia

Mercy Hospital for Women

Our primary ongoing research interest is the evaluation of maternal cardiac output as assessed by transthoracic echocardiography. We are in the final stages of recruiting a second study documenting the effects of spinal anaesthesia on maternal cardiac output in the presence of an ephedrine infusion to prevent a fall in blood pressure.

Our association with the Cochrane Collaboration continued throughout 2014 with further work on a major systematic review comparing combined-spinal epidural (CSE) with spinal anaesthesia for caesarean section, which is expected to be ready for publication in early 2015. The department was also one of several centres involved in large multicentre study investigating the link between maternal body size and anaesthetic outcome. Clinical audit studies were also ongoing in the use of general anaesthesia for caesareans and the anaesthetic implications of placenta praevia.

Research projects

Comparison of Massimo Pronto-7 and HemoCue Hb 201+ with laboratory haemoglobin estimation: a clinical study and meta-analysis (published)

Hiscock R, Simmons S, Carstensen B, Gurrin L

General anaesthesia for caesarean section at the Mercy Hospital for Women – a seven year audit (ongoing)

Letson I, Geertsema, J, Simmons S

Anaesthesia for placenta praevia and accreta at Mercy Hospital for Women. A retrospective analysis of five years' experience (ongoing)

Simmons S

Transthoracic echocardiographic assessment of cardiac output in healthy women at elective caesarean section under spinal anaesthesia with ephedrine hypotension prophylaxis: an observational cohort study (recruiting)

Simmons S, Ilyas S, Casey E

Combined spinal-epidural versus spinal anaesthesia for caesarean section

Cochrane Database of Systematic Reviews 2009, Issue 4. Art. No.: CD008100. DOI: 10.1002/14651858.CD008100 (near final completion)

Simmons SW, Dennis AT, Crowhurst JA, Cyna AM

Association between maternal size and outcomes for caesarean section: A multi-centre prospective observational study (The MUM SIZE study) (recruiting)

Beeton A, Casalaz D, Simmons S, Dennis A, Du Plessis J, Haughton A, Hessian E, Lamb K, Martin Sanchez F, Parker A, Lew J, Story D, Teale G, Shaw M



Dr Richard Hiscock, Department of Anaesthesia, Mercy Hospital for Women

Midwifery Professorial Unit/Professional Development & Research Unit (Nursing and Midwifery)

**Mercy Hospital for Women
and Werribee Mercy Hospital**

The Professorial and Professional Development & Research Units work in collaboration to promote an environment of learning through clinical training and research, leading to a highly skilled and knowledgeable workforce.

2014 was a particularly successful year for midwifery and nursing staff presenting and publishing research undertaken at Mercy Hospital for Women.

Mercy Health was well represented at the annual Perinatal Society of Australia and New Zealand (PSANZ) conference, the largest annual multidisciplinary perinatal meeting held in Australasia, with four presentations.

In June a contingent of midwives from MPHl travelled to Prague, Czech Republic for the 30th Triennial Congress of the International Confederation of Midwives. Seven of our delegates presented in one or more concurrent sessions or workshops.

Mercy Health staff Prof Sue McDonald, Dr Alexis Shub and Helen Patterson travelled to Timor Leste as part of a Rotary funded project aimed at enhancing the skills of midwifery and medical clinicians. The project supports staff to better recognise, refer early and manage women with obstetric conditions, and babies with neonatal conditions, that are most likely to result in significant morbidity or mortality.

Members of the unit are also engaged in activities that contribute to our organisation's professional knowledge and culture.

The Werribee Research and Education and Heidelberg Professional Education group contributed to UNIT 3 Pathophysiology and Patterns of Health and UNIT 12 Responses to Altered Visual and Auditory Function.

Research projects

Comparison of the L2 data with a similar group of neonates in a tertiary setting

Patterson H, Anning J

Funding to complete Phase 2 of the project is currently awaiting outcome of an application (research grant) to the Nurses Board of Victoria Legacy Limited.

Representative bodies

Prof Sue McDonald

- Member, NHMRC Expert Advisory Committee, Development of Evidence-Based Antenatal Guidelines as a Co-Chair, Clinical Working Group and Chair, Guidelines Implementation Committee
- Chair, Australian Council of Deans of Nursing and Midwifery Council of Deans of Nursing and Midwifery (CDNM), Midwifery Advisory Group
- Member, Expert Advisory Group Review of National Education Accreditation Standards for Midwifery Australian Nursing and Midwifery Accreditation Council (ANMAC)
- Member, Expert Advisory committee, Practice Standards for Midwives providing Homebirth Member, Expert Advisory committee, Re-entry to the Register Midwife and Entry Programs
- Board member, Australian New Zealand Stillbirth Alliance

Dr Wendy Pollock

- Member of the Victorian Maternal Mortality and Morbidity Sub-Committee of the Consultative Council on Obstetric and Paediatric Mortality and Morbidity
- Victorian President Australian College of Critical Care Nurses (ACCCN) National Board member (ACCCN)
- Chair, ICU nurse staffing standards working party
- Australian College of Midwives (ACM) representative on National Blood Authority committee to develop Patient Blood Management Guidelines Module 5 – Obstetrics and Maternity
- ACM representative on Australian Commission for Safety and Quality Maternal Sentinel Events and Postpartum Haemorrhage Working Group
- Clinical advisor on the Obstetrics and Gynaecology Clinical Technical Group for the National Casemix and Classification Centre (NCCC)



Ms Kym Harrison, Prof Susan McDonald, Miss Deborah Pidd and Ms Elizabeth Thomas; inset: Mercy Health's delegation to Prague



More precious than gold

Ms Kerri McEgan

Breastmilk Bank, Mercy Hospital for Women

Donating breastmilk meant for your own newborn after their passing is an act of profound poignancy and generosity. Manager of Mercy Hospital for Women's Breastmilk Bank, Ms Kerri McEgan, is studying its implications for mothers, sick and premature babies and the health services that support them.

“Research is not my primary role,” Kerri is quick to point out. “I’m a clinician and manager which means I can be the clinical link for full-time research staff. But since the breastmilk bank’s inception I’ve moved into it, particularly to improve understanding of how important breastmilk is for sick and preterm babies.”

These two crucial research functions have led to Kerri’s participation in a groundbreaking study on breastmilk donation after neonatal death. A collaboration between researchers from Mercy Hospital for Women and Sydney’s University of Technology, the study explores the medical, bioethical, practical, psychosocial and emotional issues around how best to support mothers who have lost a newborn, including offering the option to donate their breastmilk.

“As health professionals we need to broaden our horizons in how we communicate with grieving families about loss.”

There can be few health professionals better qualified to contribute to the study than Kerri. Joining Mercy Maternity Hospital (now Mercy Hospital for Women) in 1981 as a student midwife, she has a long history of clinical work in women’s and children’s health. However, she is perhaps best known for her fundamental role in establishing (with Dr Gillian Opie) Victoria’s first breastmilk bank, a role which fuels her ongoing passion for progress in the often fraught arena of milk donation.

“I had observed over a long period of working in the breastmilk bank the range of ways donations come about,” Kerri explains. “Internationally, women very freely donate to breastmilk banks after neonatal loss and find that a cathartic and healing process. When Australian breastmilk banks began making that option available to families it brought a lot of issues to the surface. The research hopes to develop some boundaries within which to work in this very complex area.”

The current lack of clear policy on when and how to discuss lactation after infant loss can leave mothers at an emotional and physical disadvantage and staff unsure how best to support them. To begin bridging this gap, the research team convened the first National Stakeholder Meeting on milk donation after neonatal death, hosted by Mercy Hospital for Women. The meeting drew together representatives from Australian human milk banks, neonatal intensive care units (NICU) currently using donor milk, and Australia’s chief NICU parent support organisation. Outcomes were analysed to identify key themes that may help shape guidelines for NICU and human milk bank staff.

“Principal Investigator Katherine Carroll saw that because we have so few breastmilk banks in Australia, we needed to get the main stakeholders together to hear their opinions,” Kerri says. “As health professionals we need to broaden our horizons in how we communicate with grieving families about loss in a practical setting, where there are associated physical issues.”

Several key themes emerged from the national stakeholder meeting: women’s diverse experiences of lactation and donation after infant death; how human milk banks and NICUs can best support them, including their lactation and donation decisions; how to discuss milk donation; the different types of donation; and how the option to donate is impacted by limited resourcing. One imperative remains constant: that the bereaved mother’s welfare is paramount.

“The focus of any protocol developed will not be on donation, but on making sure women are supported to cease their lactation or manage it if they choose to donate,” Kerri confirms. “Regardless of their choice, we should be much better at supporting them. For those who donate it’s about treating their milk respectfully because it was meant for their very precious baby. The increasing availability of milk banks now gives bereaved mothers the option to see their milk being used to help another family, so that something worthwhile comes out of an awful situation.

“Some may wish to continue to express and donate their milk to a milk bank as part of their healing process. Or they may donate stores of frozen milk, but not continue to express. Others will want lactation stopped immediately – they don’t want that reminder of the baby they should be nurturing. So we need to be comfortable in saying ‘How can we help you reduce your lactation quickly in the way you want it to happen?’ This needs to be managed physiologically and psychologically to avoid mastitis, which can add to their emotional pain.

“It’s very challenging; staff don’t want to further distress the family and can feel vulnerable themselves amid grief, especially if you’ve looked after and developed an attachment to that family. If they were scripted to bring lactation management up as part of standard care it would make it easier, so that it becomes a routine part of the ‘grief package’ we provide when a family loses a baby.

“This research validates the work I’ve been doing for a long time. You can see things happening time and time again in a clinical setting and think ‘How can we do this better?’ I want to create change by liaising with researchers who have the time, knowledge and skill to find evidence.”

Health Services, Medical, Subacute and Palliative Care Services

Health Independence Program (HIP)

Werribee Mercy Hospital

The program offers community-based services designed to help patients improve health through management and education, advice, support and information that addresses physical, mental, psychosocial and environmental needs.

Services include community rehabilitation, residential in-reach, specialist clinics for continence and falls and balance and complex care for people with chronic diseases and complicated health conditions.

Research activity

Caring, enabling, achieving together – that's hip!

Bernadette Mulcahy has submitted an abstract to the Department of Health on early outcomes of the program's model of holistic, patient-centred care.

The study outlines the measurable benefits of the program's interdisciplinary approach: improved health through clients' greater autonomy to direct their own care planning and comply with interventions; less duplication of client information by providing one key contact for the client and their family; development and implementation of an appropriate care plan, and strong partnerships between clients' homes, services and community, improving and simplifying communication and care.



Ms Maureen Morrish with HIP Care Coordinator Ms Wendy Dick

Key achievements

Julie Derksen completed a Diploma of Nursing Div 2.

Robyn Presland completed Diabetes Nursing Management in July 2014 and a Renal Supportive Care workshop in June 2014.

Rizza Calubaquib completed Renal Supportive Care in April 2014 and Clinical Assessment of the General Patient in August 2014.

Hiezelyn Galang attended a Diabetes Study Day in March 2014 and Renal Supportive Care workshop in June 2014.

Mayette Esmund completed Aggression Management in May 2014 and Clinical Assessment of the general patient in August 2014.

Mercy Palliative Care

Mercy Palliative Care offers specialist care that focuses on quality of life for people facing terminal illness. Palliative care providers work together with and support family and carers.

In 2014 Ms Lucy Forrest, Registered Music Therapist, was the inaugural recipient of the Palliative Care Research Network of Victoria (PCRVN) PhD Scholarship.

Research projects

'The experience of music and music therapy for paediatric palliative care patients and their parents, who come from diverse cultural backgrounds.'

Forrest L, Registered Music Therapist (PhD research study)



We can't
always change
a diagnosis, but
we can change a
patient's final days

When someone is dying, every moment is precious: for them, for their families, for those who care for them. Most people prefer to spend those moments at home with their loved ones. But all too often, the cost of end-of-life care intrudes on a patient's final days.

Mercy Health's Urgent Need Appeal offers financial support to patients facing end of life and their families. Donations can ease the cost of vital medication, utility bills, equipment hire – supports which give families quality time with their loved one.

DONATE TODAY
mercyhealth.com.au/urgent



Evensong

Ms Lucy Forrest

Mercy Palliative Care Music Therapist

Music's emotional power is self-evident, but its physiological impacts are less well known. Mercy Palliative Care Remedial Music Therapist Ms Lucy Forrest's new study explores its application in the palliative care of children from diverse cultural backgrounds.

For someone who works in one of the most emotionally challenging areas of healthcare, Lucy exudes calm and positivity. "I love my work," she says. "It's not just playing music but knowing you can make a difference."

Lucy can attest, through many years of personal observation and now, through a longitudinal study, that music's transcendence of age, language, culture and faith has unique potential to bring comfort to people from all

backgrounds and at all stages of life. There can be few more poignant applications of music therapy than to the care of children facing life-threatening illness and their families, and it has shown its adaptability in Lucy's richly multicultural catchment of Wyndham in Melbourne's west.

"My study looks at the experience of music and music therapy for paediatric palliative care patients and their parents, who come from diverse cultural backgrounds," she confirms. "Its

“There is rich potential in understanding how they might use music as a support when someone is dying.”

aims are threefold: to understand how paediatric palliative care (PPC) patients and their parents use music in their day-to-day lives; to explore what is important for families, how cultural beliefs and practices are associated with caring for children in PPC, and the families' use of music, both in day-to-day life and in palliative care; and, to examine how paediatric patients and their parents experience music therapy in home-based palliative care.”

Ultimately, the study seeks to identify barriers and improve access to home-based paediatric palliative care music therapy services for children and families who come from diverse cultural backgrounds.

“The study was inspired by the families with whom I work,” Lucy confirms. “I have been a palliative care music therapist for almost 20 years (the past 13 with Mercy Health) and in that time, I have noticed families of diverse cultural backgrounds engage with and respond to palliative care and music therapy in myriad different ways. I've always been interested in cultural issues in healthcare, and how a person's background, beliefs, traditions and worldview shape their engagement with services such as palliative care. There is rich therapeutic potential in understanding how they might use music to promote health and wellbeing, and as a support strategy when someone is dying.”

Lucy first recognised music's potential as a transcultural healthcare tool early in her career. “I completed a Masters of Music in ethnomusicology at Goldsmiths College, University of London,” she says. “It broadened my understanding of how I could be a music therapist and researcher, prompting me to think about how we all — patients/families and clinicians — shape clinical interventions and the ways in which care is provided to patients and families. It has particular resonance in how we communicate around difficult topics, such as death and dying, while respecting family and cultural needs.

“Knowing my research can make a direct and immediate difference in my clinical work and can improve the service I provide for the children and their families is very rewarding. I also enjoy finding answers to questions; if what I normally do doesn't work or isn't culturally appropriate, I try and find another way to make the music therapy service meet the needs of the child and family. It's fascinating to learn what is important to people, what music means to them and how this can shape the way I work with them.”

As the needs of each family and culture are unique, Lucy appears to have found an endlessly productive avenue to personalise the support music therapists can provide. “I hope to continue exploring cultural issues in healthcare, which is a huge and critical area,” she confirms. “I feel like my research is only the beginning of a long journey, or conversation, and that there is still much to explore and discuss — not only in paediatrics, but across a person's lifespan.

“My current research is also focussed solely on paediatric patients aged 0-12 years and their families. In future I aim to research how my adult clients and their carers use music and music therapy in palliative care, in both inpatient and home-based care.

“I am also interested in examining the role of music therapy with particular client groups, such as bereaved adults and adults with progressive neurological conditions, in which there has been little research undertaken to date.”

Lucy's pioneering work has been fostered with enthusiasm by her professional and academic mentors. “I could not have undertaken this research without the support and guidance of my supervisors, Assoc Prof Clare O'Callaghan and Prof Denise Grocke,” she says. “Both eminent and world-renowned pioneers in music therapy clinical work and research, they are two of the most inspiring, generous, wise and brilliant women I have ever had the privilege and pleasure to work with and learn from.

“My team at Mercy Palliative Care have been equally supportive: my Manager, Fran Gore and my nursing, allied health and administration colleagues. I'm so grateful for their ongoing support and interest in my research, and particularly for their help with recruitment. They are, quite simply, an amazing team to work with.”



Health Services, Ambulatory, Allied Health and Community Services Program

Mercy Health O'Connell Family Centre

O'Connell Family Centre continues to provide support and education to Victoria's vulnerable children and their families.

Research projects

Measuring the Impact of Infant Care at Sleep Transition: Monitoring Effects on Infant Stress Regulation When Exposed to Response Based Settling Interventions.

Stevens H, Middlemiss W, Ridgeway L, McDonald S.

This study was funded by Safe Sleep Space and Department of Business Innovation – Innovations Voucher Program Grant.

Since the appointment of the new Research Assistant the study attrition rate has decreased significantly. At this time there are 16 completed samples.



O'Connell Family Centre focuses on the needs of infants and their families

Mercy Health Lymphoedema Services

Mercy Health Lymphoedema Services (MHLS) provides outpatient services to men, women and children who are at risk of lymphoedema or are diagnosed with primary or secondary lymphoedema.

A multidisciplinary team consisting of medical practitioners, lymphoedema therapists, social workers, dieticians and allied health assistants provides services at clinics in East Melbourne and Heidelberg.

Research activity

Research activity has increased at MHLS during 2014, reflecting the keen interest of staff in using resources at hand to improve patient care through research. Outside agencies have also approached MHLS to request staff participation in research projects or to conduct projects within MHLS. Austin Health requested input into a project using bioimpedance to investigate early identification of lymphoedema in women after axillary surgery. Collaboration with Melbourne Health has enabled a PhD candidate to invite lymphoedema outpatients to participate in a study using ultrasound to investigate skin structure in patients with ulcers and lymphoedema.

Ms Susie Grabsch, Lymphoedema Physiotherapist, presented a poster highlighting innovative bandaging methods in a case study to control lymphoedema in an outpatient unable to access the usual bandaging program.

Research projects

Establishing the reliability of the digital tonometer/ Electronic Indurometer in assessment of lower limb primary lymphoedema (Mercy Health Ethics R13/16) (completed)
Phillips J

Identification of lymphoedema in women post-axillary surgery using bioimpedance spectroscopy (Mercy Health Ethics R14/24).

Baker C (Principal Investigator), Austin Health Breast Unit; Loh N, Berney S, Phillips J, Foster E, Ardroom I, Hyett A, Moss A, Said C (Researchers) Ethics approval received from Mercy Health and Austin Health; agreement between Mercy Health and Austin Health signed; data collection to commence.

High frequency ultrasound imaging of structural and anatomical skin characteristics in people with lymphoedema and chronic lower limb ulceration. (Mercy Health Ethics R01/14) James S (Principal Investigator)

Key achievements

Ms Jane Phillips, Senior Clinician-Lymphoedema Physiotherapist, completed a Graduate Certificate in Research Methods through James Cook University after finishing a reliability study on the tonometer in objective measurement of lymphoedema. Jane also had her first peer-reviewed paper published and became the lymphoedema advisor for a research project at Austin Health Breast Services. A presentation to the Austin Health Wound Seminar Day led to an invitation to be the Allied Health Representative on the research committee for AWMA (Australian Wound Management Association).

Ms Penelope Sanderson has submitted her final thesis for a Masters of Enterprise (Executive) at the University of Melbourne.

Ms Annie Barry is currently completing a Master of Public Health consisting of a systematic review of research on lymphoedema and diet.

Two members of staff (Ms Penelope Sanderson, Manager and Ms Jane Phillips, Senior Clinician – Lymphoedema Physiotherapist) sit on the Research Committee for the Australasian Lymphology Association (ALA).

Multicultural Services

Mercy Hospital for Women

The Multicultural Services unit assists culturally and linguistically diverse (CALD) consumers to overcome barriers to accessing services at the hospitals and supports staff to provide culturally responsive care.

Our services include:

- language services for consumers who have limited or no English proficiency
- African liaison and support for women and families at Mercy Hospital for Women
- Family and Reproductive Rights Education Program (FARREP) which works with communities that traditionally practice female genital mutilation/cutting (FGM/C)
- liaison and partnerships with CALD communities and their representative organisations.

Research activity

A growing number of migrants and refugees who come from countries that practise female genital mutilation/cutting (FGM/C) have settled in Australia over the last few decades. FGM/C includes “procedures that intentionally alter or cause injury to female genital organs for non-medical reasons. The procedure has no health benefits for girls and women.” (World Health Organization (WHO), 2014).

Since 1998, Mercy Hospital for Women through FARREP has been working with women from affected communities. It was through this work that the need for this study was identified.

The *Supporting young women who have experienced FGM/C* project was funded through the FGM Support Grant from the Australian Government, Department of Health. The overall aim of the project was to explore experiences of young women (18-25 years old) from FGM/C affected communities to determine ways to develop, improve and deliver support services that are culturally and age appropriate, and increase understanding of FGM/C and its consequences.

Semi-structured interviews and focus groups were conducted with twelve young women and three key stakeholders who work with young women who have experienced FGM/C. Data acquired underwent thematic analysis and a full project report is available in the Reports and Newsletters section of the Mercy Health website:

<http://www.mercyhealth.com.au/au/ourorganisation/Documents/Mercy%20Health%20FGM%20Project%20Report%202014.PDF>

Research projects

Supporting young women who have experienced female genital mutilation/cutting (FGM/C)

Nesvadba N, Hussein S, Pliszka M, Oyekanmi W

Funding body: Australian Government, Department of Health – FGM Support Grant



Multicultural Services Unit (left to right) Wemi Oyekanmi, Natalija Nesvadba, Magdalena Pliszka and Suleeqa Hussein

Health Services, Mental Health Services Program

Perinatal Mental Health

Mercy Hospital for Women

Perinatal Mental Health continues to provide clinical services to Mercy Hospital for Women and undertake research through the clinical affiliations in the hospital.

Assoc Prof Megan Galbally and collaborators from Deakin University, MCRI and University of Melbourne have continued the Mercy Pregnancy and Emotional Wellbeing Study funded by a National Priority Research Grant from Beyond Blue. This study has been made possible through coordination by Jacinta Holland and Tina Vaiano and the significant assistance of a number of postgraduate psychology students from Deakin University.

Perinatal Mental Health has had two doctoral psychology students on placement under the supervision of Senior Clinical Psychologist Viviane Lebnan.

Assoc Prof Megan Galbally, Dr Martien Snellen and Assoc Prof Andrew Lewis have completed an invited edited book for Springer: *Psychopharmacology in Pregnancy – Treatment Efficacy Risks and Guidelines* with contributed chapters from eminent authors from Australia, USA, U.K, Canada, Italy and Austria.

Research projects

Antenatal Care of Women with Schizophrenia and Bipolar Disorder

Snellen M, Galbally M, Blankley G, Power J, Lewis A

Mercy Pregnancy and Emotional Wellbeing Study (MPEWS)

Galbally M, Lewis A, Permezel M, Lappas M, IJzendoorn M, Saffery R, Ryan J, Brooks N, Reynolds J, Buist A, Watkins A, Blankley G, Power J

Key achievements

Assoc Prof Galbally and Dr Snellen were both invited expert advisors for the revised Clinical Practice Guidelines for Mood Disorders, RANZCP.

Assoc Prof Galbally is the Past President of the Australasian Marcé Society and an elected member of the Executive of the International Marcé Society.

Dr Gaynor Blankley is the current Treasurer for the Australasian Marcé Society and Dr Josephine Power is the Editor.

Mercy Health Human Research Ethics Committee

In 2014 Mercy Health HREC approved 46 research proposals.

Of these 37 (81%) were based at the Mercy Hospital for Women, 6 (13%) based at Werribee Mercy Hospital, 1 (2%) based at the O'Connell Family Centre and 2 (4%) at Palliative Care facilities.

Of the 37 new approved research projects at Mercy Hospital for Women in 2014, 21 (57%) were internally generated and funded and 16 (43%) were externally generated and funded.

The external partners included Royal Children's Hospital/ Murdoch Children's Research Institute, Royal Women's Hospital, Royal Melbourne Hospital, Austin Health, University of Melbourne, (external students), Monash University, La Trobe University and Deakin University.

The majority of the 37 research proposals were based in obstetrics and maternity services (15) (41%), with paediatrics next highest (6) (16%), and the rest of the departments, gynaecological oncology, endosurgery, anaesthesia, breastmilk bank, lymphoedema clinic and allied health services registering between 1 and 3 new research projects in 2014.

At Werribee Mercy Hospital of the six approved research projects 4 (66%) were internally generated and funded and two (33%) originated from 'outside' sources, including Women's & Children's Health Research Institute, Adelaide and the University of Notre Dame.

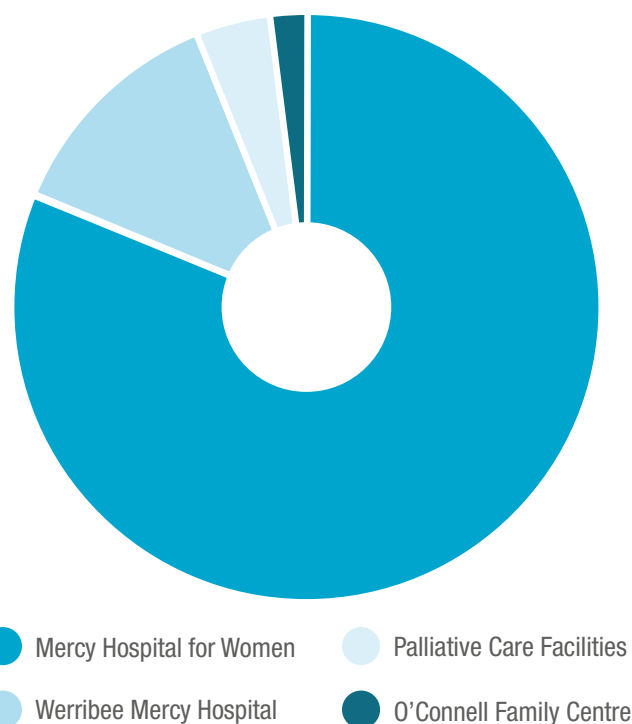


Fig. 1: Breakdown of Mercy Health HREC approved research proposals for 2014

The majority of the research was based within Obstetrics and Maternity Services while one research proposal involved the Palliative Care department.

Two of the six research projects concentrated on diabetes (in pregnant women and in palliative care).

The research undertaken and completed at the O'Connell Family Centre in 2014 was a QA activity on the effectiveness of pre admission consultations.

The two pieces of research involving palliative care services are both audits but with quite different outcomes. One is being undertaken at Mercy Palliative Care Sunshine by a Community Registrar to identify 'referral patterns' to the facility. The other originates from Cancer Services, Western Hospital and seeks to audit the level of palliative chemotherapy usage as measured by health records. It is hoped this will help optimise care for patients at the end of life.

Full activity within the HREC

	2014
New negligible and low risk research projects endorsed by HREC following approval by the Expedited Review Working Party	36
New research projects approved by HREC at its bi-monthly meetings	10
New research projects not approved by the year end period	2
New research projects still to be approved by HREC at year end period	9
Total of new research projects seen throughout the year	57
Number of amendments approved to previously approved research projects	94
Number of progress reports of approved research reviewed by HREC in 2013	87
Number of research projects completed (a final report may be a publication in a preferred journal, conference paper or report to HREC)	30

HREC membership

In June 2014 Ms Wendy Brooks stepped down from her role with Mercy Health HREC. However, the committee retained lay representation with Ms Christine Childs and Mr Kevin Fell.

In August Mr James Dwyer, Director of Pharmacy at Mercy Hospital for Women, joined to provide his particular expertise.

In December 2014, three long standing members of Mercy Health HREC retired: Ms Geraldine Gray (Lawyer), Assoc Prof Michael McKay (Allied Health Professional) and Mr Kevin Fell (Layman).

The committee wishes to thank past members for their commitment and support of many years.



Prof John Ozolins, Chair, Mercy Health Human Research Ethics Committee

Projects approved by Mercy Health Human Research Ethics Committee as more than Low Risk Research January to December 2014

PROJECT TITLE	PRINCIPAL INVESTIGATOR
<i>ICON 8: An international phase III randomised trial of dose-fractionated chemotherapy compared to standard three-weekly chemotherapy, following immediate primary surgery or as part of delayed primary surgery, for women with newly diagnosed cancers</i>	Assoc Prof Linda Mileshekin, Department of Gynaecological Oncology, Mercy Hospital for Women
<i>A comparison of continuous and intermittent infusions of vancomycin in neonates</i>	Prof Nigel Curtis, Royal Children's Hospital/ Murdoch Children's Research Institute
<i>Long-term reproductive, sexual, urinary and genital sensation outcomes of young women with Congenital Adrenal Hyperplasia: The RCH experience</i>	Assoc Prof Sonia Grover, Mercy Hospital for Women
<i>Genomics and Pregnancy (GaP Study)</i>	Prof Jane Halliday, Murdoch Childrens Research Institute
<i>Improving the Prediction & Detection of Risk Factors for Term Stillbirth</i>	Prof Susan Walker, MFM, Mercy Hospital for Women
<i>Can Narrowband Imaging Improve the Laparoscopic Identification of Endometriosis?</i>	Dr Tony Ma, Endosurgery Fellow, Mercy Hospital for Women
<i>Pilot Study to assess the possible role of the Mirena Intrauterine Device in the management of endometrial polyps.</i>	Dr Tony Ma, Endosurgery Fellow, Mercy Hospital for Women
<i>Health Consequences for mother and baby of substantial pre-conception weight loss in obese women</i>	Assoc Prof Alison Nankervis, Department of Diabetes and Endocrinology, Royal Melbourne Hospital
<i>Omega 3 Fats to reduce the incidence of Prematurity – The ORIP Trial</i>	Dr Mandy Anderson, Women's & Children's Health Research Institute, Adelaide/Dr Jacqueline Van Dam, Head of Obstetrics and Maternity Services, Werribee Mercy Hospital
<i>Early Screening for Gestational Diabetes at Werribee Mercy Hospital</i>	Assoc Prof David O'Neal, Clinical Services Director, Werribee Mercy Hospital
<i>Nurses' survey of women's experience who have had Laser or LLETZ Treatment</i>	Clinical Nurse Consultant Denise Heys, Mercy Hospital for Women
<i>Correlation of voiding symptoms with urodynamic voiding dysfunction in women.</i>	Assoc Prof Joe Lee, Urogynaecology Department, Mercy Hospital for Women
<i>Association between maternal size and outcomes for caesarean section: A Multicenter prospective observational study (the MUM SIZE Study).</i>	<i>Prof David Story, Austin Health</i> Clinical Assoc Prof Scott Simmons, Department of Anaesthesia, Mercy Hospital for Women

PROJECT TITLE	PRINCIPAL INVESTIGATOR
<i>Current guidelines for thrombophilia and bleeding disorder testing in women: Are the right women being tested? An audit of Mercy Hospital for Women experience</i>	Assoc Prof Sonia Grover, Mercy Hospital for Women
<i>The effect of glycaemic control on the development of peripheral neuropathy in the hands of diabetic patients</i>	Assoc Prof Michael Dodson, University of Notre Dame, Melbourne Clinical School
<i>Using the smell and taste of milk to improve milk tolerance and the growth of preterm infants.</i>	Dr Gillian Opie, Department of Paediatrics , Mercy Hospital for Women
<i>Noninvasive prenatal testing for fetal aneuploidy in Australia and New Zealand – a survey of obstetric sonologists</i>	Dr Lisa Hui, Dept. of Perinatal Medicine, Mercy Hospital for Women
<i>In-hospital palliative and end-of-life care of people with diabetes mellitus at Werribee Mercy Hospital</i>	Assoc Prof David O'Neal, Clinical Services Director, Werribee Mercy Hospital
<i>Evaluation of Pre Admission Consultations at Mercy Health O'Connell Family Centre</i>	Ms Kirsty Evans, Manager, O'Connell Family Centre
<i>Investigation of the Optimal Cooling period for hypothermic treatment of Hypoxic Ischemic Encephalopathy (HIE) in term neonates. (OCHIE)</i>	Ms Danielle Forster, Department of Paediatrics
<i>Laparoscopic or open appendectomy for suspected appendicitis in pregnancy, evaluation of fetal outcomes in Australia</i>	Dr Jurstine Daruwall, Austin Health
<i>The Australian Cervical Cancer Typing Study (ACCTS)</i>	Dr Marsali Newman, Austin Health
<i>Evaluation of a maternal critical care education program. A pilot and feasibility study</i>	Dr Wendy Pollock, Research Fellow, Midwifery Professional Unit, La Trobe University
<i>Introducing Problem Elimination into Birthing Suite: Frontline Problem Solving Approach</i>	Ms Julie Kane, Midwife, Mercy Hospital for Women
<i>Colloidal structure formation and transformation during digestion of human milk</i>	Professor Ben Boyd, Monash University
<i>Testing the feasibility of an intervention program to promote healthy nutrition, physical activity and weight gain in pregnant women</i>	Assoc Prof Karen Campbell, Deakin University
<i>An audit of central line insertion practice</i>	Dr James Holberton, Department of Paediatrics, Mercy Hospital for Women
<i>High frequency ultrasound imaging of structural and anatomical skin characteristics in people with lymphoedema and chronic lower limb ulceration</i>	Professor Nick Santamaria, Professor of Nursing Research, University of Melbourne
<i>A Randomised Controlled Trial Investigating the Influence of BCG and Hepatitis B Immunisation at Birth on Neonatal Immune Responses. (The Early Life Vaccine and Immunity Study – ELVIS)</i>	Professor Nigel Curtis, Royal Children's Hospital/ Murdoch Children's Research Institute
<i>Pregnant, parenting and a long way from home: International students in Victoria accessing public maternity care. (Phase 1: Interviews with stakeholders other than students)</i>	Ms Jane Middleton, Social Worker, Mercy Hospital for Women

PROJECT TITLE	PRINCIPAL INVESTIGATOR
<i>A comparison of the changes in the inguino-scrotal anatomy of infants into adulthood</i>	Prof John M Hutson, Royal Children's Hospital
<i>Persistent reversed end-diastolic flow in the middle cerebral artery: An ominous finding. A case report.</i>	Dr Fiona Brownfoot, University of Melbourne Department, Mercy Hospital for Women
<i>Repeated failed NIPT results due to low cell-free fetal DNA fraction in a woman with severe autoimmune disease – A case report of cell -free fetal fraction before and after treatment with intravenous immunoglobulin</i>	Dr Lisa Hui, Maternal fetal medicine subspecialist, Mercy Hospital for Women
<i>Implementation of best practice in patient observation within the Neonatal Special Care Unit at Werribee Mercy Hospital.</i>	Ms Meagan Ward, Quality Unit Mercy Health
<i>Regulation of vascular function in pre-eclampsia</i>	Dr Natalie Hannan, University of Melbourne Department, Mercy Hospital for Women
<i>A prospective case-control study to examine for the presence of nerve fibres in the endometrium and the usefulness of endometrial biopsy as a diagnostic test for endometriosis.</i>	Dr Emma Readman, Endosurgery Department, Mercy Hospital for Women
<i>Work Practices of Sonographers performing Neonatal Cranial Ultrasound in Australian Hospitals</i>	Assoc Prof Michal Schneider, Monash University
<i>Could the use of transcutaneous bilirubinometers reduce the investigative burden associated with the assessment of jaundice normal newborns?</i>	Dr Clare Collins, Neonatal Consultant, Mercy Hospital for Women
<i>Amniotic fluid cell-free fetal RNA: Developing methods for detecting potential biomarkers of fetal development</i>	Dr Lisa Hui, Department of Perinatal Medicine, Mercy Hospital for Women
<i>Identification of lymphoedema in women post axillary surgery using Bioimpedance Spectroscopy</i>	Dr Caroline Baker, Head of Breast Service, Austin Health
<i>Understanding human influenza – specific T cell population</i>	Assoc Prof Nicole La Gruta, University of Melbourne
<i>Does Implementation of the Fetal Surveillance Education Program (FESP) decrease the incidence of low APGAR scores in Victorian Maternity Centres?</i>	Dr Rilka Lee, HMO, Mercy Hospital for Women
<i>Experience & management of Obstetric Haemorrhage in a Secondary Hospital – A retrospective chart review at Werribee Mercy Hospital</i>	Dr Ana Licina, Anaesthesia Consultant, Werribee Mercy Hospital
<i>Urinary Markers of salt retention in hypertensive disorders of pregnancy.</i>	Dr Kathy Paizis, Consultant Nephrology, Austin Health
<i>Symptom prevalence, referral patterns and outcomes in residential aged care clients referred to a community palliative care service.</i>	Dr Catherine Brimblecombe, Community Registrar, Mercy Palliative Care, Sunshine
<i>Prospective analysis of 30 day mortality following chemotherapy for cancer at Western Hospital</i>	Assoc Prof Lara Lipton, Cancer Services, Western Hospital

In print and online

Health Services, Women's and Children's Services Program

Department of Urogynaecology

Manning J, Dwyer P, Rosamilia A, Colyvas K, Murray C, Fitzgerald E. A multicentre, prospective, randomised, double-blind study to measure the treatment effectiveness of abobotulinum A (AboBTXA) among women with refractory interstitial cystitis/bladder pain syndrome. *Int Urogynecol J*. 2014 ;25(5):593-9.

Ulrich D, Dwyer P, Rosamilia A, Lim Y, Lee J. The Effect of Vaginal Pelvic Organ Prolapse Surgery on Sexual Function. *Neurourol Urodynam* 2014 Feb 5.

Riss P, Dwyer PL. The POP-Q classification system: looking back and looking forward. *Int Urogynecol J*. 2014 25(4):439-40.

Dwyer PL, Riss P. Carcinogenicity of implanted synthetic grafts and devices. *Int Urogynecol J*. 2014 May;25(5):567-8.

Cvach K, Dwyer PL, Rosamilia A, Lim Y, Schierlitz L. A prospective observational study of lower urinary tract symptoms before and after surgical removal of a large pelvic mass. *Int Urogynecol J*. 2014 Jul 16.

Dwyer PL, Riss P, Haylen BT. Does it matter what we measure? Core outcomes, the IUJ and the CROWN and COMET initiatives. *Int Urogynecol J*. 2014 Jul 30.

Dwyer PL. Choice of pelvic organ prolapse surgery: vaginal or abdominal, native tissue or synthetic grafts, open abdominal versus laparoscopic or robotic. *Int Urogynecol J*. 2014 Jul 15.

Riss P, Dwyer PL, Swift S. Moving from case reports to images in urogynaecology. *Int Urogynecol J*. 2015 26; 1; 1.

Riss P, Dwyer PL. Medical Journal Impact Factor 2013: ongoing task of getting the right balance. *Int Urogynecol J*. 2014 25; 160, 1-2.

Kaplan F, Alvarez J, Dwyer P. Nonsurgical separation of complete labial fusion using a Hegar dilator in postmenopausal women. *Int Urogynecol J*. 2014 Nov 5. (Epub ahead of print).

Wong V, Shek KL, Rane A, Lee J, Rosamilia A, Dietz HP. A Comparison of two different mesh kit systems for anterior compartment prolapse repair. *Aust N Z J Obstet Gynaecol* 2014; 54(3): 212-217.

Haylen BT, Lee J, Maher CF, Deprest J, Freeman R. Optimizing study design for inter-observer reliability: IUGA-ICS classification of complications of prostheses and graft insertion. *Int Urogynecol J* 2014; 25(6): 751-4.

Lee J, Rosamilia A, Lim YN, (Ulrich D, Mueller R), Dwyer P. MiniArc and Monarc suburethral sling in women with stress urinary incontinence – a randomised controlled trial – 24m follow up. *Int Urogynecol J* 2014;25 (Suppl 1):S3-S5. *Female Pelvic Med Reconstr Surg* 2014; 20(4, Suppl):S2-S3.

Agnew G, Dwyer PL, Rosamilia A, Lim YN, Edwards G, Lee J. Functional outcomes following surgical management of pain, exposure or extrusion following a suburethral tape insertion for urinary stress incontinence. *Int Urogynecol J* 2014; 25:235-239.

Alvarez J, Schierlitz L, Dwyer P, Rosamilia A, Murray CJ, Lee J. A randomised controlled study comparing tension free vaginal tape (TVT) and Monarc transobturator tape in treatment of women with urodynamic stress incontinence and intrinsic sphincter deficiency with a mean follow up of 60 months. *Int Urogynecol J* 2014; 25(Suppl 1):S7-S8; *Female Pelvic Med Reconstr Surg* 2014; 20(4,Suppl):S4.

Endosurgery Department

Ellett L, Villegas R, Beischer A, Ong N, Maher P. Use of a Multimedia Module to Aid the Informed Consent Process in Patients Undergoing Gynecologic Laparoscopy for Pelvic Pain: Randomized Controlled Trial. *JMIG* 2014;21(4):602-611.

Piessens S, Healey M, Maher P, Tsaltas J, Rombauts L. Can anyone screen for deep infiltrating endometriosis with transvaginal ultrasound? *ANZJOG*. 2014;54(5):462-468.

McIlwaine K, Manwaring J, Ellett L, Cameron M, Readman E, Villegas R, Maher P. The effect of patient body mass index on surgical difficulty in gynaecological laparoscopy. *ANZJOG*. 2014;54(6):564-569.

University of Melbourne Department

Heng YJ, Liong S, Permezel M, Rice GE, Di Quinzio MKW, Georgiou HM. Predicting spontaneous term labour: The interplay of the IL-1 system. *Reprod. Sci.* 21 (1): 122-130, 2014.

Liong S, Lappas M. The stress-responsive heme oxygenase (HO)-1 isoenzyme is increased in labouring myometrium where it regulates contraction associated proteins. *American Journal of Reproductive Immunology* (accepted December 2014).

Lappas M. GSK3 β is increased in adipose tissue and skeletal muscle from women with gestational diabetes where it regulates the inflammatory response. *PLoS One* (accepted December 2014).

Lim R, Lappas M. A novel role for GSK3 in the regulation of the processes of human labour. *Reproduction* (accepted December 2014).

Lim R, Barker G, Lappas M. The transcription factor Nrf2 is decreased after spontaneous term labour in human fetal membranes where it exerts anti-inflammatory properties. *Placenta* (accepted November 2014).

Lappas M. Effect of spontaneous term labour on the expression of the NR4A receptors Nurr1, Nur77 and NOR1 in human fetal membranes and myometrium. *Reproduction, Fertility and Development* (accepted October 2014).

Lim R, Barker G, Lappas M. Human cathelicidin antimicrobial protein 18 (hCAP18/LL-37) is increased in fetal membranes and myometrium after spontaneous labour and delivery. *Journal of Reproductive Immunology* (accepted October 2014).

Peiris HN, Lappas M, Georgiou HM, Vaswani K, Salomon C, Rice GR, Mitchell MD. Myostatin in the placentae of pregnancies complicated with gestational diabetes mellitus. *Placenta* (accepted October 2014).

Lappas M, Jinks D, Ugoni A, Louizos CC, Permezel M, Georgiou HM. Postpartum plasma C-peptide and ghrelin concentrations are predictive of type 2 diabetes in women with previous gestational diabetes mellitus. *Journal of Diabetes* (accepted August 2014).

Lim R, Liong S, Barker G, Lappas M. Slit2 is decreased after spontaneous labour in myometrium and regulates pro-labour mediators. *J Reprod Immunol* (accepted July 2014).

Lappas M. Insulin-like growth factor-binding protein 1 and 7 concentrations are lower in obese pregnant women, women with gestational diabetes and their fetuses. *J Perinatol*. 2014 (accepted July 2014).

Lappas M. Cellular Inhibitors of apoptosis proteins cIAP1 and cIAP2 are increased after labour in foetal membranes and myometrium and are essential for TNF- α -induced expression of pro-labour mediators. *Am J Reprod Immunol* (accepted July, 2014).

Lim R, Lappas M. Slit2 exerts anti-inflammatory actions in human placenta and is decreased with maternal obesity. *Am J Reprod Immunol* 106:76-88, 2014.

Morwood CJ, Lappas M. The citrus flavone nobiletin reduces pro-inflammatory and pro-labour mediators in fetal membranes and myometrium: Implications for preterm birth. *PLoS One* 9(9):e108390, 2014.

Boyle KE, Hwang H, Janssen RC, DeVente JM, Barbour LA, Hernandez TL, Mandarin LJ, Lappas M, Friedman JE. Gestational diabetes is characterized by reduced mitochondrial protein expression and altered calcium signaling proteins in skeletal muscle. *PLoS One* 9(9):e106872, 2014.

Paiva P, Lappas M, Barker G, Healey M. Using symptom scores, lifestyle measures and biochemical markers to create a test for endometriosis. *Journal of Endometriosis and Pelvic Pain Disorders* 6(3):135-143, 2014.

Lappas M. The NR4A receptors Nurr1 and Nur77 are increased in human placenta from women with gestational diabetes. *Placenta* 35(11):866-875, 2014.

Liong S, Lappas M. Endoplasmic reticulum stress is increased after spontaneous labor in human fetal membranes and myometrium where it regulates the expression of pro-labor mediators. *Biol Reprod* 91(3):70, 2014.

Lappas M. Cellular inhibitors of apoptosis (cIAP) 1 and 2 are increased in placenta from obese pregnant women. *Placenta* 35(10):831-838, 2014.

- Hastie R, Lappas M. The effect of pre-existing maternal obesity and diabetes on placental mitochondrial content and electron transport chain activity. *Placenta* 35(9):673-683, 2014.
- Lappas M. NOD1 expression is increased in the adipose tissue of women with gestational diabetes. *J Endocrinol* 222(1):99-112, 2014.
- Lim R, Lappas M. Differential expression of AP-1 proteins in human myometrium after spontaneous term labour onset. *Eur J Obstet Gynecol Reprod Biol* 177:100-105, 2014.
- Lappas M. Markers of endothelial cell dysfunction are increased in human omental adipose tissue from women with pre-existing maternal obesity and gestational diabetes. *Metabolism* 63(6):860-873, 2014.
- Lim R, Morwood CJ, Barker G, Lappas M. Effect of silibinin in reducing inflammatory pathways in vitro and in vivo models of infection-induced preterm birth. *PLoS One* 19;9(3):e92505, 2014.
- Lim R, Barnes M, Lappas M. The TLR2 ligand FSL-1 and the TLR5 ligand flagellin mediate pro-inflammatory and pro-labour response via MyD88/TRAFF6/NF- κ B-dependent signalling. *Am J Reprod Immunol* 71(5):401-417, 2014.
- Poljak M, Lim R, Barker G, Lappas M. Class I to III histone deacetylases differentially regulate inflammation-induced matrix metalloproteinase 9 expression in primary amnion cells. *Reprod Sci* 21(6):804-813, 2014.
- Lappas M. Effect of pre-existing maternal obesity, gestational diabetes and adipokines on the expression of genes involved in lipid metabolism in adipose tissue. *Metabolism* 63(2):250-262, 2014.
- Lappas M. Activation of inflammasomes in adipose tissue of women with gestational diabetes. *Mol Cell Endocrinol* 382(1):74-83, 2014.
- Liong S, Di Quinzio M, Pell G, Permezel M, Rice G, Georgiou H. New biomarkers for the prediction of spontaneous preterm labour in symptomatic pregnant women: a comparison with fetal fibronectin. *Brit J Obstet Gynaecol*. (e-pub 24 July 7 2014).
- Macintire K, Tuohey L, Ye L, Palmer KP, Tong S*, Kaitu'u-Lino T*. PAPP2 is increased in severe early onset preeclampsia and up regulated with hypoxia. *Reproduction, Fertility and Development* 2014;26(2):351-7.
- Menkhorst EM, Gamage T, Cuman C, Kaitu'u-Lino T, Tong S, Dimitriadis E. Galectin 7: adhesion molecule of implantation and serum biomarker of miscarriage. *Placenta* 2014; 35(3):195-201.
- Hannan N, Bambang K, Kaitu'u-Lino TJ, Konje JC, Tong S. A bioplex analysis of cytokine and chemokines in first trimester maternal plasma to screen for predictors of miscarriage. *PLOS One* 2014 9(4):e93320.
- Horne A, Skubisz MM, Tong S, Duncan WC, Neil P, Wallace EM, Johns TG. Combination gefitinib and methotrexate treatment for non-tubal ectopic pregnancies: a case series. *Human Reproduction* 2014;29(7):1375-9.
- Brownfoot FC, Hannan N, Onda K, Tong S, Kaitu'u-Lino T. Soluble endoglin production is upregulated by oxysterols but not quenched by pravastatin in primary placental and endothelial cells. *Placenta* 2014; 35(9):724-31.
- Whitehead CL, Tong S. Measuring hypoxia-induced RNA in maternal blood: a new way to identify critically hypoxic fetuses in utero? *Expert Reviews in Molecular Diagnostics* 2014;14(5):509-11.
- Stock O, Gordon L, Kapoor J, Walker SP, Whitehead CL, Kaitu'u-Lino T, Pell G, Hannan NJ, Tong S. Chorioamnionitis occurring in women with preterm rupture of the fetal membranes is associated with a dynamic increase in mRNAs coding cytokines in the maternal circulation. *Reproductive Sciences* 2014 (Accepted November 2014).
- Onda K, Tong S, Nakahara A, Kondo M, Monchusho H, Hirano T, Kaitu'u-Lino T, Beard S, Binder N, Tuohey L, Brownfoot F and Hannan NJ. Sofalcone up-regulates the nuclear factor (erythroid-derived 2)-like 2 /heme-oxygenase-1 pathway, reduces sFlt-1 and quenches endothelial dysfunction: a potential therapeutic for preeclampsia. *Hypertension* 2014 (Accepted December 2014).
- Kaitu'u-Lino TJ, Hastie, R, Cannon, P, Lee, S, Stock, O, Hannan, NJ, Hiscock, R, Tong, S. Stability of absolute copy number of housekeeping genes in preeclamptic and normal placentas, as measured by digital PCR. *Placenta* 2014 (In press; accepted October 2014).
- Kaitu'u-Lino TJ, Hastie R, Cannon P, Binder NK, Lee S, Stock O, Hannan NJ, Tong S. Placental SEMA3B expression is not altered in severe early onset preeclampsia. *Placenta* 2014 (In press; accepted October 2014).
- Kaitu'u-Lino TJ, Tong S, Beard S, Hastie R, Tuohey L, Brownfoot F, Onda K, Hannan NJ. Characterization of protocols for primary trophoblast purification, optimized for functional investigation of sFlt-1 and soluble endoglin. *Pregnancy Hypertension: An International Journal of Women's Cardiovascular Health* 2014 (In press; accepted 24 September 2014).
- Tong S, Skubisz MM, Horne AH. Molecular diagnostics and therapeutics for ectopic pregnancy. *Molecular Human Reproduction*. 2014 Sept 17 (Epubmed).

- Hastie R, Tong S, Cannon P, Brownfoot F, Hannan NJ, Kaitu'u-Lino. Peptides do not prevent cleavage of endoglin to produce soluble endoglin. *Pregnancy Hypertension* 2014;4(4): 255-258.
- Whitehead C, Tong S, Wilson D, Howard M, Walker SP. Treatment of early-onset preeclampsia with continuous positive airway pressure. *Obstetrics and Gynecology* 2014 (In press: accepted August 2014).
- Evans J*, Hannan NJ*, Edgell TA, Vollenhoven BJ, Lutjen PJ, Osianlis T, Salamonsen LA, Rombauts LJ. Fresh versus frozen embryo transfer: backing clinical decisions with scientific and clinical evidence. *Hum Reprod Update*. 2014 Nov;20(6):808-21.
- Binder NK, Evans J, Gardner DK, Salamonsen LA, Hannan NJ. Endometrial signals improve embryo outcome: functional role of vascular endothelial growth factor isoforms on embryo development and implantation in mice. *Hum Reprod*. 2014 Oct 10;29(10):2278-86.
- Wojcieszek AM, Stock OM, Flenady V. Antibiotics for prelabour rupture of membranes at or near term. *Cochrane Database Syst Rev*. 2014 Oct 29;10.
- Flenady V, Wojcieszek AM, Papatsonis DN, Stock OM, Murray L, Jardine LA, Carbonne B. Calcium channel blockers for inhibiting preterm labour and birth. *Cochrane Database Syst Rev*. 2014 Jun 5;6:CD002255.
- Stock O, Beckmann M. Why group & save? Blood transfusion at low-risk elective caesarean section. *Aust N Z J Obstet Gynaecol*. 2014 Jun;54(3):279-82.
- Brownfoot FC, Arora V, Hickey M, Ang CW, McNally O. Complex atypical hyperplasia of the endometrium: differences in outcome following conservative management of pre- and postmenopausal women. *Reproductive Sciences* 2014 21(10):1244-8.
- Inge P, Brownfoot FC, Trimbos B, Hickey M. 2014. 'What is the place of hormone replacement therapy in ovarian, endometrial and breast cancer?' in AJ Ledermann, CL Creutzberg, MA Quinn (eds), *Controversies in the management of gynecological cancers*, Springer, 237-47.
- Forster DA, Jacobs S, Amir LH, Davis P, Walker SP, McEgan K, Opie G, Donath SM, Moorhead AM, Ford R, McNamara C, Aylward A, Gold L. Safety and efficacy of antenatal milk expressing for women with diabetes in pregnancy: protocol for a randomised controlled trial. *BMJ Open* 2014 Oct 30;4(10):e006571.
- McCarthy EA, Walker SP. International fetal growth standards: one size fits all. *Lancet* 2014 Sep 6;384(9946):835-6.
- McCarthy EA, Shub A, Robinson M, McDowell R, Permezel M, Walker SP. Successful external cephalic version does not confer a measurable increased risk of intrapartum cesarean section in modern obstetric practice. *Acta Obstet Gynecol Scand*. 2014 May;93(5):522-3.
- Walker SP, Ugoni AM, Lim R, Lappas M. Inverse relationship between gestational weight gain and glucose uptake in human placenta from female fetuses. *Pediatr Obes*. 2014 Jun;9(3):e73-6.
- Hui L, Teoh M, da Silva Costa F, Ramsay P, Palma-Dias R, Richmond Z, Piessens S, Walker S. Clinical implementation of cell-free DNA based aneuploidy screening: perspectives from a national audit. *Ultrasound Obstet Gynecol*. 2014 Oct 17. doi: 10.1002/uog.14699. (Epub ahead of print).
- Hui L, Wood G. Perinatal outcome after maternal primary cytomegalovirus infection in the first trimester: a practical update and counseling aid. *Prenat Diagn*. 2014 Sep 16. doi: 10.1002/pd.4497. (Epub ahead of print).
- Hui L, Bethune M, Weeks A, Kelley J, Hayes L. Repeated failed non-invasive prenatal testing owing to low cell-free fetal DNA fraction and increased variance in a woman with severe autoimmune disease. *Ultrasound Obstet Gynecol*. 2014 Aug;44(2):242-3.
- Griersmith TH, Fung AM, Walker SP. Dichorionic triamniotic triplet pregnancy complicated by twin anemia polycythemia sequence: the place of fetal therapy. *Twin Res Hum Genet*. 2014 Dec;17(6):589-93. doi: 10.1017/thg.2014.69.
- Charan P, Woodrow N, Walker SP, Ganesamoorthy D, McGillivray G, Palma-Dias R. High-resolution microarray in the assessment of fetal anomalies detected by ultrasound. *Aust N Z J Obstet Gynaecol*. 2014 Feb;54(1):46-52.
- Lim AS, Stewart K, Abramson MJ, Walker SP, Smith CL, George J. *Multidisciplinary Approach to Management of Maternal Asthma (MAMMA): A Randomized Controlled Trial*. *Chest*. 2014 May 1;145(5):1046-5.
- Khor YH, Walker S, Rautela L, Chao C, Robinson A, Howard M. Successful pregnancy in ventilatory failure due to campomelic dysplasia with severe kyphoscoliosis. *Intern Med J*. 2014 Jul;44(7):712-3.
- McDonald TM, McCarthy EA, Walker SP. Shining light in dark corners; the diagnosis and management of late onset FGR. *ANZJOG* (Accepted September 2014).
- Hui L, Teoh M, Piessens S, Walker SP. Early clinical experience of cell-free DNA-based aneuploidy screening: a survey of obstetric sonologists in Australia and New Zealand. *Aust NZ J Obstet Gynaecol*. (In press; accepted November 2014).

Hui L. Noninvasive approaches to prenatal diagnosis: Historical perspective and future directions. Chapter in *Prenatal Diagnosis edition of Methods in Molecular Biology*. Ed. Prof Brynn Levy. Springer, (In press 2014).

Gahan P, Hui L, and Maron J. Circulating nucleic acids and other bodily fluids as non-invasive sources of DNA/ RNA. Chapter 11 in *Circulating Nucleic Acids in early diagnosis, prognosis and treatment monitoring: an introduction*. Ed. Prof Peter Gahan. Springer, (In press 2014).

Zwemer LM, Hui L, Wick HC, Bianchi DW. RNA-Seq and expression microarray highlight different aspects of the fetal amniotic fluid transcriptome. 2014 *Prenatal Diagnosis*; DOI:10.1002/pd.4417.

Hui L. Referee commentary re: Non-invasive prenatal testing for fetal chromosomal abnormalities by low-coverage whole-genome sequencing of maternal plasma DNA: review of 1982 consecutive cases in a single center. T. K. Lau et al. *Ultrasound in Obstetrics and Gynecology* 2014; 43(3): 245.

Ferres M, Hui L, Bianchi DW. Antenatal Noninvasive DNA Testing: Clinical Experience and Impact. *American Journal of Perinatology*. 2014. DOI:10.1055/s-0034-1371706.

Edlow AF, Vora NL, Hui H, Wick HC, Cowan JM and Bianchi DW. Maternal Obesity Affects Fetal Neurodevelopmental and Metabolic Gene Expression: A Pilot Study. *PLoS ONE*, 01/2014; 9(2):e88661.

Hutchinson BJ, Palma-Dias R, Walker SP. Universal Cytomegalovirus Screening: Time for Reappraisal? *Fetal Diagnosis and Therapy*. (Accepted October 2014).

Hedditch EL, Gao B, Russell AJ, Lu Y, Emmanuel C, Beesley J, Johnatty SE, Chen X, Harnett P, George J; Australian Ovarian Cancer Study Group et al. ABCA transporter gene expression and poor outcome in epithelial ovarian cancer. *J Natl Cancer Inst*. 2014 Jun 23;106(7).

Gao B, Russell A, Beesley J, Chen XQ, Healey S, Henderson M, Wong M, Emmanuel C, Galletta L, Johnatty SE, Bowtell D; Australian Ovarian Cancer Study Group et al. Paclitaxel sensitivity in relation to ABCB1 expression, efflux and single nucleotide polymorphisms in ovarian cancer. *Sci Rep*. 2014 May 9;4:4669.

Pendlebury A, Rischin D, Ireland-Jenkin K, Toner GC, Grant P. Ovarian Growing Teratoma Syndrome With Spuriously Elevated α -Fetoprotein. *J Clin Oncol*. 2014 Apr 7.

Blinman P, Gainford C, Donoghoe M, Martyn J, Blomfield P, Grant P, Kichenadasse G, Vaughan M, Brand A, Shannon K, GebSKI V, Stockler MR, Friedlander M. Feasibility, acceptability and preferences for intraperitoneal chemotherapy with paclitaxel and cisplatin after optimal debulking surgery for ovarian and related cancers. *J Gynecol Oncol*. (Accepted October 2014).

Journal peer reviewers

Grant P, Allen D, Hyde S, *Int J of Gynecological Cancer*

Grant P, *Gynecologic Oncology*

Grant P, Allen D, Hyde S, *ANZJOG*

Allen D, Editorial Board, *Journal of Lower Genital Tract Disease*

Allen D International Board Member, *South African Journal of Gynaecological Oncology*

Allen D, *International Urogynaecology Journal*

Allen D, *European Journal of Surgical Oncology*

Health Services, Surgical and Specialist Services

Department of Gynaecological Oncology, Mercy Hospital for Women

Mitchell PL, Quinn MA, Grant PT, Allen DG, Jobling TW, White SC, Zhao A, Karanikas V, Vaughan H, Pietersz G, McKenzie IF, Gargosky SE, Loveland BE. A phase 2, single-arm study of an autologous dendritic cell treatment against mucin 1 in patients with advanced epithelial ovarian cancer. *J Immunother Cancer*. 2014 Jun 18;2:16.

Department of Anaesthesia

Hiscock R, Simmons S, Carstensen B, Gurrin L. Comparison of Masimo Pronto-7 and HemoCue Hb 201+ with laboratory haemoglobin estimation: a clinical study. *Anaesth Intensive Care* 2014; 42: 608–613.

Kaitu'u-Lino T, Hastie R, Cannon P, Lee S, Stock O, Hannan N, Hiscock R, Tong S. Stability of absolute copy number of housekeeping genes in preeclamptic and normal placentas, as measured by digital PCR. *Placenta*. 2014. (Online 16 October 2014).

Midwifery Professorial Unit/ Professional Development & Research Unit (Nursing and Midwifery) Mercy Hospital for Women

Taylor JE, McDonald SJ, Tan K. Prevention of central venous catheter-related infection in the neonatal unit: a literature review. *The Journal of Maternal-Fetal & Neonatal Medicine* (accepted July 2014 (ID DJMF-2014-0317)).

Barker HM, Simmons SW, Hiscock RJ, Cyna AM, McDonald SJ. Time to achieve comfort from labour epidural analgesia. *Anaesthetic and Intensive Care* 2014 Jan;42(1):73-77.

Jeston S, McDonald S, & Pollock W. A survey of inotrope and vasopressor line change practices in Australian and New Zealand Neonatal Intensive Care Units. *Journal of Neonatal Nursing*, 2014;20:69-76.

LeMone, P., Burke, KM., Levett-Jones, T., Dwyer, T., Moxham, L., Reid-Searl, K., Berry, K., Carville, K., Hales, M., Knox, N., Luxford, Y., & Raymond, D. (eds). *Medical-Surgical Nursing: critical thinking for person-centred care* (Australian Edition) Volumes 1-3. Forest Hills: Pearson Australia, 2013.

Pollock WE, Flood M, Dennis A, Lapinsky S, Konig K, Harley N, McDonald S. Development of a severity of preeclampsia score: an e-Delphi study. Poster, Perinatal Society Australia & New Zealand (PSANZ) 18th Annual Conference. Perth, April 2014. *Journal of Paediatrics and Child Health*. 2014;50 (Supplement S1):103.

Patterson H, Anning J, Pollock W. 'Outcomes of neonates receiving Nasal CPAP in a level 2 hospital from 2010-2012: a clinical audit.' Poster, Perinatal Society Australia & New Zealand (PSANZ) 18th Annual Conference. Perth, 7-9 April 2014. *Journal of Paediatrics and Child Health*. 2014;50 (Supplement S1):102.

McCarthy M, Pollock W, McDonald S. Improving communication with women who experience early pregnancy loss. Poster, Perinatal Society Australia & New Zealand (PSANZ) 18th Annual Conference. Perth, April 2014. *Journal of Paediatrics and Child Health*. 2014;50 (Supplement S1):96.

Pollock W, Flood M, Dennis A, Lapinsky S, Konig K, Harley N, McDonald S. Development of a severity of preeclampsia score: an e-Delphi study. Obstetric Anaesthetists' Association Annual Scientific Meeting. Dublin, 21-23 May 2014. *International Journal of Obstetric Anesthesia*. 2014;23 (Supplement 1):S12.

Health Services, Medical, Subacute and Palliative Care Services Program

Mercy Palliative Care

Forrest, L.C. Your song, my song, our song: developing music therapy programs for a culturally diverse community in home-based paediatric palliative care. *Australian Journal of Music Therapy* 25, 2014.

O'Callaghan, C., Forrest, L., Wen, Y. Music Therapy at the end of life. In B.Wheeler (Ed.), *Music Therapy Handbook*, pp.468-480. New York: Guilford Publications. 2014.

Forrest, L.C. Reflecting on Culture and Music Therapy in Home-based Paediatric Palliative Care. *Proceedings of the 14th WFMT World Congress of Music Therapy*, Krems Austria, 2014.

Health Services, Ambulatory, Allied Health and Community Services Program

Mercy Lymphoedema Clinic

Phillips JJ, Gordon SJ. Conservative management of lymphoedema in children: a systematic review. *J Ped Rehab Med*. 7 2014: 361-372.

Zwar Y. Cellulitis and lipodermatosclerosis; Klippel Trenaunay Syndrome. *Australian Doctor Magazine*, July 2014.

Zwar Y. Ankle Brachial Pressure Index; Complex regional pain syndrome and lymphoedema; Primary upper limb lymphoedema; Idiopathic cyclic oedema. *Australasian Lymphology Association Newsletter* 2014.

Health Services, Mental Health Services Program

Perinatal Mental Health, Mercy Hospital for Women

Galbally M, Lewis A, Buist A. Child developmental outcomes in preschool children following antidepressant exposure in pregnancy. *ANZJP* (In press 2015).

Lewis M, Galbally M, Gannon T, Syemonides C. Early life programming as a target for prevention of child and adolescent mental disorders. *BMC Medicine* 12;33. 2014.

Galbally, Snellen, Power. Antipsychotic Drugs in Pregnancy: a Review of their Maternal and Fetal Effects. *Therapeutic Advances in Drug Safety*. Published first online, Feb 7, (2014).

Boyce, Galbally, Buist. The management of depression
Eds. Galbally, Snellen, Lewis: *Psychopharmacology and Pregnancy — Treatment Efficacy, Risks, and Guidelines*, Springer, 2014.

Lakshmana, Galbally, Blankley, Buist, Fung, Hiscock, Walker. ECT in Pregnancy. Eds. Galbally, Snellen, Lewis: *Psychopharmacology and Pregnancy – Treatment Efficacy, Risks, and Guidelines*, Springer, 2014.

Blankley, Power, Chanen. Borderline Personality Disorder and Eating Disorder In Pregnancy. Eds. Galbally, Snellen, Lewis: *Psychopharmacology and Pregnancy – Treatment Efficacy, Risks, and Guidelines*, Springer, 2014.

Snellen, Mahli. Bipolar Disorder in Pregnancy. Eds. Galbally, Snellen, Lewis: *Psychopharmacology and Pregnancy — Treatment Efficacy, Risks, and Guidelines*. Springer, 2014.

Snellen M, Thompson G, Murdoch N. The Process of Obtaining Informed Consent. Eds. Galbally M, Snellen M, Lewis A: *Psychopharmacology and Pregnancy — Treatment Efficacy, Risks, and Guidelines*, Springer, 2014.

Power J, Galbally M, Rolfe T, Hiscock, Walker. ECT in Pregnancy. *Electroconvulsive Therapy: Clinical Uses, Efficacy and Long Term Health Effects*. Nova Publishers (In press).

Galbally M, Snellen M, Lewis A: *Psychopharmacology and Pregnancy – Treatment Efficacy, Risks, and Guidelines*. Springer, 2014.

Conferences and presentations

Health Services, Women's and Children's Services Program

Urogynaecology Department

Lee J, Rosamilia A, Dwyer PL, Lim Y, Ulrich D. 'Miniarc Monarc suburethral sling in women with stress urinary incontinence — an RCT 24 month follow-up.' International Urogynecological Association and American Urogynecological Association Annual Scientific Meeting, Washington, USA, July 2014.

Alvarez J, Schierlitz L, Dwyer PL, Rosamilia A, Murray C, Lee J. 'A randomised control study comparing Tension free Tape (TVT) and Monarc transobturator tape in the treatment of women with USI and ISD with a mean follow-up of 60 months.' Urogynecological Association and American Urogynecological Association Annual Scientific Meeting, Washington, USA, July 2014.

Dwyer PL. 'You Can't Fix Everything at the Same Time — Continence Surgery Should Not be performed concomitantly with reconstructive pelvic floor surgery.' Debate at Urogynecological Association and American Urogynecological Association Annual Scientific Meeting, Washington, USA, July 2014.

Cvach K, Dwyer PL, Rosamilia A, Lim Y, Schierlitz L. 'A prospective observational study of lower urinary tract symptoms before and after surgical removal of a large pelvic mass.' Urogynecological Association and American Urogynecological Association Annual Scientific Meeting, Washington, USA, 2014.

Dwyer PL, Haylen B, Shull B. 'Transvaginal repair of vaginal vault prolapse using native tissues.' Workshop at International Urogynecological Association and American Urogynecological Association Annual Scientific Meeting, Washington, USA, July 2014.

Dwyer PL. 'Repair & Reconstruction for apical defects in vaginal prolapse. The abdominal sacrocolpopexy'; 'Repair of posterior compartment prolapse.' Surgical workshop and lectures at Urogynaecology & Reconstructive Pelvic Surgery Society of India (URPSSI), Chennai, India, January 2014.

Lee, J. 'Contemporary Management of OAB' Department of Obstetrics & Gynecology, BUH Singapore, January 2014.

Lee, J. 'Value of Urodynamics' National University Hospital, Singapore, June 2014.

Lee, J. 'Slings – Tips & Tricks: Sacrospinous Fixation' Cadaver Workshop (lead and live surgery), Sapporo, Japan, November 2014.

Thomas EA, McDonald S J, Pollock, W. 'Evaluation of a perineal clinic: a survey of women's experiences.' Podium presentation, International Conference of Midwives, Prague, Czech Republic, June 2014.

Murray CJ, Thomas EA, Pollock W. *Vaginal Pessaries: Can an educational brochure help patients to better understand their care?* Continence Foundation of Australia & Urogynaecology Society of Australasia: Cairns, Australia, 2014.

Thomas E, An V, D'Souza, Schierlitz L, Woods R, Keck J. Third degree obstetric anal sphincter injury following review in a Multidisciplinary pelvic floor clinic – outcome and function after subsequent delivery. Continence Foundation of Australia & Urogynaecology Society of Australasia: Cairns, Australia, 2014.

Department of Gynaecological Oncology

Grant P. Update in Gynaecological Cancer. Invited Speaker. RANZCOG Victorian Diploma Revision Course, Melbourne, Australia, February 2014.

Allen D, Invited speaker. 2014 International Federation for Cervical Pathology and Colposcopy, London, UK, May 2014.

Allen D, Invited speaker. 2014 4th Annual Scientific Meeting of the Obstetrical and Gynaecological Society of Hong Kong, May 2014.

Allen D, Speaker and Chair of Sessions, 2014 ASCCP Colposcopy Course, Auckland, New Zealand, September 2014.

Allen D. 2014 ASCCP LASER and LLETZ Treatment Workshop, Perth, Australia, March 2014.

Hyde S, Invited Speaker. Adelaide Female Pelvic Anatomy workshop, Melbourne, Australia, March 2014.

Hyde S, Speaker/Allen D, Chair of Sessions. ASCCP Colposcopy Course, Sydney, Australia, May 2014.

Hyde S, Speaker/Facilitator. ASCCP LASER and LLETZ Treatment course, Sydney, Australia, October 2014.

KM Sjoquist, DW Sommeijer, D Cannan, J Martyn, K Gillies, L Mileskin, R O'Connell, V Gebiski, M Vaughan, P Blomfield, P Beale, M Quinn, J Lombard, A Hadley, P Grant, Y Antill, M Stockler, F Amant, RJ Edmondson, M Friedlander. 'PARAGON – Phase II study of aromatase inhibitors in women with potentially hormone responsive recurrent/metastatic gynaecological neoplasms: ANZGOG 0903'. Am Soc Clin Oncol Annual Scientific Meeting, Chicago, USA, May 2014.

Chamoun J-P, Au-Yeung G, Tai Y J, Marvelde L, Quinn M, Grant P, McNally O, Narayan K, Rischin D, Neesham D, Allen D, Hyde S, Bernshaw D, Khaw P, Mileskin L. 'A retrospective study of adjuvant chemotherapy plus pelvic radiotherapy in FIGO stage ii epithelial ovarian cancer – a brief report'. Int Gyn Cancer Society Scientific meeting, Melbourne, Australia, November 2014.

Playdon MC, Nagle CM, Ibiebele TI, Protani MM, Carter J, Hyde SE, Neesham D, Nicklin JL, Ferrucci LM, Mayne ST, Webb PM for the Australian Ovarian Cancer Study Group. 'The association between diet, supplement use and survival after a diagnosis of invasive ovarian cancer.' International Gynaecologic Cancer Society Scientific meeting, Melbourne, Australia, November 2014.

University Department

Georgiou HM, Liong S, Permezel M, Pell G, Di Quinzio MKW. 'The utility of vitamin D binding protein to predict term and preterm labour.' 2014 Society for Reproductive Investigation Annual Meeting. Florence, Italy, March 2014.

Lim R, Morwood CJ, Barker G, Lappas M. 'The Dietary Phytochemical Silibinin Reduces Infection-Induced Inflammatory Pathways in Human Gestational Tissues and Decreases Neonatal Brain Injury in a Mouse Model of Infection-Induced Preterm Birth.' 61st Annual Meeting of the Society of Gynecologic Investigation. Firenze, Italy, March, 2014.

Willcox JC, Campbell KJ, McCarthy E, Wilkinson SA, Lappas M, Ball K, Fjeldsoe B, Whittaker R, Maddison R, Shub A, Pidd D, Fraser E, Moshanos N, Crawford D. 'New technologies in the promotion of healthy weight across pregnancy and beyond: the txt4two study protocol.' The 18th Congress of the Perinatal Society of Australia and New Zealand (PSANZ). Perth, Australia, April 2014.

Willcox JC, Campbell KJ, McCarthy E, Lappas M, Ball K, Crawford D, Shub A, Wilkinson SA. 'Gestational weight gain guidelines: From where are women obtaining their advice?' The 18th Congress of the Perinatal Society of Australia and New Zealand (PSANZ). Perth, Australia, April 2014.

Peiris H, Georgiou H, Lappas M, Kaitu'u-Lino T, Tong S, Salomón C, Vaswani K, Rice G, Mitchell M. 'Myostatin in the placenta of pregnancies complicated with intrauterine growth restriction and preeclampsia.' 2014 ESA-SRB Conference. Melbourne, Australia, August 2014.

Willcox JC, Campbell KJ, McCarthy E, Wilkinson SA, Lappas M, Ball K, Fjeldsoe B, Whittaker R, Maddison R, Shub A, Pidd D, Fraser E, Moshanos N, Crawford D. 'Txt4two: Testing the Feasibility of an M-Health Intervention to Promote Healthy Nutrition, Physical Activity and Weight Gain in Pregnant Women.' Medicine 2.0'14 Summit & World Congress. Maui, Hawaii, USA, November 2014.

Willcox JC, Campbell KJ, van der Pligt P, McCarthy E, Wilkinson SA, Ball K, Lappas M, Crawford D. 'New Technologies in the Promotion of a Healthy Lifestyle Across Pregnancy – Views of Women and Health Professionals'. Medicine 2.0'14 Summit & World Congress. Maui, Hawaii, USA, November 2014.

Tong S. 'Translating molecular diagnostics and therapeutics for ectopic pregnancy from the bench top to the clinic' (expenses paid). European Society for Human Reproduction and Embryology (ESHRE), Munich, Germany, June 2014.

Tong S. Pre-congress symposium: 'Fallopian Tube and Reproductive Function. Tubal Pregnancy (expenses paid). Medical Management of tubal ectopic pregnancies'. European Society for Human Reproduction and Embryology (ESHRE), Munich, Germany, June 2014.

Tong S. 'New Insights on preeclampsia.' ANZICS/ACCN Intensive Care ASM, Melbourne, Australia, October 2014.

Tong S. 'Developing molecularly targeted therapies for severe preeclampsia.' AuPS (Australian Physiological Society), Brisbane, Australia, December 2014.

Tong S. 'Translating molecularly targeted diagnostics and therapeutics for major pregnancy complications.' Austin Hospital Seminar, Melbourne, Australia, August 2014.

Tong S. 'Why we measure fundal height.' Seminar to General Practitioners at Mercy Hospital, Melbourne, Australia, August 2014.

Tong S. 'What's new in preeclampsia?' Medical Disorders in Pregnancy, Melbourne, Australia, September 2014.

Tong S. Grant writing workshop, careers night talk at Monash University Faculty of Medicine Dentistry and Health Sciences students, Melbourne, Australia, August 2014.

Tong S. 'Preeclampsia.' MRANZCOG Revision Course, Melbourne, Australia, June 2014.

Tong S. NHMRC Grant writing seminar at Monash University Department of General Practice, Melbourne, Australia, February 2014.

Tong S. 'Developing novel therapies for preeclampsia.' Victorian Regional Committee (RANZCOG) Regional Scientific Meeting, Melbourne, Australia, August 2014.

Tong S. 'Developing novel therapies for preeclampsia.' The Kolling Institute, Royal North Shore Hospital, Royal North Shore, Melbourne, Australia, December 2014.

Tong S. 'Circulating RNA in fetal hypoxia and stillbirth.' Royal Prince Alfred Hospital Medical Officers Association 80th annual reunion week symposia, Camperdown, Australia, July 2014.

Tong S. 'Developing new treatments for ectopic pregnancy.' SEED Meeting (Specialists sharing expertise, education and data; an IVF meeting group), Melbourne, Australia, September 2014.

Tong S. 'Translating a new molecularly targeted treatment to medically treat ectopic pregnancy.' Australian and New Zealand Placentologist Research Association (ANZPRA) Annual Satellite meeting, Melbourne, Australia, August 2014.

Tong S. 'Proton pump inhibitors to treat preeclampsia.' Plenary presentation at International Society for Hypertension in Pregnancy (ISSHP), New Orleans, USA, October 2014.

Stock O. 'Pyrosequencing of bacterial 16S ribosomal RNA demonstrates distinct microbiome profiles of placenta and maternal blood in women with preterm ruptured membranes who develop chorioamnionitis, compared to those who do not become infected.' Society for Reproductive Biology, Melbourne, Australia, August 2014.

Stock O. 'The Placental Microbiome of Chorioamnionitis.' IFPA EPG 2014, Paris, France, September 2014.

Kaitu'u-Lino T. 'Systematic development of a primary trophoblast isolation protocol.' Poster presentation. Society for Gynecological Investigation, Florence, Italy, March 2014.

Kaitu'u-Lino T. 'The newly described primate and placental specific sFlt1 isoform- e15a is biologically active and antagonises VEGF.' Poster presentation. Society for Reproductive Biology, Melbourne, Australia, August 2014.

Kaitu'u-Lino T. 'Choosing a career in Medical Research.' Growing Tall Poppies, Melbourne, Australia, September 2014.

Kaitu'u-Lino T. The pathway from high school to laboratory scientist. Free Oral Communication. Tall Poppy Experience, Quantum Victoria, Melbourne, Australia, August 2014.

Kaitu'u-Lino T. 'The newly described primate and placental specific sFlt1 isoform –e15a is biologically active and antagonises VEGF.' International Society for Hypertension in Pregnancy (ISSHP), New Orleans, USA, October 2014.

Kaitu'u-Lino T. 'HO-1 expression is not reduced in preeclamptic placenta and may not be the key regulator of sFlt1 or soluble endoglin.' Poster presentation. International Society for Hypertension in Pregnancy (ISSHP), New Orleans, USA, October 2014.

Kaitu'u-Lino T. 'Treating Pregnancy Complications – taking ideas from the lab to the clinic.' Science Teachers Association of Victoria Conference, Melbourne, Australia, November 2014.

Kaitu'u-Lino T. 'Moving beyond the end-point assay, The xCELLigence System.' Austin Research Techniques Symposium, Melbourne, Australia, November 2014.

Kaitu'u-Lino T. 'Can women have a family and succeed in academia?' Veski Inspiring Women in Science, Melbourne, Australia, December 2014.

Hannan N. 'Proton Pump Inhibitors Induce Heme-Oxygenase-1 and Decrease sFlt1 and sEng Production in Primary Placental and Endothelial Cells: A Novel Candidate Therapeutic for Preeclampsia.' Poster presentation (awarded SGI poster prize) at Society for Gynecological Investigation, Florence, Italy, March 2014.

Hannan N. 'Proton Pump Inhibitors as a novel candidate therapeutic to treat severe preeclampsia.' Finalist: Newcastle Emerging Leaders Award. Society for Reproductive Biology, Melbourne, Australia, August 2014.

Hannan N. 'HO-1: a key protein in preeclampsia...or not?' Invited plenary at Australia and New Zealand Placental Research Association Satellite Meeting, Melbourne, Australia, August 2014.

Hannan N. 'HO-1 expression is not reduced in preeclamptic placenta, and does not regulate sFlt-1 or soluble Endoglin secretion in either primary trophoblast or endothelial cells.' Poster presentation at International Federation of Placenta Associations, Paris, France, September 2014.

Hannan N. 'Proton Pump Inhibitors significantly quench pathophysiological characteristics of preeclampsia in primary placental and endothelial models: a novel candidate therapeutic.' Poster presentation. International Federation of Placenta Associations, Paris, France, September 2014.

Hannan N. 'Proton Pump Inhibitors Induce Heme-Oxygenase-1 and Decrease sFlt1 and sEng Production in Primary Placental and Endothelial Cells: A Novel Candidate Therapeutic for Preeclampsia.' Invited presenter at University of Manchester, Maternal and Fetal Health Research Centre, Institute of Human Development, UK, September 2014.

Hannan N. 'Proton pump inhibitors induce heme oxygenase-1 and decrease sFlt1 and sEng production in human placenta: a new candidate therapeutic for preeclampsia (plenary presentation).' The 8th international conference on Heme Oxygenases, Biolron and Oxidative Stress, Sydney, Australia 2014.

Hannan N. 'Proton Pump Inhibitors as a novel candidate therapeutic to treat severe preeclampsia.' Austin Medical Research Week, Melbourne, Australia, 2014.

Hannan N. 'No housekeeping please: Digital PCR.' Austin Research Techniques Symposium, Melbourne, Australia, November 2014.

Hannan N. 'Balancing the gender bias.' Veski Inspiring Women in Science, Melbourne, Australia, December 2014.

Brownfoot F. 'Oxysterols up regulate soluble endoglin in primary placental trophoblasts and primary endothelial cells.' Society of Gynaecologic Investigation, Florence, Italy, March 2014.

Brownfoot F. 'Sulfasalazine reduces the toxins of preeclampsia soluble Flt1 and soluble endoglin and quenches endothelial dysfunction in primary human tissues: a novel potential therapeutic.' International Society for the Study of Hypertension in Pregnancy, New Orleans, USA, October 2014.

Brownfoot F. 'Statins reduce soluble Flt1, and quench endothelial dysfunction in primary human tissues, but increase soluble endoglin release.' International Society for the Study of Hypertension in Pregnancy, New Orleans USA, October 2014.

Brownfoot F. 'Pravastatin quenches preeclampsia in humans: A potential therapeutic.' MSD Organon Awards, Melbourne, Australia, November 2014.

Brownfoot F. 'Pravastatin: A novel therapeutic to treat preeclampsia.' Australian Society of Medical Research, Melbourne, Australia, November 2014.

Brownfoot F. 'Statins reduce the toxin of preeclampsia soluble Flt1, and quench endothelial dysfunction in primary human tissues: a potential therapeutic for preeclampsia.' Science of Reproductive Biology, Melbourne, Australia, August 2014.

Hui L, Teoh M, Piessens S. 'Clinical implementation of NIPT by Australian obstetric sonologists in Australia and New Zealand.' Poster presentation at International Society of Prenatal Diagnosis, Brisbane, Australia, July 2014.

Hui L. 'DNA sequencing for NIPT: how does it work? How effective is it?' 24th World Congress of the International Society of Ultrasound in Obstetrics and Gynaecology pre-congress course on Prenatal Screening, Barcelona, Spain, September 2014.

Hui L. 'Maximising potential: Applying molecular genomics to best advantage in prenatal screening.' 24th World Congress of the International Society of Ultrasound in Obstetrics and Gynaecology pre-congress course on Prenatal Screening, Barcelona, Spain, September 2014.

Hui L. 'Noninvasive prenatal testing: the new frontier.' New Zealand Maternal Fetal Medicine network. Genetic screening update day 4, Auckland, New Zealand, June 2014.

Hui L. 'Clinical implementation of NIPT in Australia and New Zealand: a 2013 survey and audit.' Australian Association of Obstetrical and Gynaecological Ultrasonologists annual meeting, Brisbane, Australia, July 2014.

Hui L. 'Prenatal screening: past, present and future.' RANZCOG Membership course Melbourne, Australia, June 2014.

Hui L. 'Noninvasive prenatal testing for aneuploidy: an update for clinicians.' RANZCOG VIC/TAS ASM Melbourne, Australia, August 2014.

Hui L. 'Hepatitis B infection in pregnancy.' RACGP/ Mercy Hospital for Women GP seminar, Melbourne, Australia, June 2014.

Hui L. 'Congenital CMV infection: prenatal prediction of outcome.' Fetal Medicine at Twilight seminar Mercy Hospital for Women, Melbourne, Australia, March 2014.

Hui L. 'Screening for congenital CMV infection: problems and pitfalls.' Medical Disorders in Pregnancy, Melbourne, Australia, September 2014.

Hui L. 'Clinical implementation of NIPT in Australia.' University of Melbourne Masters of Genetic Counselling course lecture, Melbourne, Australia, August 2014.

Graetz M. 'Genetic counselling in 2014. How much in enough?' RANZCOG VIC/TAS ASM Melbourne, Australia, August 2014.

Graetz M. NIPT, 'Reproductive Screen and Karyotype vs Microarray.' RANZCOG VIC/TAS ASM Melbourne, Australia, August 2014.

Graetz M. 'What's new in genetic screening.' Mercy Hospital for Women GP seminar, Melbourne, Australia, April 2014.

Graetz M. 'What's new in genetic screening 2014?' Mercy Hospital for Women Midwifery Talk, Melbourne, Australia, May 2014.

Graetz M. NIPT in the real life setting, issues and challenges for counsellors and clients! University of Melbourne Masters of Genetic Counselling course lecture, Melbourne, Australia, August 2014.

Walker SP. 'Infectious Diseases'. Fetal Medicine at Twilight seminar, Mercy Hospital for Women, Melbourne, Australia, March 2014

Walker SP. 'Disorders of Fetal Growth.' Fetal Medicine at Twilight seminar, Mercy Hospital for Women, Melbourne, Australia, May 2014.

Walker SP. 'Mercy Perinatal Update.' Mercy Health Board Retreat, Melbourne, Australia, April 2014.

Walker SP. 'The Fetus as a Patient.' Handbury Oration, Western District Health Services, Melbourne, Australia, May 2014.

Walker SP. 'Perinatal Infections.' Viruses in May, Infectious Diseases National Conference, Katoomba, May 2014.

Walker SP. 'Fetal Growth Restriction and Tests of Fetal Well-Being.' MRANZCOG course, Melbourne, Australia, June 2014.

Walker SP. 'Fetal Therapy for Congenital Adrenal Hyperplasia', PSANZ, Perth, Australia, 2014.

Walker SP. 'Sleep Disordered Breathing and Fetal Therapy.' International Society for Prenatal Diagnosis, Brisbane, Australia, July 2014.

Walker SP. 'Treating the Unborn: Fetal Therapy in 2014.' Australian and New Zealand Placental Research Association, Melbourne, Australia, August 2014.

Walker SP. 'Ultrasound and Serum Markers for Prediction of Pre-Eclampsia in the 1st Trimester: It's Time for Routine Screening.' Invited debate at RANZCOG Victorian and Tasmanian Annual Scientific Meeting, Melbourne, Australia, August 2014.

Walker SP. 'Forceps are Obsolete.' Invited Debate at National Conference on Incontinence and International Conference on Paediatric Continence, Cairns, Australia, September 2014.

Walker SP. 'Maternal Fetal Medicine 2014: the first 9 months.' Report of the Shiela Handbury Chair MFM, Mercy Health Melbourne, Australia, October 2014.

Walker SP. 'Sleep Disordered Breathing in the Hypertensive Disorders of Pregnancy.' Australian and New Zealand Preeclampsia workshop, Australia, October 2014.

Walker SP. 'Drivers of Late Prematurity.' Cool Topics in Neonatology national conference, Melbourne, Australia, November 2014.

Walker SP. 'Management of Late FGR.' Organon Symposium, November 2014.

Walker SP. 'TAPS, TOPS and the wisdom of Solomon: fetal surgery for monochorionic twins in 2014.' Healthier Kids: Insights from Twin Research. National symposium, MCRI. Melbourne, Australia, December 2014.

Shub A. 'Postgraduate teaching in developing world.' Victorian/Tasmania RANZCOG ASM meeting, Melbourne, Australia, August 2014.

Shub A. 'Obstetrics in Timor.' Grand Round, Mercy Hospital for Women, Melbourne, Australia, 2014.

Shub A. 'How long is labour?' Grand Round, Mercy Hospital for Women, Melbourne, Australia, 2014.

Shub A. 'Intrapartum care'. MRANZCOG course. Melbourne, Australia, 2014.

McCarthy E. 'What's new with the Flu? ... And whooping cough and TB, too?' Update on vaccines for pregnant woman and newborns. Grand Round, Mercy Hospital for Women, Melbourne, Australia, March 2014.

McCarthy E. 'Postnatal care for women with obstetric complications.' Victorian Home Care Midwifery Seminar, Melbourne, Australia, March 2014.

McCarthy E. 'Which chart? The right chart.' Fetal Medicine at Twilight seminar, Mercy Hospital for Women Melbourne, Australia, April 2014.

McCarthy E. 'Recurrent miscarriage.' MRANZCOG revision course. Melbourne, Australia, June 2014.

McCarthy E. 'Thyroid disease in pregnancy.' RANZCOG Rural Fellows Webinar. Melbourne, Australia, July 2014.

McCarthy E. 'Preventing problems in the first place: Update on pre-pregnancy screening, diet, exercise and vaccinations.' Medical Disorders in Pregnancy Symposium. Melbourne, Australia, September 2014.

McCarthy E. 'Fetal measurements: Which chart is best?' ASUM ASM, Melbourne, Australia, October 2014.

McCarthy E. 'Bones at twilight.' Fetal Medicine at Twilight seminar, Mercy Hospital for Women, Melbourne, Australia, November 2014.

McCarthy E. 'Pregnancy care when the fetus has a life-limiting condition.' Perinatal palliative care: Paediatric study day. Melbourne, Australia, December 2014.

Fung A. 'Prevention of preterm birth.' Fetal Medicine at Twilight seminar, Mercy Hospital for Women, Melbourne, Australia, 2014.

Fung A. 'The Preterm Prevention Clinic.' Grand Round, Mercy Hospital for Women, Melbourne, Australia, 2014.

Health Services, Surgical and Specialist Services

Department of Anaesthesia

Simmons S. 'The case for obstetric early warning systems.' Oral presentation. Obstetric Anaesthesia SIG meeting Sydney, March 2014.

Simmons S. Communicating with management: is it possible? Oral presentation at ANZCA ASM, Singapore, May 2014.

Midwifery Professorial Unit/ Professional Development & Research Unit (Nursing and Midwifery)

Pidd D. 'Comprehensive initial antenatal assessment and physical examination: a mentor supported program for midwives.' 30th Triennial Congress of the International Confederation of Midwives, Prague, Czech Republic, June 2014.

Harrison K. 'A constructive alignment approach to improving midwives' knowledge of prenatal genetic testing.' 30th Triennial Congress of the International Confederation of Midwives, Prague, Czech Republic, June 2014.

Thomas E. 'Evaluation of a perineal clinic: a survey of women's experiences.' 30th Triennial Congress of the International Confederation of Midwives, Prague, Czech Republic, June 2014.

Pollock W, McCarthy M, Harrison K and Pidd D. 'A workshop on early recognition of clinical deterioration in pregnant and postpartum women.' 30th Triennial Congress of the International Confederation of Midwives, Prague, Czech Republic, June 2014.

Pollock W, Simmons S, McDonald S. 'Evaluation of a maternal critical care education program: a pilot study.' Perinatal Society Australia & New Zealand (PSANZ) 18th Annual Conference. Perth, 7-9 April 2014. [oral] Journal of Paediatrics and Child Health. 2014;50(Supplement S1):26.

Patterson H, Anning J, Pollock W. 'Outcomes of neonates receiving Nasal CPAP in a level 2 hospital from 2010-2012: a clinical audit.' Poster, Academy of Neonatal Nurses 11th National Advanced Practice Neonatal Nurses Conference. Hawaii, 23-26 April 2014.

Pollock W, Kingwell E, Pidd D, McCarthy M. 'Early recognition of clinical deterioration in pregnant and postpartum women.' International Confederation of Midwives 30th Triennial Congress. Workshop, Prague, Czech Republic, June 2014.

Pidd D, McDonald S, Pollock W, Walker S. 'Comprehensive initial antenatal assessment and physical examination: A mentor supported program for midwives.' International Confederation of Midwives 30th Triennial Congress. Prague, Czech Republic, June 2014.

Harrison K, McDonald S, Pollock W. 'A constructive alignment approach to improving midwives' knowledge of prenatal genetic testing.' International Confederation of Midwives 30th Triennial Congress. Prague, Czech Republic, June 2014.

Thomas E, Mc Donald S, Pollock W. 'Evaluation of a perineal clinic: a survey of women's experiences.' International Confederation of Midwives 30th Triennial Congress. Prague, June 2014.

Flood M, Pollock W, McDonald S, Davey M-A. 'Challenges identifying the postpartum haemorrhage rate in Australia.' International Confederation of Midwives 30th Triennial Congress. Prague, June 2014.

Murray C, Thomas E, Pollock W. 'Vaginal pessaries: Can an educational brochure help patients to better understand their care?' Urogynaecology Society of Australasia. Cairns, Australia, September 2014.

Pollock W. 'Maternal health in Victoria: how do we measure up?' Australian College of Midwives Vic Branch AGM, Melbourne, Australia, September 2014.

Pollock W. 'Obstetric haemorrhage and massive transfusion.' Australian and New Zealand Intensive Care Society/Australian College of Critical Care Nurses Intensive Care Unit Annual Scientific Meeting. Melbourne, Australia, October 2014.

Pollock W. 'Workforce challenges in ICU – nursing perspective.' Australian and New Zealand Intensive Care Society/Australian College of Critical Care Nurses Intensive Care Unit Annual Scientific Meeting. Melbourne, Australia, October 2014.

Health Independence Program (HIP)

Dick W, Whelan T, Legge A. 'Understanding your COPD.' Health Roundtable: Working with Primary Care to Reduce Readmissions for COPD, Brisbane, Australia, August 2014.

Kaiprambatt P. Delegate, Renal Conference, Melbourne, Australia, August 2014.

Cherukunnel T. Delegate, Renal Supportive Care, Melbourne, Australia, November 2014.

Health Services, Medical, Subacute and Palliative Care Services

Mercy Palliative Care

Forrest L. Invited paper: Your song, my song, our song: developing music therapy programs for a culturally diverse

community in paediatric palliative care. 40th Conference of the Canadian Music Therapy Association, Toronto, Canada. June 2014.

Forrest, L. Inter-generational and family experiences of music therapy in palliative care: reflecting on the role of palliative care music therapy across the life-span. 3rd International Conference of the International Music and Medicine Association. Toronto, Canada. June 2014.

Forrest, L. Conducting music therapy research with a culturally diverse population in community paediatric palliative care: ethical and practical considerations. 3rd International Conference of the International Music and Medicine Association. Toronto, Canada. June 2014.

Forrest, L. (2014). Reflecting on culture and music therapy in home-based paediatric palliative care. 2014 World Congress of Music Therapy, Vienna Austria, July 2014.

McCarthy M, McDonald S, Pollock W. PZANZ 18 Annual Conference 'Improving communication with women who experience early pregnancy loss' Perth, Australia, April 2014.

Health Services, Ambulatory, Allied Health and Community Services Program

Mercy Health Lymphoedema Services

Grabsch S. 'The use of Mobiderm(R) bandaging system for severe lower limb lymphoedema — a case study.' Poster, 10th ALA conference in Auckland, April 2014.

Phillips, J. 'Exercise or Excise: the importance of exercise in chronic venous insufficiency.' Austin Health Wound Seminar Day, Melbourne, Australia, October 2014.

Multicultural Services

Nesvadba, N. (invited speaker). 'Age appropriate services for women who have experienced FGM/C.' Sharing Our Strengths (National Symposium on FGM/C), Melbourne, Australia, August 2014.

Nesvadba, N. & Moshonas, N. (Poster). 'Our health literacy journey: Ten attributes of a health literate organisation.' Health Literacy Community of Practice, Melbourne, Australia, December 2014.

Health Services, Mental Health Services Program

Perinatal Mental Health

Galbally M, Invited Keynote: Maternal depression, infant sleep and breastfeeding: the chicken or the egg? Rhythms of Infant Life Conference, Durham University, UK, May 2014.

Galbally M, Invited Colloquium: Antenatal Care of Women with Schizophrenia and Bipolar Disorder, Erasmus Medical Centre, Rotterdam, Netherlands, May 2014.

Galbally M, Invited Colloquium: Mercy Pregnancy Emotional Wellbeing Study, Leiden University, Netherlands, May 2014.

Galbally M, Invited Keynote: Annual Professor Con Michael Lecture, St John of God, Perth, October 2014.

Galbally M, Invited Keynote: Chisholm Ethics Conference, Melbourne, Australia, June 2014.

Galbally M, Invited Keynote: A Career in Psychiatry: A balancing act, Registrar Finishing School, November 2014.

Galbally M, Invited colloquium: Mercy Pregnancy Emotional Wellbeing Study, Department of Psychiatry, St Vincent's Hospital, Melbourne, Australia, June 2014.

Galbally M, Invited talk: Perinatal depression: implications for maternal, infant and child outcomes, National Perinatal Special Interest Group, Australian Psychological Society, Melbourne, Australia, June 2014.

Snellen M, Invited talk: Postnatal Depression: Identification & Management. Graduate Midwives Study Day St Vincent's Hospital, Melbourne, Australia, March 2014.

Snellen M, Poster Presentation: Management and Monitoring of Bipolar Disorder in Pregnancy. International Societies for Bipolar Disorders Conference, Seoul, South Korea, March 2014.

Snellen M, Delegate. Congress of Asian College of Psychosomatic Medicine, Jakarta, Indonesia, August 2014.

Snellen M, Invited Speaker: 'The Process of Obtaining Informed Consent when Prescribing Psychopharmacology in Pregnancy.' RANZCP Conference, Perth, May 2014.

Snellen M, Invited Speaker: 'The Process of Obtaining Informed Consent when Prescribing Psychopharmacology in Pregnancy with Specific Reference to Bipolar Disorder.' RANZCP Section of Consultation Liaison Psychiatry. Sydney, Australia, 2014.

Snellen M, Invited Speaker. The Process of Obtaining Informed Consent when Prescribing Psychopharmacology in Pregnancy with Specific Reference to Bipolar Disorder. RANZCP Dinner Meeting, Hobart, Australia, 2014.

Snellen M, Invited Guest Lecturer: The Process of Obtaining Informed Consent when Prescribing Psychopharmacology in Pregnancy with Specific Reference to Bipolar Disorder and The Process of Obtaining Informed Consent when Prescribing Psychopharmacology in Pregnancy. RANZCP Training, Royal Hobart Hospital, Hobart, Australia, 2014.

Mercy Health Human Research Ethics Committee

Professor Janis (John) T. Ozolins, Mercy Health HREC Chair and Ms Carole Branch, Mercy Health HREC Administrative Officer, attended the Australasian Ethics Network Conference 2014, Sydney Law School, the University of Sydney, Australia, December 2014.

