Peter Brookhouse, is one of four community representatives on Peninsula Health’s Research and Ethics Committee.

Peter, the CEO of a local disability support organisation, has a long standing interest in the provision of health care services on the Peninsula. From 1992-95 he was a member of the Board of Management of Mornington Peninsula Hospital, serving as both President and Vice President during this period.

Peter’s current role at Peninsula Health provides him with the opportunity to bring a ‘consumer’ perspective to the increasingly complex area of ethics in healthcare.
The Peninsula Health Registrar Research Prize is awarded annually for the best research project performed and presented by a junior medical staff member. All Registrars in all disciplines and craft groups within Peninsula Health are eligible to apply.

Dr Franklin Pond was awarded the 2003 Registrar Research Prize from Peninsula Health.

Dr Pond, a Surgical Registrar, was one of five Registrars who presented their research findings to a panel of expert assessors.

Dr Pond presented an epidemiological study into Thyroid Cancer in the Renal Transplant Patient.

A conclusion of Dr Pond’s research is that there is a higher incidence of thyroid cancer in the renal transplant population. A significant proportion of patients present with lymphatic metastasis requiring radioactive iodine treatment.

A panel of adjudicators, including at least one from another institution, chooses the award recipient at the conclusion of the Scientific Symposium. The Research Prize is supported by a $1000 award from Tyco.

Many junior medical staff are involved in research projects and if the number of projects submitted exceeds the number that can be presented at the Symposium a selection is made by a review panel.

Each researcher, invited to present, provides a 10 minute overview of the project and this is followed by a five minute discussion.

Presentations and projects are judged on the originality of the idea, planning and design, methodology, analysis, conclusion, presentation, discussion and a provided abstract.

Other Registrar’s presenting this year were:

- Dr Klaus Heckmann, Intensive Care Registrar, on The Outcome of Ruptured Abdominal Aortic Aneurysms Admitted to a Metropolitan Hospital
- Dr Katherine Martin, Surgical Registrar, on The Management of Post-Laparoscopic Cholecystectomy using Drainage and Re-laparoscopy
- Dr Pradeen Mudholkar, Medical Registrar, on Ventilation of Patients with Obstructive Pulmonary Disease: Intensive Care Outcome
- Dr Adam Zimmet, Surgical Registrar, on The Outcome of Cardiac Surgery in Dialysis Dependent Patients.

Peninsula Health Chief Executive Dr Sherene Devanesen congratulated all Registrars on the quality of their research.

She also congratulated Associate Professor Jonathan Serpell, Director of Surgical Research and Education, on his work in developing a research culture at Peninsula Health that was recognised and respected by other tertiary teaching and research institutions.
It is my pleasure to introduce Peninsula Health's 2004 Research Report.

Research enables Peninsula Health to extend its community of care beyond the bounds of Victoria’s Mornington Peninsula. Through articles in professional journals, presentations to national and international conferences and contributions to texts, our researchers build on and enhance the existing body of knowledge in many areas of medicine, nursing and allied health.

This report records the professional and scholarly activities of Peninsula Health’s clinicians, nurses and allied health professionals. It details their involvement in a wide range of research and education activities at the local, national and international level. It clearly illustrates the often innovative nature of the collaborative interdisciplinary activities in which our staff are involved.

By working in partnership with educational institutions, other major hospitals, government and industry, Peninsula Health endeavours to guide, encourage and foster research. Peninsula Health’s commitment to strengthening research activities in all areas, is reinforced with the ongoing appointment of six Professors or Associate Professors to our staff. Our close ties with Monash University are underpinned with the joint appointments of Professor Robert Burrows as Professor of Women’s, Children’s and Adolescent Health, and Professor Joseph Ibrahim as Professor of Aged Care Medicine.

Professor Margaret O’Connor holds the inaugural Vivian Bullwinkel Chair in Nursing (Palliative Care) at Monash University, a position with three clinical partners, all concerned with the delivery of palliative care services on the Mornington Peninsula, including Peninsula Health.

Professors Burrows, Ibrahim and O’Connor will provide strong leadership and mentoring skills and compliment the well established work of our Associate Professors: David Langton in Medicine; Colin Russell and Jonathan Serpell in Surgery and Jeff Wassertheil in Emergency Medicine.

The majority of research is conducted at Frankston Hospital, which includes a major psychiatric unit. However staff at our Rosebud Hospital and Aged Care facilities and the Rehabilitation units are also well represented in this report.

The Human Research and Ethics Committee at Peninsula Health meets monthly to consider proposed clinical trials, studies and projects and monitor progress. This very active Committee was Chaired, in 2003/04 by Ms Paula Irani. The current Chair is newly appointed member of the Board of Directors, Ms Liza Newby, and her report is included in this publication.

During 2003/04 the Board has taken the important developmental step of establishing a Research Development fund to support home-grown research at Peninsula Health. This fund will be administered by a Research Development Committee headed by Associate Professor Jonathan Serpell.

The research conducted at Peninsula Health embraces clinical, laboratory and public health. The integration between research and clinical care, the collaboration across specialties and disciplines, results in enhanced research and better health care for our extended community.

Dr Sherene Devanesen,  
Chief Executive Officer
I am delighted to have been appointed Chair of the Human Research and Ethics Committee, and I look forward, a great deal, to the privilege of working with the Peninsula Health medical and health care research community to further their excellent work and reputation.

The Committee actively supports and encourages research, which is undertaken as observational studies, projects, surveys and clinical trials, within many Peninsula Health departments.

The Committee is delighted at the scope of this work, which is increasing each year, by clinicians, nurses and allied health professionals. Their research is reported widely through referred journals, other publications, presentations or posters at conferences. The Committee also welcomes the recording of their achievements through this Research Report.

The role of the Committee is to assess all protocols covering research, and involving patients, staff, or local residents.

The Committee operates in accordance with the guidelines set out in the National Statement on Ethical Conduct in Research Involving Humans issued by the National Health and Medical Research Council (NHMRC). The assessment considers the ethical and relevant technical and methodological issues of the proposed research and reports to the Board of Directors.

The Committee members consider the trials and studies, and provide feedback and suggestions to the researchers. Phase I and II trials are submitted to Peninsula Health’s solicitors who recommend changes if appropriate. Once the trial begins, all serious adverse events must be submitted to the Committee and a cumulative table is kept. Annual Progress reports and any changes to the studies must also be presented to the Committee.

The Committee works in close collaboration with the Drugs & Therapeutic Committee of Peninsula Health, on all trials which involve therapeutic drugs.

This year, the Committee will also administer the newly established Research Development Fund which will provide financial support for home-grown research at Peninsula Health.

I would like to take this opportunity to recognise and thank Ms Paula Irani, Research and Ethics Committee Chair 2003/04 and former Board Director, for her outstanding contribution to the Committee during her tenure.

Liza Newby
Chair of Research & Ethics Committee
and Board Director

Committee Members

Research & Ethics Committee Chair and Board Director
Ms Liza Newby

Deputy Chair
Mr Jim Young

Peninsula Health Representatives
Dr Peter Bradford
Mr Mark Dowling
Ms Maureen Habner/Elizabeth Wilson
Ms Louise Brown
Ms Jan de Clifford
Ms Jenny Chapman
Dr Vinrod Ganju
Dr Stephen Denton
Ms Pat O’Leary

Act. Convenor
Ms Carolan Dodd

Community Representatives
Mr Peter Brookhouse
Mr Malcolm Taylor
Ms Avril Minifie
Dr Crofton Hatsell

Our thanks to John Callahan, Louise Brown and Richard Newton who served on the committee during 2003/04.
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Services and Locations Inside back cover
Following the inaugural report produced last year there has been a gratifyingly large amount of ongoing activity in research within Peninsula Health.

The research continues to parallel the progressive expansion of specialisation across the health service and much of the research is therefore clinically based.

Clinical and database research complements other important hospital activities such as audit, continuing medical education, quality assurance, improvement programs and clinical risk management and therefore often results in changes in clinical practice with improved outcomes and efficiency. The role of clinical research in providing evidence-based guidelines for the management of patients is critical and is dependent upon the recognition of alignments within these areas. Much of the research contained and described in this report provides examples of the importance of this translational research; that is the application of clinical research findings to clinical practice.

To further this activity the Peninsula Health Research Development Committee has been established with a number of aims:

- To develop a Strategic Plan for Research at Peninsula Health and to develop policies and processes to foster research activities at Peninsula Health across all disciplines

- To administer the Peninsula Health Research Development Fund and disbursements, including small grants

- To foster, promote and run the Peninsula Health Registrar Research Prize. This Prize has now been held for two years and will be held again this year on November 27, 2004. This will be incorporated into a Peninsula Health Research Week, which will include the presentation of poster research work across all disciplines, and campuses

- To promote research collaboration with other institutions, in particular those closely associated with Peninsula Health, including Monash and other universities, Monash Medical Centre and The Alfred.

Peninsula Health is well positioned to engage in epidemiological research because of its unique geographical situation, and also, because of the increase in specialisation of units, a fertile ground is provided for opportunities in clinical research.

This Research Report showcases the high quality research undertaken by researchers at Peninsula Health and aligns well with Peninsula Health’s vision and values, particularly in providing service, excellence and professionalism.

Associate Professor Jonathan Serpell
Chairman of the Research Development Committee and Director, Surgical Research and Education
The Department of Anaesthesia provides more than 15,000 anaesthetic services each year for all theatre procedures at Frankston and Rosebud Hospitals, in addition to supporting the Midwifery Department, Endoscopy and ECT Suites.

There are 11 staff specialists and nine VMO anaesthetists. The Department is actively involved in training and currently has seven accredited Registrars representing all five years of the ANZCA program. Five of the staff anaesthetists are College Examiners.

**Members**

Director of Anaesthesia  
Dr Terry Loughnan, MB BS, FFARACS, FANZCA

Deputy Director of Anaesthesia  
Dr John Copland, MB BS, FFARACS, FANZCA

Supervisor of Training  
Dr Noel Roberts, MB BS, FANZCA

Dr Helen Kolawole, BmedSci, MB BS, FANZCA, MRACMA

Dr Ashley Webb, MB BS (Hons), FANZCA

Dr Gary McKenzie, MB BS, B.Med Sci Dip O&G, FANZCA

**Helen Kolawole**

Dr Helen Kolawole graduated from the University of Tasmania in Hobart with a BMedSc in 1979, followed by a MBBS in 1982 and is currently at an advanced stage of the Master in Clinical Education.

Dr Kolawole has worked as an Anaesthetic Registrar at the Royal Melbourne Hospital, Monash Medical Centre, Royal Children’s Hospital, Royal Women’s Hospital and the Royal Canberra Hospital, where she took on her first Specialist position as a VMO Anaesthetist in 1991. She joined Frankston Hospital in 1993, and in 1996 was appointed Staff Anaesthetist and was also HMO Mentor until 2001. Since 1998 she has been Tutor of Fifth and Sixth Year Medical Students from Monash University. One of her specialist areas is obstetric anaesthesia and she has been involved in the teaching of midwives and anaesthetic Registrars about anaesthesia and pregnancy. She also has a keen interest in latex allergy and as a Committee member of the Peninsula Health Care Network Latex Sensitivity Working Party she is responsible for formulating guidelines for patient care, occupational health and safety risk management, and care of affected staff.
Research Highlights


  Status: This study follows on from earlier research at Frankston Hospital on tramadol infusions following laparotomy. The study aims to determine whether the addition of Ketamine to tramadol improves post-laparotomy analgesia without increasing side effects. Over 60 patients have participated in the trial so far.

- Marxsen J, Webb A. *Recovery Room Stay Greater than Two Hours – An Audit of Three Years of Clinical Indicators Data.*

  Status: Abstract presented at ANZCA Annual Scientific Meeting, May 2003, Hobart.

- Blood Matters Collaboration. *Statewide effort to improve provision of Blood Component Therapy.* Dr Gary McKenzie is the Medical Clinical Supervisor.

  Status: Completed June 2004

- Kolawole H. *A Prospective Questionnaire of the Study Habits and Methods Used by Candidates for First Part FANZCA.*

  Status: Completed in December 2003. This study involved asking Registrars how they prepared for the examination and then compared this with the results they achieved in the primary examination.

Publications


Presentations


Loughnan T. Speaker at First Part Primary Course, ANZCA 2003.

Bowden C. Speaker at the Pacific Society of Anaesthetists Annual Refresher Course, Suva, Fiji, October 2003.

Roberts N. Speaker at First Part Primary Course, ANZCA 2003.

Kolawole H. Speaker at First Part Primary Course, ANZCA 2003.

Fleming J. Speaker at First Part Primary Course, ANZCA 2003.

Above: Dr Chris Bowden leads a fibreoptic intubation workshop at Fiji School of Medicine.
General Surgery

General Surgery at Peninsula Health is a major surgical specialty and the Units are divided into three General Surgery units: Upper Gastrointestinal Surgery; Colorectal Surgery; and Breast, Endocrine and Surgical Oncology. Each Unit has a major subspecialty interest, but covers the full range of General Surgery both electively and for emergencies. This specialisation of units is in line with the further development of these subspecialties within the Royal Australasian College of Surgeons.

Associate Professor Colin Russell is the overall Director of Surgery and Associate Professor Jonathan Serpell is Director of Surgical Research and Education.

Associate Professor Colin Russell was recently appointed as Honorary Associate Professor in Monash University Department of Epidemiology and Preventive Medicine, in addition to his appointment to the Monash Department of Surgery.

The Department of General Surgery has major interests in teaching both at an undergraduate and postgraduate level. The Department is responsible for 5th year and 6th year clinical teaching in surgery. The 5th year surgical program is a fully integrated program of General Surgery, and all specialties, with a very full teaching program being delivered over four terms, each of eight weeks, during the year. This year Frankston Hospital has been given a major role and responsibility in the delivery of 5th year surgical teaching for Monash University students, because of the introduction of the new medical course, which has meant that this teaching is no longer undertaken at the parent hospital, Monash Medical Centre. Frankston Hospital also provides rotations for final year selective students who are able to act as Interns and obtain invaluable practical experience in surgery at the transition phase between medical student and Internship.

The Units support the advanced training of four general surgery Registrars (at any one time), two each on rotation from The Alfred and Monash Medical Centre. These posts are fully accredited by the Royal Australasian College of Surgeons. The Department of General Surgery contributes in a major way to the teaching of these Registrars and also to surgical Interns and surgical HMOs.

A culture of surgical research has developed within the Department of General Surgery and currently a number of surgical Interns and surgical Registrars are undertaking research projects. The teaching of this important skill of undertaking surgical research is given emphasis and is well supported by the hospital.

Members

**General Surgery Unit 1 – Upper Gastrointestinal Surgery**
Head of Unit
Associate Professor Colin Russell, MB ChB, MS, FRACS, GradDipBus MRACMA
Mr Ian Wheatley, MB BS, FRACS
Mr Peter Evans, MB BS, FRACS

**General Surgery Unit 2 – Colorectal Surgery**
Head of Unit
Mr Peter Gray, MB BS(Melb), FRCS(Edin), FRCS(Eng), FRACS
Mr Richard McIntyre, MB BS, Dphil(Oxon), FRACS
Mr Eric Torey, MB BS(Hons), FRACS

**General Surgery Unit 3 – Breast, Endocrine and Surgical Oncology**
Head of Unit
Associate Professor Jonathan Serpell, MB BS(Melb), MD, FRACS, FACS
Mr Stewart Skinner, MB BS, PhD, FRACS
Ms Belinda Brown, MB BS, FRACS
Mr Michael Cheng, MB BS, FRACS

**Nurse Unit Managers**
Julie Emanuel
Julie Stephens
Gaye Walters

Jonathan Serpell

Associate Professor Jonathan Serpell heads the General Surgery department’s Breast, Endocrine and Surgical Oncology Unit and is also Peninsula Health’s Director of Surgical Research and Education.

The committed educator, who is responsible for fifth and sixth year medical students rotating through the Department of Surgery, graduated from the University of Melbourne in 1979 (MB BS) and achieved FRACS in 1988. After training in surgery at the Alfred Hospital, followed by three years at St Thomas’ (London), he has spent the last 14 years as a consultant at Frankston Hospital as well as at The Alfred. Associate Professor Serpell is a member of the Court of Examiners of the Royal Australasian College of Surgeons and Chairman of the Clinical Committee of the Board of Basic Surgical Training for the Royal Australasian College of Surgeons. A regular reviewer and Endocrine board member for the Australian and New Zealand Journal of Surgery, Associate Professor Serpell’s specialist areas include thyroid surgery, parathyroid surgery, parotid surgery, soft tissue sarcoma surgery and malignant melanoma surgery. His MD higher degree (Monash 1999) thesis was on soft tissue sarcoma. In 2002 he initiated the highly successful Peninsula Health Registrar Research Prize and has been instrumental in increasing the hospital’s growth of research within multiple diverse areas.
Research Highlights

- Russell C, McNeil J. Development and validating urgency prioritisation tools for elective surgery. The objective is improving equity and transparency in managing demand for elective surgery. Tools for joint replacement and prostatectomy have been developed and validated in vitro.

- Serpell JW, Phan D. The incidence of hypocalcaemia following total thyroidectomy. This study is examining a consecutive personal series of 250 patients undergoing total thyroidectomy to examine indications for surgery and outcomes. Specific outcomes are postoperative voice change and postoperative hypocalcaemia. The identification of patients who are at risk of postoperative hypocalcaemia following total thyroidectomy is important as these patients can then be targeted for additional therapy, whereas other patients can be safely placed into an early discharge program.

- Serpell JW, Le VN. Parotidectomy and surgical oncology. This study examines a consecutive series of 80 patients undergoing parotidectomy for benign tumours. The study details the presentation, investigations, including CT scan and fine needle cytology, and outcomes following surgery. The study is particularly examining outcomes, including specific complications such as facial nerve palsy, salivary fistula, and Frey’s syndrome to determine the results following concentration of expertise in one unit.

- Serpell JW, Chauhin A. The definition, incidence, diagnosis, management and operative outcomes of patients with retrosternal goitres. Retrosternal goitres are common and when large and associated with pressure symptoms or other complications are considered as indications for surgery. This study aims to clarify these indications to produce guidelines for definition of significant retrosternal extension, which will identify patients who will benefit from thyroidectomy.

Research Interests and Future Directions

The Upper Gastrointestinal Surgery Unit is currently developing liver surgery at Frankston Hospital. In addition, this Unit has a major interest in Day Case surgery and through Associate Professor Colin Russell, a major interest and academic input into health management and waiting list management.

The Colorectal Unit has recently developed a colorectal cancer database, which covers the whole of the Mornington Peninsula, including public and private hospitals under the direction of Mr Eric Torey and Associate Professor Serpell. Accrual of data is ongoing and will provide a valuable resource for research into this common cancer. The project will be supported by a dedicated General Surgery data manager, who will also have responsibility for management of other databases within the Department of General Surgery.

The Breast, Endocrine and Surgical Oncology Unit has a number of major interests, particularly in clinical research. Databases have been developed on thyroid surgery, parathyroid surgery, parotid surgery, soft tissue sarcoma surgery, malignant melanoma surgery and breast cancer. These databases have lead to a number of published research papers. Multidisciplinary team meetings, including Oncologists, Radiologists, Pathologists, Surgeons, Nursing and Ancillary staff have been developed for breast cancer, endocrine surgery and for gastrointestinal malignancy.

The Unit has developed a major leadership role within Australian Endocrine Surgeons and has established the Victorian Section of Australian Endocrine Surgeons, which has led to a web-based parathyroid database for all Australian Endocrine Surgeons. This is now established on the Royal Australasian College of Surgeons website and is actively supported and maintained by the Endocrine Section of that body, as well as Australian Endocrine Surgeons. In breast cancer, the unit is currently developing sentinel lymph node biopsy and have Ethics Committee approval to be a part of the sentinel lymph node biopsy trial of the Royal Australasian College of Surgeons.

For patients with breast cancer, protocols and management pathways are continually being improved. This includes an early discharge policy, followed by discussion of the patient’s management in the multidisciplinary team meeting, followed by attendance, ideally, of the patient at the multidisciplinary breast clinic on the same day. In this way patients are most likely to receive state of the art care from a coordinated multidisciplinary approach, which has been demonstrated to provide better outcomes for breast cancer patients.

Publications


Pond F, Serpell JW, Webster A. Thyroid Cancer in the Renal Transplant Population – an Epidemiological Study. This study examined all recipients of renal transplants registered with the Australian and New Zealand Dialysis and Transplant Registry between 1963 and 2002. Of 10,689 renal transplant patients, 23 patients subsequently developed thyroid cancer. These patients had
Research Highlights

- Serpell JW, Pond F, Dimitrious P. An In vivo Anatomical Study of the Recurrent Laryngeal Nerve in the Region of its Greatest Risk During Thyroidectomy. This in vivo study using digitalized images is designed to describe the anatomy and incidence of variations in the recurrent laryngeal nerves encountered during thyroidectomy. The nerves are not infrequently bifid and bifurcation occurs at a variable level below entry of the nerve into the larynx. There may be differences in the anatomical arrangements, incidence of bifurcation and level of bifurcation between right and left sides which have not previously been described. The study will enable a greater knowledge of the recurrent laryngeal nerve in its situation of greatest vulnerability during thyroidectomy and should therefore assist in preventing recurrent laryngeal nerve palsy following surgery.

- Cheng M. The management of symptomatic metastases to the adrenal gland.


- Cheng M. Primary hyperparathyroidism in women of child bearing age.

- Evans P. EORTC Trial of neo-adjuvant chemotherapy for resectable colorectal liver metastases. (P Evans is the primary investigator at the Frankston site and two patients have been accrued for this international trial.)

- Evans P. ESPAC 3 Trial of postoperative chemotherapy after Whipple’s operation for potentially curative pancreatic and ampullary cancers. (Only one patient has been submitted, but this trial will continue until end 2005.)

Book Chapters


Presentations


Peter Hamilton

Peter Hamilton has recently joined Peninsula Health as Consultant Orthopaedic Surgeon and is looking forward to developing orthopaedic services in this region.

“Having completed my Orthopaedic Fellowship and rewarding overseas post Fellowship appointments, I wish to develop a provincial/rural orthopaedic practice and improve orthopaedic services to the local community,” he says.

Dr Hamilton graduated from Monash University in 1989 with a Bachelor Medicine & Bachelor Surgery (MBBS Honours. He began his Internship at the Dandenong and District Hospital before moving on to The Austin where in 1993 he was a Junior Resident Medical Officer and Orthopaedic Registrar. His first appointment at Frankston Hospital was in 1995-6 where he was unaccredited Orthopaedic Registrar. Between 1997-2000, as part of the Royal Australasian College of Surgeons advanced orthopaedic training programme he spent time on training rotations at St Vincent’s, Royal Hobart, Royal Children’s, Box Hill, Royal Melbourne and the Alfred hospitals. Whilst overseas from 2001-2003, Dr Hamilton spent time at Addenbrookes NHS Hospital Trust in Cambridge, The Royal Infirmary in Edinburgh and the Ospedale Generale Provinciale in Lecco, Italy.

Dr Hamilton’s 2003 article ‘Minimally invasive Plate Osteosynthesis (MIPO) Difficulty in plate removal – A case report’ has been accepted for publication in ‘Injury’.

The Orthopaedic Unit at Frankston Hospital continues to grow in order to keep up with the increasing population of the Frankston and Mornington Peninsula area.

Orthopaedic trauma spans the ages from early paediatric fractures through to the aged population. As the average age of the population increases, the number of osteoporotic fractures managed by the Unit has increased and this remains a significant area of expertise.

Paediatric trauma and bone infections are dealt with by all members of the Unit and, more recently, paediatric elective surgery has been carried out by Gary Nattrass who shares his Frankston duties with his work as a consultant at the Royal Children’s Hospital. At the Children’s Hospital, Mr. Nattrass has significant research interests in cerebral palsy and is very involved with the Hugh Williamson Gait laboratory.

Most surgery is performed in the main theatre complex at Frankston. Some less complex surgery is performed at Rosebud Hospital and the Day Surgery Unit at Frankston.

The unit is supported by three Registrars and two Residents. One of the Registrars is an accredited trainee on the Victorian Orthopaedic Training Scheme. There are twice weekly ward rounds with regular input from the Radiology and Geriatric units, regular audit meetings, business meetings, meetings with the Pathology department and “multi-disciplinary” clinics with other specialty units.

Members

Surgeons
Chairman – Mr P McCombe, MB BS FRACS
Mr G Bourke, MB BS FRACS
Mr N Broughton, MB ChB (Hons) FRCS (Ed) FRCS (Eng) FRACS
Mr P Brydon, MB BS FRACS
Mr P Hamilton, MB BS FRACS
Mr G Nattrass, MD FRSCC FRACS
Mr J Rehfisch, MB BS FRACS

Mr A Weber, MB BS FRACS
Mr R Wuttke, MB BS FRACS
Registrars 2004:
Robert Irlicht (Accredited)
Ash Moaveni (Unaccredited)
Dominic Hannan (Unaccredited)

Research Interests and Future Directions

Various surgeons have different areas of special interest within Orthopaedics. These areas include Joint Replacement (including Revision Surgery), Shoulder surgery and Foot and Ankle surgery. All surgeons maintain an interest in Knee surgery.

Members of the Unit have been active in research. All three registrars were involved in papers presented at the March State clinical meeting of the Australian Orthopaedic Association and Reinhardt Wuttke is the current state Chairman of this Association.

Publications


A Comparison of Polyethylene Wear Rates between a Cemented and Cementless Cups McCombe P, Williams SA. JBJS(Br); 86-B 344-349, 2004.

Chapters:

Accepted for Publication:
McCombe P, Williams S. A Randomised Controlled Trial Comparing Polyethylene Wear between a Cemented and a Cementless Cup. JBJS(Br).

Presentations
Nattrass GR. Surgery in Cerebral Palsy-increasing the science while maintaining the art; Using the gait lab for more than CP; Treatment of Osteochondritis Dissecans in the lower extremity. 25th Annual Townsend Paediatric Orthopaedic Seminar, Canada, October 2002.


Research Highlights
- Randomised control trial comparing radiological wear rates of zirconia on polyethylene versus stainless steel on polyethylene in total hip replacement. McCombe P, Williams S.
- The Effect of Knee Replacement on Patella Tendon Length. Brydon P, Crick B.
- Long Term Review of Impaction Grafting in Femoral Revision Surgery using Irradiated Bone Graft. Hannan D, McCombe P, Brydon P.
- Prospective review of 1st Metatarsophalangeal Joint Replacement – Clinical, Radiological and Pedobarographic Examination. Bourke G.
- Pedobarographic comparison of vacoped boot, fixed camwalking boot with and without air bladder and short walking boot in reduction of plantar pressures. Bourke G.
- Pedobarographic comparison of orthowedge shoe and flat post operative shoe in reduction of forefoot pressure. Bourke G.
Patricia Terrill

Patricia Terrill, head of the Plastic Surgery Unit, has a special interest in wound care and scar reduction. She is a member of the Wound Education Advisory Committee for the Masters in Wound Care at Monash University and Peninsula Health’s Wound Management Committee.

“Clinically my work involves assessment and treatment of both acute and chronic wounds such as burns, leg ulcers and pressure sores. Research has included both clinical and laboratory work into the efficacy and comparative benefits of many different dressing products,” she said. Ms Terrill is the current president of the Victorian Division of the Australian Society of Plastic Surgeons and is also an honorary senior lecturer in the Department of surgery at Monash University. Since graduating from the University of Melbourne in 1982, Ms Terrill began her internship at the Royal Melbourne Hospital before taking up a surgical residency at the Alfred. In 1987 she was appointed Plastic Surgery Registrar at PANCH, and furthered her career in plastic surgery in the United Kingdom with stints at Wexham Park Hospital, Slough, Birmingham Accident Hospital and St Thomas’ Hospital, London before returning to Australia in 1991. Miss Terrill has been at Frankston Hospital since 1993, when she was just one of two plastic surgeons. “I have been able to achieve stability and develop a unit, attracting newly trained surgeons to the Peninsula. We now have eight surgeons and an accredited plastic surgery Registrar.”

The Unit has developed over the past 10 years into a specialised unit performing more than 1000 procedures per year. A wide range of procedures are carried out including skin cancer surgery, hand surgery, microsurgery, general plastic surgery and maxillofacial surgery. Participation in active research by the accredited Registrar is actively encouraged.

Members

Head of Unit - Patricia Terrill, MB BS FRACS
Guy Dowling, BSC (Hons) MB BS FRACS
David Hunter-Smith, MB BS(Hons) FRACS
Brian McMillan, MB BS BDSE MDS FRACDS(OMS)
John Redman, MB BS FRACS LDS BDSSc
Tom Robbins, MB BS FRACS FRCS(Ed) FRCS
David Ross, MB BS FRACS
Marie Rostek, MB BS FRACS

Research Interests and Future Directions

Active research in wound healing will continue. An evaluation of the use of mefix adhesive dressing as a non sterile wound dressing on the acute surgical wound is planned. Other lines of research that are under preliminary investigation are the use of minimal access (needle) division of Dupytrens contracture scar bands and the injection of Dupytrens nodules with cortisone to reduce thickening and tenderness.

Current Projects

Dowling GJ, Donahoe S. A New Breast Reduction.
Terrill PJ, Occupational Therapy Department. Iontophoresis After Hand Surgery. A prospective controlled trial looking at the ability of dexamethasone administered via iontophoresis to soften palmar scars.

Publications


Salerno S, Terrill PJ. (2003) MAC will be back (Microcystic Adenexal Carcinoma) Australian and New Zealand J. of Surgery 2003, 73, 830-832.

Presentations


• **The Effect of Scar Management Products on the ‘Normal Scar’**.

A prospective randomised blinded controlled trial was carried out to examine whether commercially available products recommended to improve scaring did in fact provide any improvement in scaring.

Comparisons were made concerning the effect of each product on scar colour, thickness, softening and width of the scar. The products compared were Cica Care silicone gel sheeting, Scar Fade silicone ointment and Allevyn Thin Foam. Patients after breast reduction or abdominoplasty had their long horizontal scars divided into 4 segments and each was randomised to receive one of the 3 products or no treatment (control). The areas were treated for three months.

• **Iontophoresis after Hand Surgery**.

A prospective controlled trial is underway examining the ability of iontophoresis with dexamethasone to improve palmer or volar finger scars that result after hand surgery. Often these scars are firm, inflexible and may even result in a finger contrature. These scars appear to soften over a two week period when treated with dexamethasone.

Matched patients for scar age and type are being used to control a series of patients with palmer scar scores (Vancouver scar scale) of 3 to 5. After 2 and 4 weeks scar scores are again estimated. The treatment group receive (via an external occupational therapist) 6 treatments with iontophoresis and dexamethasone. Once again the scars are assessed pre and post treatment. Scars are assessed for improvement in symptoms (pain, tenderness, itch) and signs (vascularity, range of motion, pliability).
George Somjen

George Somjen is the head of Vascular Surgery at Frankston Hospital.

He received his medical degree from the Semmelweis University Medical School in Budapest, Hungary. Mr Somjen obtained a Master of Surgery degree at the University of Melbourne and completed his general surgical and vascular surgical training in Australia. He is also trained in diagnostic vascular ultrasonography (Diploma of Diagnostic Ultrasound). For the last 14 years Mr Somjen has been working at Frankston Hospital as a vascular surgeon. He has wide clinical research interests which encompass both venous and arterial disorders.

Mr Somjen is an honorary senior lecturer at Monash University. Additionally he is the vice president of the Australian and New Zealand Society of Phlebology and the Associate Editor of the Australian and New Zealand Journal of Phlebology. He is also a reviewer for the ANZ Journal of Phlebology and for the Venous Digest which is a publication of the American Venous Forum and the American College of Phlebology.

Members

Head of Unit.
Mr George M Somjen, MS FRCSI(Ed) FRACS DDU
Mr Graeme C Last MB BS (Hons) FRACS(Vasc)
Mr Wai-Leng Chue, MB BS FRACS (Vasc)

Research Interests and Future Directions

Research is regarded as an integral part of surgical training. All surgical Registrars attached to the Unit are assigned a research project, and encouraged to present their results at various forums.

The research topics in the past included the pathophysiology of venous insufficiency, deep venous thrombosis and endoluminal repair of aortic aneurysms.
The Vascular Unit has an ongoing interest in wound management. The current plan is to introduce a multidisciplinary approach to the management of diabetic foot complications with the participation of Orthopaedic Surgery, Plastic Surgery, the Endocrine Unit and the Wound Management Nurse.

Further plans include the introduction of carotid stenting to complement carotid endarterectomy.

**Current Projects**

- Nationwide clinical trial of the Cook Zenith AAA Flex Endovascular graft.
- The incidence of occlusive arterial disease in patients presenting with chronic leg ulcers.
- Venous reflux 6 months after varicose vein surgery. A duplex scan study. The paper will be presented at the Annual Conference of the Australian New Zealand Society of Phlebology, September 2004.

**Publications**


**Presentations**


Dr Peter Cole

Peninsula Health’s Director of Thoracic Surgery, Dr Peter Cole, graduated from the University of Melbourne in 1972 and the Clinical School, Royal Melbourne Hospital with Honours in Physiology and Biochemistry.

He has post graduate degrees in General Surgery (FRACS 1979) and Cardiothoracic Surgery (FRCSEd 1983), and Flex Ohio (1991). Dr Cole’s specialist area is lung cancer surgery and for five years, he was Chairman of the Lung GP Clinical Oncological Society of Australia. As a member of the National Health and Medical Research Council, Dr Cole wrote the surgical guidelines for the national document, Clinical Guidelines for Lung Cancer Management. He is also a member of the Australian Cancer Network, the Lung Cancer Committee, Cancer Council Victoria, Cooperative Oncology Group, Australian Lung Foundation – Lung Cancer Speciality Group. Dr Cole also helps to share his knowledge and expertise gained in a 30 year medical career in his role as senior lecturer at Monash University Medical School.

Management of malignant thoracic surgical conditions is optimised if decisions are made regarding treatment in a Multidisciplinary Cancer Clinic Setting and this has been a part of the Thoracic Surgical Unit for several years. In this Clinic, projects involving Medical and Radiation Oncologists as well as surgery are undertaken.

Members of the Multidisciplinary Group are actively involved in the Clinical Oncological Society of Australia, the Australian Cancer Network, Medical Oncology Group and Trans-Tasman Radiation Oncology Group as well as The International Association for the Study of Lung Cancer and the American Society of Clinical Oncology.

Current Projects

- To establish a protocol for the addition of adjuvant therapy to surgery for primary lung cancer, as recommended in the latest World Congress on Lung Cancer in August 2003.

- The Unit is establishing a lung cancer data base based on a system from the Queensland Lung Cancer Study Group. There are already several thousand patients on this database and the data obtained from our hospital will provide valuable demographic information for helping us with future management of lung cancer.

- A first for the Peninsula this year was a meeting of all the Cancer Support Groups on the Peninsula under the auspices of CAN (Cancer Alliance Network). Cancer support groups from Peninsula Health attended and more than 50 attendees heard presentations from each group.

Members

Head of Unit - Dr Peter Cole, MB BS, FRACS, FRCS (Ed), FACS, FCCP, STS.
The Intensive Care Services for Peninsula Health are based at Frankston Hospital and comprise a 10 bed Intensive Care Unit. The unit is multidisciplinary and approximately 580 patients are admitted annually. The Unit is a mixed medical/surgical intensive care unit with a varied casemix excluding neurosurgical and cardiac surgical patients.

Dr John Botha is the Director of ICU and the Clinical Dean for Frankston Hospital. Dr Ian Carney is Director of Physician Training and is an examiner for the College of Physicians. Dr Ramesh Nagappan is Director of Clinical Training and is also an examiner for the College of Physicians. Dr Nagappan is also an invited lecturer at the regular course for advanced trainees in Critical Care.

As reflected in the profiles of the attending specialist intensivists, the Intensive Care Unit has a major commitment to both undergraduate and postgraduate teaching at Peninsula Health.

At undergraduate level there have been numerous final year selective rotations through the Intensive Care Unit. These selectives have included a few international medical students. The commitment of Dr Carney and Dr Nagappan to postgraduate education was reflected in both the FRACP candidates from Frankston passing their FRACP examination.

A highlight of the year 2003 was a visit from the accreditation committee of the Joint Faculty of Intensive Care medicine. The Intensive Care Unit was given recognition to provide core training for one year for Registrars wishing to specialise in Intensive Care.

This reflected the Faculties’ favourable impression of the teaching and clinical research in the Intensive Care Unit. The Unit’s goal for the year 2004 will be to focus on patient care, Registrar education and to cultivate its research profile. Patient care has been benchmarked with regular contributions to the ANZICS database and standardised mortality ratio (SMR) being comparable with Victorian and Australian Intensive Care Units. Following recommendations by the Joint Faculty of Intensive Care Medicine, plans are underway for the establishment of a more sophisticated database. A comprehensive data base, STATIC, will be installed and a Data and Research Co-ordinator’s appointment is imminent. Dr Sanjiv Vij is currently enrolled with the Joint Faculty as the first trainee Registrar in intensive care at Frankston Hospital. The Unit’s international profile will increase as two new Registrars, with international experience, will be appointed over the next six months. These appointments include a Registrar currently employed by the Berlin Heart Institute and a Fellow of the Philippine College of

Helen Stratmann has been a qualified dietitian for 28 years. Helen’s first taste of research came during the nine years she worked at The Alfred Hospital where she was involved in a research project investigating the effect of Jevity on bowel function.

At the Baker Medical Research Institute Helen was involved in lipid research, looking at the types and percentages of fat and the effect on blood lipid levels. She joined Frankston Hospital, in 1989 and has been with Peninsula Health ever since.

In 1997 Helen completed her Master of Human Nutrition at Deakin University. Her research project was entitled “Women and Osteoporosis: Knowledge, Attitudes and Calcium Intakes”. This project was funded by the Dairy Research and Development Corporation. She has had involvement with several Nutrition Department research projects including pre-operative fasting and a malnutrition audit.

Helen is currently completing data collection for the multi-centre trial “Developing and evaluating evidence-based guidelines for feeding in the Intensive Care Unit”. She describes the work as interesting and challenging. The study has been conducted over 26 weeks and it is believed that the results of this trial will have important implications for the way intensivists and dietitians manage nutrition support in the critically ill.
Research Highlights

International Collaborative Research

- Botha J. BEST (Beginning and Ending Supportive Therapy) for the kidney study.

Multi centre trial co-ordinated by Prof Bellomo from the Austin and Repatriation Medical Centre.

This international multicentre study was an epidemiological study reviewing the management and outcome of patients with acute renal failure in intensive care units in North America, South America, Europe and Australasia. Data from this trial has been published.

- Botha J. Developing and evaluating evidence-based guidelines for nutritional support in the Intensive Care Unit.

Multi-centre trial – in progress. Principal Investigator: Dr G Doig (Royal North Shore Hospital, Sydney).

This trial is a multi-centre cluster randomised trial evaluating the impact of applying evidence based guidelines for nutritional support on mortality in the intensive care unit.

Members

Full Time Intensivists.
Director Intensive Care - Dr John Botha, MB ChB, MMed FCP(SA), FRACP, FJFICM
Deputy Director Intensive Care
Dr Ian Carney, BSc MB BS(Hons), FRACP, MHP&TM, FJFICM
Staff Intensivist, Director of Clinical Training
Dr Ramesh Nagappan MB BS, MD, FRACP, FJFICM

Part Time Intensivists
Assoc Prof David Langton, MB BS, FRACP, FJFICM
Dr Gary Braun MB BS, FRACP
Assoc Prof G Hart MBBS, FANZCA, FJFICM
Dr W Kelly MBBS, FRACP, FJFICM

Nurse Unit Manager
Mr Ian Kenny, RN, CCCert, BHM

Research Interests and Future Directions

The Intensive Care Unit at Peninsula Health has established a definite interest and profile in the areas of sedation, acute renal failure, transport of the critically ill and multi-centre clinical research. These interests have lead to national and international presentations with invited editorial commentary in peer and non peer reviewed medical journals.

The Unit’s active membership of the Australia and New Zealand Intensive Care Society Clinical Trials Group (CTG), has facilitated multi-centre clinical research and presentations at the CTG annual meeting.

Continuous medical education remains a focus of the Unit and a three-monthly twilight education meeting has been established. These meetings have facilitated cross disciplinary education with invited speakers presenting in areas such as nutrition and induced hypothermia for hypoxic brain injury. These meetings have facilitated the Unit’s research interests with a large nutrition trial recently completed.

The Unit has expressed interest in the RENAL trial which is a further CTG initiated trial. This trial, which is due to start recruiting patients next year, will compare high volume hemofiltration with standard hemofiltration as a modality of renal replacement in the critically ill.

Current Projects

A multi-centre trial, The Rapid Infusion of Cold Hartmanns (RICH) to cool patients in coma following prehospital cardiac arrest has been approved by the ethics committee and is underway.

Publications


Invited Editorials


Invited Commentary

ICN Intensive Care News
The results of the ENHANCE study on the use of Activated Protein C
Dr J A Botha.

Submitted for Publication


ANZICS ASM Cairns September 2003.

RACP ASM Hobart May 2003.


International Presentations

Nagappan R. Composed & Conducted Critical Care Quiz – 2003; Critical Care of the Elderly; Management of Hypoxic Ischemic Encephalopathy. Invited Faculty at the 9th Indian Critical Care Congress, Jaipur, February 2003.


Financial Support and Research Grants:

The unit has a research grant from the ANZICS foundation for the project Developing and evaluating evidence based guidelines for nutritional support in the intensive care unit.

Below: Dr Ian Carney.
The Department of Emergency Medicine provides care within a scope of practice based on the knowledge and skills required for the prevention, diagnosis and management of acute and urgent aspects of illness and injury affecting patients of all age groups with a full spectrum of episodic undifferentiated physical and behavioural disorders. Our Department of Emergency Medicine is also linked to the development of pre-hospital and in-hospital emergency medical systems and the skills necessary for this development.

Peninsula Health is incorporated into the Victorian Trauma System. The Emergency Department at Frankston is designated as a Metropolitan Trauma Service and Rosebud Emergency Department as a Primary Injury Service. Both sites have a helipad to enable critical care transfers both in and out of the Health Service.

The Department of Emergency Medicine has a formal Quality Improvement program, including morbidity and mortality review, dedicated clinical and management information systems, and a formal Disaster Plan. Several staff members represent the Department of Emergency Medicine on hospital planning committees. There is a formal training program in Emergency Medicine and Nursing as well as an education program for staff. There is an undergraduate education program and an evolving research program.

The Department of Emergency Medicine is accredited by the Australasian College for Emergency Medicine (FACEM) in 2003. ‘Quite an impressive feat’ says Peninsula Health’s director of emergency medicine, Associate Professor Jeff Wassertheil.

Darsim Haji
Emergency Physician, Dr Haji grew up in northern Iraq (Kurdistan) where he qualified as a doctor in 1990 from the University of Mosul. His internship at Hawere Teaching Hospitals included rotations in all major subspecialties and treatment of mass casualties in disaster settings during and after the first gulf war.

From 1992-1994, as a general practitioner and working with different organisations including Cap Annamur (German Emergency Doctors Committee) and Medicines Sans Frontiers, he helped manage landmine victims in remote regions of Iraqi Kurdistan.

Since moving to Australia in 1995, the multi-lingual doctor who speaks Kurdish, English, German, Farsi and Arabic, has not only re-qualified as a doctor by passing the Australian Medical Council examinations(1997) he has also specialised in emergency medicine - Fellow of the Australasian College for Emergency Medicine (FACEM) in 2003. ‘Quite an impressive feat’ says Peninsula Health’s director of emergency medicine, Associate Professor Jeff Wassertheil.

Dr Haji’s advanced training in emergency medicine included stints as a Registrar at Monash Medical Centre, Sandringham Hospital, Dandenong Hospital and Frankston Hospital.

In 2003 he was appointed Principal Registrar of the Emergency Department and in 2004 he became an Emergency Physician, Emergency Department, Frankston Hospital.

Frankston Hospital
The Emergency Department at Frankston Hospital is a sophisticated purpose-designed area, with a separate resuscitation area with capacity for frequent management of medical emergencies in adults and children, major trauma and other life-threatening emergencies. It has capacity for invasive monitoring and short-term assisted ventilation. The Department provides resuscitation, stabilisation and initial treatment for all emergencies. The Department is also designated by the State Medical Displan as one that must be prepared to send out teams of appropriately trained staff to a disaster site.

Frankston Hospital is designated as a Metropolitan Trauma Service. As such it expected to receive all major trauma from our catchment area and either manages injuries on site or stabilises and transfers patients to one of the three Victorian Major Trauma Services. Frankston provides a support and consultation service to the Emergency Department at Rosebud Hospital.

The Department has access to specialists in intensive care, anaesthesia, paediatrics, liaison psychiatry, medical and surgical subspecialties at all times. There is extended hours access to Allied Health professionals including a social worker.

The Emergency Department is supported by 24 hour availability of pathology, a comprehensive medical imaging department and operating theatres.

It is anticipated that the Department of Emergency Medicine will see about 44,000 patients at Frankston Hospital with an admission rate of about 35 per cent.

Rosebud Hospital
The Emergency Medicine service Rosebud Hospital is best defined as an urgent care service. It has a designated, purpose specific geographical area, specifically equipped and staffed to provide assessment and treatment of acutely unwell patients. It is also equipped to for the resuscitation and stabilisation of critically ill patients whilst awaiting transfer to either Frankston Hospital or a tertiary referral service beyond Peninsula Health.
Research Highlights

Research Interests:
- Demand Management
- Casemix evaluation
- Bedside “Point of Care” testing
- Brain Natriuretic Peptide
- Clinical Education
- Investigation utilisation

Current Projects & Trials:
- Towards a Safer Culture (TASC).
  Implementation of risk stratification guidelines in Chest Pain and Stroke.
This project incorporated national clinical practice guidelines for acute coronary syndromes into clinical pathways within a presentation specific medical record format. The project demonstrated appropriate resource utilisation with reduction in mortality, morbidity and acute coronary care interhospital transfer of patients with chest pain likely due to ischemic heart disease.

- Prospective analysis of the outcomes of patients who walk out of the Emergency Department prior to being seen by a doctor, a survey based research project.
In 2003, an average of 204 patients a month left the Emergency Department prior to being seen by a doctor. The fate of these patients is unknown. The study will identify the demographics of this patient cohort and the clinical outcomes using both defined and ethnographic qualitative research methods.

- Infection related events between antibiotic impregnated and standard central venous catheters following venous access via femoral vein puncture.
A randomised single blinded trial is being developed in 2004/5.
**Research Highlights**

- Does an elevated Triage-BNP bedside test correlate with left ventricular failure in patients presenting to an emergency department with dyspnoea. A randomised prospective reverse double blinded trial.

The project is exploring the value of bedside testing for brain natriuretic peptide in identifying cardiac failure in patients presenting with acute breathlessness.

- **Comparison of post lumbar puncture headache in emergency medicine and anaesthesia populations.** (In conjunction with Anaesthesia).

The project is a retrospective review and prospective observational study of the incidence and outcomes of patients undergoing a lumbar puncture. Collaborative Research.

In conjunction with the School of Business Systems, Faculty of Information Technology, Monash University.

- Information technology driven re-engineering of emergency health care facilities in Australia: A process intelligence perspective.

- Development of information technology support system for Disaster Medicine.

- Development of a computer assisted decision support program for Emergency Department and Disaster Medicine Triage.

**Publications**

**Journals**


**Papers - Submitted**


**Papers in Progress**

Wassertheil J, Fisher N, Keane G. *A Model for the provision of basic and advanced life support at major sporting and entertainment venues.*


Cooper G, Wassertheil J. *The Efficacy of Intramuscular Midazolam as a First Line Anticonvulsant for Seizure in Ambulance.*

**Book Chapters**

Spinal Cord Injury

Disaster Medicine
Presentations

Associate Professor Jeff Wassertheil

*Risk Stratification in Chest Pain Management* - The Towards a Safer Culture Project
General Practitioners’ Meeting, Seymour, Victoria, August 19, 2003.

*The Arthur’s Seat Chair Lift Collapse.*

*Resurrecting the dead; a simple shocking experience.*

Key Note Address. *The assessment and management of acute spinal cord injury.*


Financial Support and Research Grants

Triage BNP. Funded via loan of analyser from company.

Information technology driven re-engineering of emergency health care facilities in Australia: A process intelligence perspective. Three year Australian Research Council Linkage Grant. Held by Department of Business Information, Faculty of Information Technology, Monash University.

Development of information technology support system for Disaster Medicine. Three year Australian Research Council Linkage Grant. Held by Department of Business Information, Faculty of Information Technology, Monash University.

Development of a computer assisted decision support program for Emergency Department and Disaster Medicine Triage. Monash University small research grant. Held by Department of Business Information, Faculty of Information Technology, Monash University.
Aged Care Medicine

Aged Care Medicine at Peninsula Health is a major clinical specialty and is one component of the larger sub acute service of Rehabilitation, Aged and Palliative Care Services. These Units all provide the complex clinical care required to assist patients recovering from acute and chronic diseases to promote a return to their own home. Each of the Units within RAPCS is in line with the development of the sub specialties with the Royal Australasian College of Physicians.

In association with Monash University, Professor Joseph Ibrahim has been appointed by Peninsula Health to develop a Centre of Excellence in clinical practice and research in aged care medicine and healthy ageing.

The Rehabilitation, Aged and Palliative Care Service has a major interest in teaching at both undergraduate and post graduate level. The service will be seeking to increase its involvement with the teaching of medical, nursing and allied health students in the coming years. The Unit also supports advanced training of Registrars in aged care medicine, rehabilitation medicine and palliative care medicine. These posts are accredited by the Royal Australasian College of Physicians. The Rehabilitation, Aged and Palliative Care Service contributes to the teaching of these Registrars and to the Interns and Medical Officers rotated into the service from Frankston.

A highlight of last year was Professor Ibrahim’s visit to Dubai, United Arab Emirates for the first Middle East Patient Safety Congress “Improving the safety of care using proactive and reactive risk management techniques”. He was one of the guest speakers and co-ordinators of teaching sessions designed to train health professionals about improving the safety of care using risk management techniques. The participants were from the Middle East and the program was developed and sponsored by the Institute for International Research, October 2003.
Medical education will focus on training of senior and junior medical staff and medical students in systematic approaches to clinical decision-making.

**Supervision of Postgraduate Student Research**

2003: Sole Supervisor Dr H Naidoo, Master of Health Services Management Case Study. Improving discharge practices in a large teaching hospital.


**Recent Research Grants**


National Health and Medical Research Council Project Grant 2003-05: Oakley J, Clarke S, Ibrahim JE, Robins R, Kuhse H. An ethical analysis of the disclosure of surgeons’ performance data to patients within the informed consent process. The objective of the research is to develop an ethical framework or model to incorporate information about individual health care providers into the patient consent process.

**Publications**


**Research Highlights**

- **The Clinical Support Systems Project (CSSP),**

CSSP was held under the auspices of the Royal Australasian College of Physicians and funded by the Commonwealth Government. Frankston Hospital was in the Monash Consortium, along with West Gippsland Hospital in Warragul, the Health Issue Centre, Cabrini Hospital, Monash Medical Centre and the Monash Institute of Health Services Research.

The project was a three year study looking at influencing and changing clinicians’ behavioural patterns using evidence-based medicine (EBM) and clinical practice improvement (CPI) using existing clinical support systems such as information technology, current ward structures, resources.

Stroke Physician: Dr Prakash Nayagam, MB BS (Hons), MRCP, FRAC; Nurse Unit Manager, Stroke Unit, Frankston Hospital.; Helen Lack, RN, RM, Dip NursEd, Ed.

Stroke Team, Frankston Hospital: Stroke Liaison Nurse, CSSP project - Judith Allatt; Speech Pathologist - Monique Stojkovski; Physiotherapist - Michael Davis Occupational Therapist - Celia Kirkpatrick.

Significant outcomes from this study were that adverse events following a stroke have significantly reduced from 10% to 4%. This mainly reflects the risk involved in aspiration, as well as shoulder subluxation, both of which were eliminated using the clinical pathways. Furthermore, length of stay of stroke patients decreased from 19.9 days to 11.4 days before and after the project was instituted.

One of the significant assessment tools that came out of this project was the Dysphagia Screening Tool which was developed by the Monash School of Nursing along with the Speech Therapy Department at Frankston Hospital. A further CSSP project (Hunter Consortium) which has incorporated Stroke Management as part of their Chest Pain evaluation model, is currently being trialled in the Emergency Department at Frankston Hospital.

Above: Professor Joe Ibrahim discusses patient care with Fiona Butler, Skin Integrity Nurse.
Research Highlights

- Vitatops

The Vitatops Trial, which is now in its third year, is a randomised placebo controlled multicentric study, looking into potential benefits of reducing plasma homocysteine levels, using a combination of Vitamins B6, B12 and Folic Acid. The trial is being coordinated from Royal Perth Hospital (Chief Investigator Professor Graeme Hankey), and has currently recruited patients from more than 19 countries. In Australia, there are more than 15 centres which are currently in the trial, including Peninsula Health (Frankston Hospital/RAPCS), as well as Beleura Hospital in Mornington. The rationale behind this trial is that high levels of homocysteine has been implicated in vascular disease such as stroke, TIA, coronary artery disease and peripheral vascular disease. It is thought that high levels are pathological to the inner lining of blood vessels. The idea of reducing levels, therefore, using Vitamins is to ascertain whether such a reduction would have an impact on reducing the burden of vascular disease in the treated group.

The trial is due to continue recruiting for up to seven years, and is an ongoing process with further recruitment essentially of patients presenting with stroke or TIA to Frankston Hospital/RAPCS/Beleura Hospital. These cases are then seen in a Vitatops Clinic once every two months, and randomised into active and controlled groups. Medications are supplied at the Clinic, which may either be placebo or the vitamins.

A trial nurse is involved in the assessment of these patients, along with the medical input. The trial has been approved by both Peninsula Health and Beleura Hospital Ethics Committees.

Study Coordinator for Vitatops Clinic at Peninsula Health: Dr Prakash Nayagam.


Reports, Monographs, Book Chapters and Books


Ibrahim JE. Learning from death in the ARCHI Toolkit Seminars Compact Disc - Improving Patient Safety: can we do more? Australian Resource Centre for Hospital Innovations Seminar, October 17-18, 2002 Sydney, New South Wales, ARCHI National Office.

Presentations

Conference Presentations

Ibrahim JE. Diagnosis and treating health system failures: explaining the principles of safety and quality in the language of clinical practice. Royal Australasian College of Physician’s Annual Scientific Meeting 17-19 May 2004, Canberra.


Ibrahim JE. Quality Initiatives and Indicators: policy, practice and evaluation of their impact on patient safety. 1st Middle East Patient Safety Congress Eliminating preventable harm in healthcare September 29, 2003, Dusit Hotel, Dubai, United Arab Emirates.


Ibrahim JE Problem identification. Royal Australasian College of Physicians, Clinical


**Invited Conference Speaker and Workshop Participant**

**International**


**National**


Clinical Leaders Workshop, Royal Australasian College of Physicians, May 16, 2004 Murray Room national Convention Centre Canberra.

**Regional**


**Abstracts and posters**


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**Research Highlights**

- **Peninsula Health Movement Disorders Program**


  Project coordinator David Meade

  The Movement Disorders Program aims to provide evidence-based management of movement disorders within a framework that is consistent with current best practice and government policy.

  Because of the complex nature of managing movement disorders, previous management frequently involved care by one or two disciplines without the ability to manage the person in a coordinated, best practice approach with input from all members of a specialist, interdisciplinary team.

  The pilot program was established at Peninsula Health in November 2003 based at Rosebud Rehabilitation Unit. Within the 6 months trial, 26 inpatients and 31 outpatients were seen by the team.

  Since the commencement of the Movement Disorders program it is now possible for people living with movement disorders, such as Parkinson’s disease, to access a comprehensive service across care settings by a team whose knowledge base is appropriate to, and caters for, the requirements of the individual and the family.

  Throughout the six months of the pilot project the entire staff have been encouraged to participate in an action research model, where they consistently implement new ideas and evaluate their effect on service delivery.

  Underpinned by symptom management via medication and a rehabilitation approach, people living with movement disorders can now be managed by a team where ‘all members of the team speak the same language’ and can provide coordinated, seamless and proactive care throughout the disease process.
Pain Management services have expanded considerably on the Peninsula over the past 10 years with the development of a palliative care unit, a consultant supervised acute pain service, and interventional pain relief treatments for chronic pain.

Specialised inpatient treatment by Dr Murray Taverner and Dr Tony Prendergast is available at Frankston Hospital for chronic non-cancer pain and severe cancer pain in conjunction with the Palliative Care Service.

Current issues include future development of advanced pain therapy and of a local multidisciplinary pain management outpatient clinic to meet the needs of the community.

There is a strong commitment to the education of medical students, nurses, hospital and local doctors.

Dr Murray Taverner is an honorary senior lecturer at Monash University, Department of Anaesthesia and School of Nursing.

Dr Taverner specialises in interventional pain relief and multidisciplinary pain management and is an Honorary Senior Lecturer in the Department of Anaesthesia and School of Nursing Monash University. His teaching commitments at Frankston Hospital include one to two hours each week with 5th year Monash Medical Students. Dr Taverner graduated from Monash University in 1979 with a MB BS and in 1985 was awarded FRCA from the Royal College of Anaesthetists, followed by FANZCA from the Australian & New Zealand College of Anaesthetists in 1988 and a Grad Dip Medicine – Pain Management from Sydney University in March 1998. His current research interests include allergic reactions to spinal cord stimulators, intrathecal drug administration and intradiscal electrothermal annuloplasty with a Spinecath. Dr Taverner says one of the reasons his role at Peninsula Health is so fulfilling is “the opportunity to help patients who would otherwise not receive treatment.”

- Dr Taverner is currently preparing an ethics committee application to review the outcomes of 30 or more spinal drug pumps he has implanted over the last 11 years.

**Current Projects**

- Taverner M. A double blind placebo controlled pilot study of BOTOX® (botulinum toxin type A) purified neurotoxin complex for the treatment of chronic shoulder girdle muscle pain.

This study examines a new injection treatment with botulinum toxin type A for shoulder girdle pain that acts specifically on muscle spasm. This new treatment may be an alternative for patients who do not obtain adequate pain relief from conventional treatment with medication and physiotherapy.

Conclusions: Essentially the correct dose, in the correct site in the correct patient may be helpful but more research needs to be done to define the group likely to benefit the most.

**Research Interests and Future Directions**

Research interests include:

- pain of spinal and neuropathic origin
- outcomes and demonstrating the cost effectiveness of pain management to show that a coordinated approach can make a difference.

**Members**

Specialists in Pain Services –

Dr Murray Taverner, MB BS, FRCA, FANZCA,
DipPainMgt

Dr Tony Prendergast, MB BS, FANZCA

**Research Highlights**


The aim of the project is to report a case of an allergic reaction to an implanted spinal cord stimulator and how epicutaneous testing identified the allergen and allowed implantation of another stimulator.

Dr Taverner hopes to present the case report as a poster or oral presentation at a World Institute of pain management meeting in Barcelona later this year.

A typical epidurogram showing unilateral spread and catheter injection into the contralateral “filling defect”.

**Presentations**

Members

Head of Unit - Dr David Badov, MB BS, FRACP
Dr Rob Herrmann, MB BS, FRACP
Dr Michael Merrett, MB BS, FRACP
Dr Lee Min Yap MB BS FRACP,
Advanced Trainee (Registrar) Dr Aaron Thornton MB BS

Research Interests and Future Directions

• Inflammatory Bowel Disease
• Endoscopic Anti-reflux procedures
• Endoscopic Stenting
• Endoscopic Mucosal Resection
• Viral Hepatitis
• Capsule Endoscopy

Current projects

A Phase 3, Multi-centre, Randomised, Double-Blind, Placebo-Controlled Induction Study of Sargramostim (Leukine®) in Patients with active Crohn’s Disease.
Principal Investigators: Dr Lee Min Yap and Dr David Badov.

A Phase 3, Multi-centre, Randomised, Double-Blind, Placebo-Controlled, Parallel-Arm, Study of the Efficacy and Safety of OPC-6535 Tablets in the Treatment of active Ulcerative Colitis. This leads to an open label study for both responders and non-responders.
Principal Researcher: Dr Michael Merrett.

A Phase 3, Multinational, Multi-centre, Open label, 52 week safety study to assess chronic therapy with the humanised anti- TNF PEG conjugate CDP870 400mg sc (dosed 4 weekly to week 50) in the treatment of patients with active Crohn’s Disease. This study rolled over onto an open label study of OPC 6535 for 12 months.
Principal Researcher: Dr Michael Merrett.

Publications

Spontaneous Fungal Peritonitis in a Hemochromatotic Patient with Cirrhosis on Long-term Prophylactic Antibiotics.

Berzenhy MD, Broughton SJ, Herrmann R, Merrett MN.

Research Highlights

• Infliximab Use in Inflammatory Bowel Disease - The Frankston Experience.

A comparison with the Mayo Clinic Dr Aaron Thornton.

• Spontaneous Fungal Peritonitis in a Hemochromatotic Patient with Cirrhosis on Long-term Prophylactic Antibiotics.

Team:
Berzenhy MD,
Broughton SJ,
Herrmann R,
Merrett MN.
Departments of Gastroenterology and Pathology, Peninsula Health

Patients with cirrhosis and ascites can develop spontaneous bacterial peritonitis (SBP) without an obvious primary source of infection. Bacterial infections constitute a serious risk to this population of patients. These episodes of SBP can be prevented by the long-term administration of quinolones, which reduce the rates of infection with members of the Enterobacteriaceae family. Such treatment may select for highly resistant Gram-negative organisms and permit the emergence of Gram-positive pathogens, including those with high levels of resistance to antibiotics.

Describes, for the first time, spontaneous fungal peritonitis as a result of Candida albicans in a cirrhotic patient with hemochromatosis who had been on long-term prophylactic antibiotic treatment for SBP. It is possible that the long-term use of antibiotics in this case led to a change in flora and the establishment of spontaneous fungal peritonitis.

It is possible that the long-term use of neomycin and frequent intermittent use of ceftriaxone in this patient led to a change in gastrointestinal flora, allowing for colonization with Candida albicans and subsequent development of spontaneous fungal peritonitis. This awaits further study.

David Badov

David Badov has recently been appointed head of Gastroenterology for Peninsula Health.

Dr Badov is no stranger to Peninsula Health, having undertaken his advanced core training in gastroenterology in the Gastrointestinal Sciences Unit at Frankston Hospital in 1995 and 1996, and since 1997 he has held the position of consultant gastroenterologist VMO.
Dr Badov graduated from Melbourne University in 1988 with Honours in Medicine, Surgery, Psychiatry, Obstetrics and Gynaecology. He later went on to gain Fellow of the Royal Australasian College of Physicians, Membership of the Gastroenterological Society of Australia, Gastrointestinal Endoscopy Accreditation, Victorian Medical Practitioners Board Registration, Membership of the Australian Medical Association and General Medical Council (UK) registration.

Dr Badov has a keen interest in research and was the principal co-investigator on a recent Hepatitis C Management Trial, as well as being involved in more than a dozen clinical trials on various gastrointestinal conditions including chronic liver disease, irritable bowel syndrome and dyspepsia and cancer.

The Gastroenterology Unit provides inpatient and day-stay gastroenterological services at Frankston Hospital.
Kaye Quick

Kaye Quick enjoys her work as a Research Nurse and sees research as an expanding field for nurses.

“It is very exciting and rewarding to feel like you are contributing to improvements in the health service and patient care,” she said.

Kaye undertook general nursing training at Wangaratta District Base Hospital in 1983. After completing her training in 1986, she went on to work in various roles within the acute setting.

In 1991 Kaye completed a Perioperative Certificate of Nursing (Theatre) whilst working as a theatre nurse at The Alfred Hospital.

Since 2001 Kaye has had several research roles at Prince Henry Institute of Medical Research and Monash Medical Centre. Her research work to date has focused on uterine cancer, infertility, contraception and prostate cancer.

At the beginning of 2004 Kaye began her role as Research Nurse for the Diabetes & Endocrinology Department at Peninsula Health. Her sole focus is the Frankston Bone Protection Project. Kaye’s role is to collect patient data consisting of age, race, the cause of their fracture, how long they were admitted, where they were discharged to, for instance a rehabilitation centre or nursing home, history of previous fractures, family history of fractures and susceptibility to osteoporosis.

This stage has just been completed with a retrospective audit of data from over 2,000 patients.

The Department of Diabetes and Endocrinology at Peninsula Health comprises specialist physicians, a Registrar completing advanced training in endocrinology, clinical nurse specialists (diabetes educators), and research nurses. Using a team approach in close relationship with dietitians, podiatrists and ward and clinic nursing staff, the Department provides a comprehensive clinical service to inpatients and outpatients.

Services include inpatient specialist consultation and diabetes education extending to a full Hospital in the Home diabetes service. Outpatients are catered for in a number of outpatient clinics including: the diabetes complications clinic (multidisciplinary clinic devoted to the care of type I and II diabetics and the prevention of complications); the gestational diabetes clinic (a clinic devoted to the intensive management of women with all types of diabetes in pregnancy); the insulin stabilisation clinic (where patients receive full education on the use of insulin injections and intensive support through the early weeks of therapy); the Young Adults with Diabetes (YADS) clinic (an evening clinic for young people with diabetes); the multidisciplinary clinic; endocrinology and endocrine surgery clinic (for follow-up and treatment of patients with a number of endocrine diseases from thyroid disease to osteoporosis).

In recent years there has been increasing research interest and activity which is planned to expand in 2003/2004. The department has established the Diabetes and Endocrinology Clinical Research Unit with offices within the Frankston Hospital campus. Two clinical research nurses have joined the team and infrastructure is in place to support two clinical trials now underway.

It is expected that activity will increase exponentially in 2004.

The department welcomed the appointment of our first advanced trainee in endocrinology in 2004. This follows the successful accreditation of the Endocrine Registrar post by the Royal College of Physicians in 2003.

Our Registrar is currently setting up a research project to complement his clinical training at Frankston and it is hoped that results will be available to allow presentation at the Endocrine Society of Australia Annual Scientific Meeting as well as the Registrar Research Prize presentation day at Frankston.
**Members**

Head of Unit
Dr Christopher P Gilfillan, MB BS(Melb), PhD, FRACP.
Dr Deepak Dutta, MB BS, PhD, FRACP
Dr Steven Morris, MB ChB(Auckland), FRACP

Diabetes Educators
Ms Christine Avery, RN, RM, BNSG, GCDE, Credentialed Diabetes Educator
Ms Sue Cole, RN, CDE, Credentialed Diabetes Educator
Ms Debbie Distefano, RN, CDE, Credentialed Diabetes Educator
Ms Kylie Ball, RN, BNSG, CDE

Research Nurses
Shona Lynch RN, BNSG, GCDE, GCTM, MRCNA
Kaye Quick RN, Cert Perioperative Nursing

**Presentations**

- Gilfillan C. Calcium Supplementation increases bone density in peripubertal girls in a double-blind placebo-controlled randomised trial. Oral presentation (O51) ANZBMS annual scientific meeting and international conference on metabolic bone disease, Coolum, 2003.

- Gilfillan C. Recent Developments in the diagnosis and management of osteoporosis. Invited speaker, Annual Scientific Meeting, Jean Hailes Centre for Women Health, May 2003.


**Financial Support and Research Grants**

Educational grant from Merck, Sharp and Dohme in support of the Frankston Bone Protection Project.
Sponsorship from Bristol-Myers-Squibb in support of the phase 3 clinical trial involving Muraglitazar.

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**Project Highlights**

- **Frankston Bone Protection Project**

**Background**
The occurrence of fracture in the ageing population is a major health problem, with considerable morbidity and mortality within a year especially for patients suffering hip fractures. Despite this, evidence is mounting that only a small proportion of patients are being investigated and treated for osteoporosis when they leave hospital.

**Aims**
The aims of the Bone Protection Project are:
- to identify fracture patients, evaluate their treatment and to recall patients at risk for developing osteoporotic fractures for further investigations and treatment.
- to develop tools and strategies for enhancing the identification and treatment of patients at risk of osteoporotic fractures within Peninsula Health in a on-going, prospective and sustainable way.

Its purpose is to optimise the overall care of these patients through:
- Identification of barriers to good clinical practice and implementing necessary changes.
- Ongoing evaluation of actual performance versus optimal care standards. A commitment to continuous improvement.

The Bone Protection Project is an ongoing service provided by Merck Sharp & Dohme (MSD) that offers support and resources to enable hospitals to implement a quality improvement audit program for the treatment of patients with minimal trauma fracture.

The Bone Protection Project is initially being offered as a pilot program whilst in development, but will potentially be expanded to other hospital sites if proven to be successful.
Vinod Ganju

Dr Vinod Ganju took over the role of Head, Medical Oncology and Clinical Haematology at Peninsula Health in 1994, and has been instrumental in developing the region’s oncology services.

This has included the development of chemotherapy units at Frankston Hospital and Rosebud Hospital and also the development of all the standard clinical protocols, training of nursing, pharmacy and junior medical staff. Dr Ganju represents Peninsula Health at state oncology groups and committees, and is the consultant physician to the Peninsula Hospice Service. He is also consultant to the cancer information group for patients and families organised by the Mornington Peninsula Division of GPs.

Dr Vinod Ganju graduated from the University of Western Australia in 1982 (MBBS) and began his medical career as an intern at Fremantle Hospital. He began his advanced training in Medical Oncology in 1987 at Sir Charles Gairdner Hospital in Western Australia. He achieved FRACP in Medical Oncology in 1990 followed by a Fellowship in Haematology and Medical Oncology from the Mayo Clinic in the USA. Dr Ganju moved to Victoria in 1993 when he was appointed consultant medical oncologist at Geelong Hospital. In 1994 he transferred to the Peter MacCallum Cancer Institute and also set up his private practice in Mornington.

Cancer remains a very common medical problem in our community. In Victoria there are approximately 22,000 new cases of cancer each year associated with approximately 9,000 cancer related deaths. The population of people with cancer over the age of 65 accounts for 59 per cent of cancer diagnoses.

Approximately one in three men and women have a lifetime risk of developing cancer. The most common cancers are colon cancer, breast cancer, prostate cancer and lung cancer. Although lung cancer incidence is lower than the first three cancers mentioned above, it accounts for a very high component of the mortality, ie: 19 per cent of all cancer deaths.

Within the catchment area for Peninsula Health there are approximately 1800 new cancer patients per year and the number is expected to increase by 20 per cent in the next decade.

The cancer service at Frankston Hospital was initiated in 1994 with the appointment of the first medical oncologist. In the first three years there was a gradual development of a Day Oncology Service and establishment of an outpatient service. In the subsequent three years a second medical oncologist was appointed to the unit with a steady increase in the throughput and the ability to deliver services. As the service became better known to the local community the number of referrals escalated quite rapidly. More and more patients were referred to enable treatments to be given locally rather than travelling to central city hospitals. Recently, there has been a marked increase in the throughput and workload in the unit with appointments of a further two Medical Oncologists and a Clinical Haematologist.

Since late 1999, clinical research has become an integral part of the service. The 50th clinical trial to be commenced at Peninsula Health is to be submitted in the next few weeks. The involvement in clinical trial activities has resulted in a vast improvement in the quality of care delivered within the unit and has allowed patients to access some of the latest treatment developments in Oncology and Haematology.

Oncology’s breast care team.
There has been significant community support for clinical research. The recruitment to various clinical trials has remained high and Peninsula Health has gained an excellent reputation with various clinical trial bodies. Some of the newest anti-cancer compounds are now offered through the clinical trial programs.

It is also noteworthy that Peninsula Health has been selected to participate in clinical trials that are available to only a handful of centres around Australia.

Through the development of the clinical research program, affiliations have been developed with a number of national and international groups. These include:

- Australasian Gastro-intestinal Trials Group (AGITG)
- Australian and New Zealand Breast Cancer Trials Group (ANZBCTG)
- International Breast Cancer Study Group (IBCSG)
- European Organisation for Research and Treatment of Cancer (EORTC)
- National Surgical Adjuvant Breast & Bowel Project (NSABP)
- Gynaecological Oncology Group (GOG)
- Australian Leukaemia & Lymphoma Group (ALLG)
- Australasian Lung Trials Group (ALTG)
- Medical Research Council of the U.K.
- European Study Group for Pancreatic Cancer (ESPAC)
- Trans-Tasman Radiation Oncology Group (TROG)
- National Cancer Institute of Canada (NCIC).

As well as the multi-centre collaborative groups, a number of local clinical trial programs are now being developed. These include a unique in-house study in the management of locally advanced breast cancer with Monash Medical Centre, a lymphoma study in collaboration with The Alfred Hospital and an oesophageal trial in collaboration with Peter MacCallum Cancer Institute.

### Members

- Head of Oncology - Dr Vinod Ganju MB BS, FRACP
- Dr J Catalano, MB BS, FRACP
- Dr S Mitra, MB BS, FRACP
- Dr N Potasz, MB BS, FRACP
- Dr J Thompson, MB BS, FRACP
- Nurse Unit Manager – Carmel Mellican, RN
- Oncology Research Manager – Theresa de Man, Ph D
- Sally Blandford RN
- Lynda Hopkins BA L&D, DMU
- Helend Worland, RN, BEc
- Oncology pharmacists - Teresa Henning BPharm
- Ngoc Tri BPharm

### Oncology Research Trials

#### Multiple Myeloma

A much neglected disease in the past is experiencing a resurgence of interest in 2004. The treatment options for this disease have rapidly changed in the last three to four years. Thalidomide has become a major component of treatment of multiple myeloma and recently a Peter MacCallum initiated trial combining Thalidomide with high doses of Celebrex was been completed. Results are not yet available.

A more recent clinical study using Thalidomide, or placebo, in a first line setting with steroids is currently underway. A new version of Thalidomide, Revimid (CC5013) has also undergone extensive clinical trial testing in a large international trial. Peninsula Health is recognised as a major recruitment site for both of these clinical studies. Early local results are extremely encouraging in the treatment of this disease with these regimens (see Research Highlights).

#### Chronic Lymphatic Leukaemia (CLL)

This is a relatively common disease which often has a very indolent course, but in a proportion of patients can behave in an aggressive fashion. A large international

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**Research Highlights**

- **Multiple myeloma patient, Ken Davidson, 79, of Carrum is a participant in the ongoing trial of taking CC-5013 plus dexamethasone.**

Ken, and his wife of 53 years, Jean, are thrilled that he has now been in remission for several months. The couple are looking forward to travelling to visit family in Queensland, and Ken, who is the social secretary for the South Oakleigh Sports & Entertainment Club is hoping to get back to playing golf again in the near future.

The couple have three sons and four grandchildren, and say the love and support of family and friends, as well as the staff at Peninsula Health, in particular Dr Ganju and Carmel Mellican, have helped Ken on his road to recovery. “The oncology nurses are my angels,” he says.

Ken, a retired plumber who served in the airforce in the second world war, was diagnosed with multiple myeloma in 2001. After collapsing with unrelated kidney and blood pressure problems, Ken was rushed to Frankston Hospital. Subsequent tests detected the cancer, and he was placed under the care of Dr Ganju and began chemotherapy treatment.

When approached about participating in the trial Ken said he was ‘all for it’. “I thought, I’m 76, I’ve had a good life, and even if it doesn’t help me, it may help someone else,” he said. Jean was a little hesitant at first, but after reading all the literature, and discussing the treatment with their sons, the family decided to go ahead with the trial.


**Research Highlights and Future Directions**

With increased strength and resources in the research department, the Unit is now starting on a new phase of development which involves clinical and biological studies which are emanating from our centre and may be disseminated to other clinical trial centres. Some of the latest drugs to be introduced in the clinical trial program include some novel new therapeutic compounds.

- **Thalidomide** – this is a compound that has recently made resurgence for cancer treatment. This drug has potent anti-cancer activities in some haematological malignancies, particularly multiple myeloma.

- **Bevacizumab** – This is an intravenous monoclonal antibody which produces a potent inhibition against a growth factor involved in angiogenesis (new blood vessel formation). Peninsula Health is fortunate to be involved in the landmark pivotal trial for this compound in this setting.

- **Revimid** - This is a new generation of anti-angiogenesis compound which is now available in a tablet form. Its actions are thought to be more potent than Thalidomide and perhaps with fewer side effects. Peninsula Health is one of five centres in Australia involved in this trial which is assessing the safety and effectiveness of this treatment in multiple myeloma.

Clinical trial using conventional chemotherapy with Fludarabine and Cyclophosphamide is being tested in this setting with or without the addition of Mabthera. This regimen is extremely expensive and not available to patients with this disease except in the clinical trial setting. Peninsula Health is currently leading the world in recruitment for this study. The trial is ongoing and participating patients from Peninsula Health are responding extremely well.

**Lymphoma**

There have been studies in Hodgkin’s disease which have looked at different ways of combining chemotherapy and radiation. Currently the emphasis is on investigating novel drug combinations in the treatment of non-Hodgkin’s lymphoma. Mabthera is a monoclonal antibody which targets B lymphocytes and has been shown to have synergistic effect with conventional chemotherapy. There have been a series of trials looking at combinations of Mabthera with various types of chemotherapy.

There has also been one important clinical trial looking at the role of Mabthera as maintenance therapy for patients who have already achieved remission after conventional treatment.

A novel drug combination of Gemcitabine, Navelbine and Ifosfamide is currently being tested in a clinical trial which is directed from The Alfred Hospital.

**Gastric Cancer**

Recent clinical trials looking to see whether the prognosis of patients who have undergone potentially curative surgery could be improved by the addition of chemotherapy. Some of these trials have been completed but other trials are due to start shortly.

A new drug combination with docetaxel and gemcitabine will commence shortly to test a group of patients with gastric cancer who have a more advanced form of the disease.

**Colorectal Cancer**

A wide range of clinical trials has been conducted in this disease category.

**Early Stage Colorectal Cancer:**

A very large Australasian clinical trial of testing different forms of chemo-irradiation in the pre-operative treatment of rectal cancer is ongoing. Peninsula Health has been a major recruitment site for this trial.

A number of clinical trials have been conducted in the adjuvant, or post-operative, treatment of patients who have undergone potentially curative surgery for bowel cancer. There has been a progressive evolution in the type of adjuvant chemotherapy given on the basis of these trials.

An exciting new clinical trial will be starting shortly which involves the use of Bevacizumab which is an anti-angiogenic compound. This clinical trial, which emanates from the United States through the NSABP clinical trials group, will involve conventional chemotherapy, with or without Bevacizumab, for prevention of cancer relapse after patients have had potentially curative surgery for colon cancer.

**Advanced Colorectal Cancer:**

In the management of advanced colon cancer a number of clinical trials are being conducted using various combinations of conventional chemotherapy combined with newer biological agents. In one clinical trial chemotherapy is combined with Celebrex to see if better and more sustained results could be produced. In another trial a biological agent, PTZK787, is being added to conventional chemotherapy. This new compound has a number of biological properties which are specifically targeted to certain types of cancer cells. In particular, this group of drugs may prevent new blood vessel formation within tumours and hence aid in preventing tumour progression.

A new monoclonal antibody which is an epidermal growth factor receptor (EGFR) antagonist is also currently on trial for the...
treatment of advanced colon cancer. Bevacizumab has been tested in the treatment of advanced colorectal cancer as part of a large international clinical trial. On the basis of this trial, which has recently been reported, Bevacizumab has now become available as standard therapy in the United States and hopefully will become available in Australia. Peninsula Health was one of the few Australian centres involved in this important clinical study.

**Liver Cancer**

Treatment of metastatic disease in the liver can be successful in a small group of patients. Aggressive surgery for secondaries in the liver can be quite successful in limited groups of patients with advanced cancer. Some trials have been conducted which involve the use of chemotherapy before and after surgery to see if this has any impact on long term survival. Peninsula Health is participating in one of these studies.

**Pancreatic Cancer**

A number of trials have been conducted in the last few years at Peninsula Health in the treatment of pancreatic cancer. This is a very difficult tumour group to treat. There have been some trials which involve novel combinations of chemotherapy and radiation in this population of patients. New drugs such as Alimta (a new type of cytotoxic chemotherapy agent) as well as Erlotinib (an oral EGFR inhibitor) have been tested. Further trials in pancreatic cancer testing newer compounds and more ways of combining chemotherapy and radiation are planned for the next six months.

**Breast Cancer**

**Early Breast Cancer**

In recent years the major interest in the management of early breast cancer has been to modify the existing post-operative or adjuvant therapies to improve the

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**Research Highlights and Future Directions**

- **Panitumumab** - This is another of the new monoclonal antibody against epidermal growth factor receptor (EGFR). Currently a large international trial of this compound is ongoing in the management of colorectal cancer. Peninsula Health is involved in this collaborative effort.

- **Erlotinib** - this is an oral EGFR antagonist which has been tested in a number of different cancer settings. This compound has recently received international interest because of a positive result in a lung cancer trial. Peninsula Health was involved in the international trial which emanated from the National Cancer Institute of Canada.
Local Studies

Currently, the Medical Oncology Department is involved in some Melbourne-based clinical trial initiatives with some of the local hospitals.

- Sequential evaluation of tumours undergoing pre-operative chemotherapy for breast cancer (SETUP for breast cancer):

This is a clinical trial which aims to examine detailed biological and radiological characteristics of breast cancer which is undergoing pre-operative chemotherapy. This study involves very detailed analysis of the tumours with CT scans, PET scans as well as analysis of the tumour and blood for genetic proteinomic and molecular characteristics that predict responses to specific drugs. The long term aim of this type of research is to specifically target the right drugs for the right sorts of tumours. This study has recently commenced at Monash Medical Centre and will be recruiting patients from Peninsula Health very shortly.

PET scans of breast tumours (before and after pre-operative chemotherapy)

- Phase 1 Pancreatic Study in collaboration with Peter MacCallum.

- Phase 1 Oesophageal Study in collaboration with Peter MacCallum.

- A Multi-centre Phase II Study of Risk-Adjusted Outpatient-Based Salvage Therapy for Relapsed and Refractory Lymphoma.

In recent months a new study investigating the role of bisphosphonates (bone strengthening agents), in particular Zoledronic Acid, has been tested in this very same setting to see whether there is an additional anti-cancer effect from this group of drugs in terms of prevention of relapse.

Advanced Breast Cancer

In the management of advanced breast cancer a number of trials have been conducted in the last few years involving the testing of some new chemotherapeutic agents such as Gemcitabine and Capecitabine.

Recent work has been to develop chemotherapy drugs which can be given orally and hence minimise the hospital based element of cancer management. An oral preparation of Irinotecan is currently undergoing trials. There is also an oral formulation of Navelbine which is given in conjunction with oral Capecitabine and Herceptin in a group of patients with advanced breast cancer.

Ovarian Cancer

Advanced ovarian cancer is usually treated with a combination of surgery and chemotherapy. A number of newer chemotherapeutic agents have been tested in trials over the last few years. The Gynaecological Oncology Group (GOG) of the United States, together with many other international trial groups, has recently completed a clinical trial testing a number of possible drug combinations in the treatment of this disease. Peninsula Health has participated, along with many other centres in Australia and around the world, in this very important clinical trial.

Supportive Care Studies

The unit is also involved in studies which offer supportive care. We have four trials which address issues relating to anaemia in cancer as either a consequence of disease or due to the side effects of their chemotherapy. This has offered patients access to a new drug as an alternative to the standard blood infusions.

In addition, there has been the Australia wide experience of zoledronic acid in the treatment of bone secondaries for a variety of different cancers. This drug, while not treating the bone cancer, decreases pain and the risk of fractures from the disease leading to improved quality of life.
The Pathology Department is highly regarded as a training institution for Anatomical Pathology Registrars in Victoria. Over the last three years, the department has successfully completed the training of two anatomical pathologists. This year Dorevitch Pathology is part-funding a new Haematology - Oncology Registrar training position at Frankston Hospital from June.

The Frankston Hospital Dorevitch Laboratory provides pathology services for Peninsula Health, including Frankston and Rosebud Hospitals, Mt Eliza Centre, and related aged care facilities and for General Practitioners and Specialists in the area. The Frankston Laboratory is located on level 3 of the Frankston Hospital.

The Laboratory offers services in all pathology disciplines including biochemistry, microbiology, virology, serology, histopathology, haematology, cytology and immunology.

The Laboratory continues to meet the requirements for laboratory accreditation by the National Association of Testing Authorities, Australia (NATA). This ensures quality compliance across all functions of the laboratory and strives for continual improvement.

Dorevitch Pathology is involved in education and training, being accredited for training of anatomical pathologists and medical students, and providing in-service training for hospital staff, and work placements for TAFE and secondary school students.

**Members**

Director - Dr Jill Pollard, MM BS, FRCPA, MIAC, PhC
Dr Phillip Kostos, MM BS, FRCPA, MIAC
Dr Cleve Magree, MB BS, FRCPA
Dr Karen Talia, MB BS(Hons), FRCPA
Dr John Catalano, MB BS, FRACP, FRCPA
Dr Sheena Broughton, MB ChB, MRCP (UK), FRCPath
Dr Chandrika Perera MB BS, PhD, Dip.Bact, MD, FRCPA

Laboratory Manager - Ms Jenny Couper, BSc (Hons)

**Research Interests and Future Directions**

The medical staff has special interests and expertise in the areas of:

- Cytology, particularly fine needle aspiration cytology
- Oncological Pathology
- Respiratory Pathology
- Thyroid Pathology
- Haematologic Oncology
- Antimicrobial prescribing
- Haematologic morphology

**Current Projects**

Dr. John Catalano is currently Principal Investigator in three international randomised clinical studies in multiple myeloma and chronic lymphocytic leukemia as well as co-investigator on several other national and international studies.

**Presentations**

Dr. Jill Pollard has a special interest in breast and thyroid disease and is presenting on “Fine Needle Aspiration of Thyroid Gland” at the Australian College of Surgeons Annual Meeting in May 2004.
**Richard Newton**

*Dr Richard Newton has been a consultant psychiatrist at Peninsula Health since 1997.*

Dr Newton is a senior lecturer in the Department of Psychological Medicine at Monash University. He is Chair of the Victorian Psychiatry Training Committee, the State Training Committee for the Royal Australian and New Zealand College of Psychiatrists (RANZCP) and is Chair of the RANZCP Bi-National Committee for Advanced Training in Adult Psychiatry. Dr Newton’s most recent research activity has been in collaboration with the Clinical Nutrition Department, examining the effects of a simple dietary intervention on the common and extremely debilitating side effect of weight gain with the novel antipsychotic olanzapine. This study has been submitted for presentation at a meeting of the European College of Neuro Psychopharmacology in Stockholm later this year, and has been presented at national meetings in Australia.

Dr Newton has authored more than 25 published papers including conference presentations, peer-reviewed journals and book chapters.

Dr Newton graduated from the University of Edinburgh Medical School in 1985 with a MB ChB followed by a MRCPsych in 1989 and FRANZCP in 1995.

He has been involved in a wide range of teaching activities in Melbourne and at the University of Edinburgh. He is a college supervisor for the Royal Australian and New Zealand College of Psychiatrists. He has also lectured to a wide range of students on Anorexia Nervosa, Bulimia Nervosa, Cognitive-Behaviour Therapy, and Anxiety Management.

The Psychiatric Service’s research activity has been led by Specialist Psychiatrists with specific research interests and the Chief Nursing Officer, who leads the Nursing, Education and Quality Improvement Program. This program has been active in identifying training and educational needs in clinical areas and evaluating these.

The Service has had active quality improvement processes with significant clinical audit led by the Quality Co-ordinator.

Psychiatry trainees are involved in a Masters program in Medicine in addition to the training program of the RANZCP.

**Members**

Director of Psychiatry

Dr John Reilly, MB BS, DPM, DipEpiBiostats, FRANZCP

Dr Richard Newton, MRCPsych, MB ChB, (Edin), FRANZCP, Senior Lecturer (Acting Director)

Chief Nursing Officer

Barbara Keeble-Devlin, RPN, BAppSci, DipAppSciPsychNurse, MEd

Quality Co-ordinator

Rosemary Dowling, BSc BSW DipFamTherapy

Director of Aged Psychiatry

Dr John Douglas, MB BS DPM FRANZCP Co-ordinator, Psychiatry Training (to April 2004)

Dr Dennis O’Loughlin, MB BS, DipRACOG, MPM, FRANZCP

Specialist Psychiatrist, Aged Psychiatry

Dr Stephen MacFarlane, MB BS FRANZCP

Specialist Psychiatrist, Dr Fiona McGlade, MB BS FRANZCP.

**Research Interests and Future Directions**

- Clinical Supervision
- Weight management and anti-psychotics
- Psychiatric Nurse practitioners
- De-institutionalisation
- Cognitive behavioural therapy
- Dementia
- Eating disorders
- Quality management and clinical documentation

**Current Projects**

*Psychiatric Nurse Practitioner Project.*

Nursing Clinical Development Unit (NCDU) Centre for Psychiatric Nursing Research and Practice (CPNRP), Melbourne University.

This innovative and challenging project aims to demonstrate the safe and appropriate
clinical role of a nurse practitioner in a community psychiatric service setting.

Publications


Financial Support and Research Grants

Australian Rotary Health Research Fund – Development and use of a multi-sensory environment in a designated room in an aged acute psychiatric inpatient unit facility.

Monash University Faculty of Medicine, Nursing and Health Sciences – An investigation of the efficacy of practice development and clinical supervision for mental health nurses.

Below: Psychiatric Unit pharmacist Glenice Bateman.

Research Highlights

Dr Richard Newton has recently completed a study in co-operation with dietitian Sheree Bassett that examined the usefulness of a simple nutritional intervention to modify troublesome weight gain that is often seen with certain antipsychotic medications. This study has generated strong interest both locally and internationally, and has been submitted for presentation in Stockholm at the European College of Neuro Psychopharmacology annual meeting as well as being presented at national meetings here in Australia.

The study demonstrated a very strong treatment effect for dietetic intervention to prevent the debilitating and very common side effect of weight gain with Olanzapine, the most commonly prescribed antipsychotic in Australia. Previous research documents an average of 4.5-7 kg of weight gain in the three months following its commencement.

51 patients who had recently commenced Olanzapine were randomised to either a control group or an intervention group. The intervention consisted of six, one-hour nutrition education sessions conducted over a three-month period.

After three months the control group had gained significantly more weight than the treatment group (6.0 kg vs 2.0kg, p<=0.002). The treatment group also reported greater improvements in moderate exercise levels, quality of life, health, and body image compared to controls.
Respiratory/Thoracic Medicine

David Langton

Associate Professor David Langton is Peninsula Health’s Director of Medicine and Thoracic Medicine.

After graduating as dux of Monash University’s medical school in 1981, Dr Langton began his internship at Prince Henry’s Hospital and the following year he began specialty rotations in Internal Medicine, Renal Neurology, Oncology, Cardiology, Intensive Care and Respiratory. In 1988, Dr Langton became a Fellow of Royal Australasian College of Physicians and SAC – Intensive Care. As a NHMRC Research Scholar at Monash University in 1988, Dr Langton’s PhD subject was “Cardiovascular responses to exercise in low output cardiac failure”. Dr Langton joined Peninsula Health in 1989 as the director of the Intensive Care Unit of Frankston Hospital. After graduating from the School of Sleep Medicine at Stanford University in California in 1993, Dr Langton became a founding director of the Sleep Laboratory at Frankston Hospital. His interest in respiratory medicine including asthma management also led to him becoming the founding director of Peninsula Health’s Department of Thoracic Medicine.

The Respiratory Medicine unit has two main areas of interest – not only does it deal with patients with lung diseases, but also those with breathing problems overnight (predominately Obstructive Sleep Apnoea).

While the physicians care for those patients who are acutely unwell in the hospital or see patients in the outpatient department, the lung function laboratory staff test people with known lung disease (assessing progression of disease or response to treatment) or those with respiratory symptoms, in order to assess the presence and severity of impairment. The laboratories are situated in Frankston and Rosebud Hospitals, and together perform more than 3000 tests each year.

Patients are referred to the Sleep Laboratory if there is any suggestion of Sleep Disordered Breathing on taking a history. In the Sleep Laboratory we monitor these patients overnight so as to decide if one of these diseases (eg Obstructive Sleep Apnoea) is present, and its severity. We also provide and assess treatment for those with severe disease, or for those who are very symptomatic.

Another important part of the Unit’s work at the Sleep Lab is providing an excellent and supportive environment for those starting therapy, and so a daytime clinic also operates from the lab, twice a week.

The unit’s two respiratory nurses help people (usually outpatients) with both asthma and emphysema, helping people understand their disease and assisting them in improving their health and quality of life in the community. Education sessions and support for the Peninsula’s Pulmonary Rehabilitation Programmes is also provided. The nurses are very busy, also managing many of the research programmes that pass through the department.
Research Highlights

• Survey of home oxygen recipients on the Mornington Peninsula.

Associate Professor David Langton

Team:
Gary Braun
Julie Sharp
Rita Coffey
Van Le Blanc

This questionnaire-based project has two aims.

The first is an epidemiological study of the number of patients receiving home oxygen. This will evaluate who receives home oxygen, for which diseases, how they use the oxygen and at what cost.

The second aim is an evaluation of the extent to which these patients have thoughts about end of life decisions, such as, would they wish to be treated in Intensive Care if they deteriorated, would they want CPR if their heart stopped.

This research project is important because it has never been done before and the results will be important in relation to future health-care planning.

The background to the project is a previous study of patients presenting to the Royal Melbourne Hospital Emergency Department found that few Australian patients had thought about end of life decisions and advance directives.

Associate Professor Langton hopes to publish results in the Medical Journal of Australia in 2005/2006.

Members

Head of Unit.
Associate Professor D Langton MB BS(Hons), MRACMA, FCCP, FRACP
Dr G Braun MB BS, FRACP
Dr N Manolitas, MB BS FRACP
Julie Sharp, Respiratory Nurse Consultant
Rita Coffey, Asthma Educator
Van Le Blanc, Senior Respiratory Scientist

Research Interests and Future Directions

• Pharmaceutical trials of novel agents used in the treatment of asthma and emphysema.

• Epidemiological survey of home oxygen recipients on the Mornington Peninsula.

Current Projects

• A 3 year evaluation of seretide in exacerbations of COPD.

• Use of the respimat for delivery of tiotropium in COPD.

• Survey of home oxygen recipients on the Mornington Peninsula.
Women’s Division

Women’s Children’s and Adolescent Health is a collection of services at Frankston Hospital provided from an integrated unit which was purpose built and opened October 2002.

The Obstetrics and Gynaecology Unit which provides care to women, oversees approximately 1600 deliveries a year and conducts gynaecological surgery daily. Frankston Hospital is a level two referral centre offering comprehensive pregnancy care except for neonatal intensive care. The Inpatient Unit comprises a 25 bed integrated unit.

In 2003 Peninsula Health appointed Professor Robert Burrows as Professor Director of Women’s, Children’s and Adolescent Health. This is a joint appointment with Monash University.

Since the appointment of Professor Burrows, more research activities have been undertaken. These activities are focused on Women’s Health issues nationally and internationally but do not preclude studies outside of our traditional spheres that also impact upon Women’s Health.

In addition, journal clubs and the teaching of Evidence-based Medicine will become regular events within this unit involving healthcare providers at all levels.

Members

Head of Unit.
Professor Director - Professor Robert Burrows, MD, FRCS(C), FRANZCOG

Mr WG Atchison, MB BS, FRANZCOG, COGUS, DDU, FRCOG
Mr GJ Baker, MB BS, FRANZCOG, FRCOG, FRCS
Mr NC Diamond, FRANZCOG, FRCOG, MRACMA
Mr A Griffiths, MB BS, FRANZCOG
Mr K How, MB BS, FRANZCOG, MRCOG
Mr TW Jobling, FRCOG, FRANZCOG, CGO, MD
Mr DG Johnson, MB BS, FRANZCOG, FRCOG
Mr D Luiz, MB BCh, FCOG(SA), MRCOG, FRANZCOG
Dr Petra Porter FRANZCOG, MBBS

Nurse Managers.

Womens Inpatient Services: Kate Brown, RN, RM, GradDip CMP, MN
Womens Services: Kym Davey, RN RM, BN, IBCLC, CBE, SPC (Part 1)
**Children’s & Adolescent Division**

The Children’s and Adolescent Unit comprises a Paediatric Ward and Special Care Nursery, with hospital responsibilities extending to the Accident and Emergency Department and the Midwifery Unit.

There are well established links to child support and advocacy agencies based outside of the hospital setting.

The Special Care Nursery at Frankston is a Level 2 nursery and provides facilities for up to 13 babies from 33 weeks pregnancy onward, needing closer observation or specialised treatment.

The Child and Adolescent Unit at Frankston can accommodate up to 17 patients, providing family centred care for children and adolescents up to the age of 16.

Services include:

- Eating disorder service
- Asthma education
- Diabetes education and support
- Toddler support groups
- Elective surgery
- Play therapy

**Members**

The Children’s & Adolescent Unit includes five Specialists Paediatricians who participate equally in providing rostered cover, and involvement in administrative and educational meetings, student and resident teaching.

Paediatricians -
- Dr Peter Francis MB BS FRACP
- Dr Simon Blair MB BS FRACP MRCPHC
- Dr Hugh Kelso MBBS FRACP
- Dr Ted Lowther MBBS ChB DCH FRACP
- Dr Anne O’Neill MB BS FRACP

Nurse Unit Managers -

- Child and Adolescent Ward: Ms Helen Hutchins, RN
- Special Care Nursery: Ms Dianne Macfarlane, RN, RM, IWC Neonatal cert, BAppSci(Nadmin), MRCNA

Junior medical staff comprise five resident Medical Officers of at least second year experience, and one Paediatric Registrar rotated from the Royal Children’s Hospital training program. Experience is gained in hospital and community paediatrics. Fifth year medical students are rotated for four-week paediatric rotations from Monash University.

**Current Projects**

The Unit is a participant in several multi-centre clinical studies in neonatal medicine:

- Caffeine study, comparing the efficacy of caffeine versus theophylline as a central respiratory stimulant in the treatment of apnoea of prematurity.

- ANZNN study analysing the outcomes of infants born in level 3 nurseries and transferred to level 2 nurseries.

- DINO Trial - RWH. DHA Improval in Neurological Outcome.

- DINO Study analysing neurological outcome of infants fed milk with DHA supplementation.

**Research Highlights**

- **The Children’s Healthy Development Project: An examination of attachment, resilience and adjustment in children.**

  Principal Researcher: Verena Ross
  La Trobe University Doctoral Project.
  Duration of Trial April 2004 - December 2004 Ref: 2004-06.

- **How many women who give birth at Frankston Hospital breastfeed for six months?**

  Principal Researcher: Ms Carole Gilmore

- **International studies: the latest being the Term Breech Study.**

  This study was initiated and run by Mr I McCahon.
Peninsula Health offers a rheumatology referral service for inpatients at Frankston Hospital and at the Mt Eliza Centre. The two Specialists’ interests include musculoskeletal problems, autoimmune diseases and metabolic bone diseases (osteoporosis, Paget’s disease).

**Members**

Dr Mano Thevathasan, MB BS (Hons), FRACP
Dr Esther Yenson-Chu, MB BS, FRACP, MD.

**Research Interests and Future Directions**

Interests include cytokines and pathophysiology of inflammatory arthritides.

**Publications**


**Presentations**


Yenson-Chu E. Proinflammatory cytokines and PGE2 stimulate PTHrP production by synovial fibroblasts. Poster presentation at the ACR (American College of Rheumatology) Conference, Boston USA, 1999.

**Research Highlights**

- **Responding to Needs In the Country**

Education by absorption, is the most painless and effective way of knowledge transfer to General Practitioners. Teaching on their own patients at the time of consultation brings an immediacy and vividness of the educational experience to most doctors. But the shortage of Rheumatologists and the reluctance of Consultant Doctors to set up in country centres has been an impediment in achieving this. In Victoria, we have been experimenting with several ways of having a Rheumatology presence in an area. It soon became obvious that there were simply not enough of us to have a physical presence everywhere and so two novel approaches to needs were trialed. A Video-Consultation Link Provision of an Arthritis Nurse with access via Video and other Electronic means. Both, with a Rheumatologist in Melbourne.

This part of the paper will present a report on the setting up and an assessment of a pilot project on the Video-Consultation Link, opening the possibility of a more convenient way of service and educational provision to those in need of good musculoskeletal care in rural Australia. It shows that such a service is feasible if somewhat expensive, though very well accepted as useful by General Practitioners and patients alike. The number treated was small (11) and it is hoped that a larger study may better assess effectiveness and quality.

Grateful acknowledgment to the help given by some key people who have worked in Partnership:

- Orbost Regional Health
- Jill Hutchison – CEO
- Debbie Hall - Community Linkages Nurse
- The Orbost Medical Group
- Driving force – Dr Hulme Hay
- Peninsula Health at Frankston Hospital
- Siva Sivarajah – Executive Director RAPS Program
- Eric Aspinall – Information Technology and Telecommunications Manager
The Nursing Research Unit’s focus for the year was on laying the foundations for increased activity throughout Peninsula Health. Psychiatry and Palliative Care continue to be very active, and to engage others, we established a course for registered nurses and developed a partnership with Monash University (Peninsula campus) to promote collaboration between clinical nurses and nursing academics.

The Peninsula Health Nursing Research Program aims to introduce and educate nursing staff into the intricacies of research. We are focused on providing a supportive learning environment in which to develop critical appraisal skills necessary for evaluating research in relation to establishing clinical guidelines that are evidenced based. The research program runs group meetings that provide education on all aspects of research from literature review to ethics applications. All participants are encouraged to discuss their own proposed projects and provide feedback to each other. Individual meetings with the facilitator, Carole Gilmour, provide additional support and as these projects progress, appropriate consultation will occur as necessary.

Much time and energy has been put into this by the participants and it is anticipated that one of our initial projects will be commenced in late 2004.

**Members**

Head of Nursing Research
Executive Director of Nursing - Elizabeth Wilson, RN CTCert CCCert DipHNUM BaAppSci(N Admin) MHA FRCNA
Jan Child, RN GradDip (Behavioural Sc) GradDipHthAdmin
Carole Gilmour, RN RM BA AppSci (Nsg) MNsg GradCertHigherEd MRCNA
Maureen Habner, RN RM BA AppSci(AdvNsg) Ed MHA
Di Jamieson, RN BN MBus MRCNA
Shamala Jones, RN RM BNsg MNsg CertMgmt, CertAdvNurEmerg
Barbara Keeble-Devlin, RN DiplAppSci (AdvPsychNsg) BAAppSci (Adv Nsg) MEd St. FRCNA MANZCMHN
Professor Margaret O’Connor, DN MN BTheol RN FRCNA AIMM
Nyree Parker, RN BAAppSci(Nsg) BNsg GradDipCritCare MNsg GradCertHealth
Jane Poxon, RN PeriOp Cert
Jodie Ten-Hoeve, RPN GradDipPsychNsg

**Professor Margaret O’Connor**

**Professor Margaret O’Connor, DN, MN, BTheol, RN, FRCNA, AIMM.**

Margaret O’Connor began general nurse training at the Mercy Private Hospital in East Melbourne in 1975, then gained experience in medical and surgical nursing as well as community nursing. After receiving a Bachelor of Theology in 1987, Margaret began to consolidate her career in palliative care, working at Melbourne Citymission Hospice, nursing in both inpatient and home care settings. In 1989, she became a foundation nursing staff member of the Mid-Eastern Palliative Care Association and subsequently became the Co-ordinator of Nursing in 1990. In 1992 she achieved her Master of Nursing (RMIT) and was also appointed the inaugural Director of Caritas Christi & Order of Malta Hospice Home-Care Services. In January 2001 Margaret commenced lecturing in Cancer and Palliative Care at La Trobe University’s School of Nursing. In 2002, she gained a Doctorate in Nursing at La Trobe University.

Margaret is a Fellow of the Royal College of Nursing, Australia, a member of the Australian Institute of Management and an honourary Senior Fellow in the School of Post-Graduate Nursing at the University of Melbourne.

Margaret was a Board Member of Palliative Care Victoria for 10 years. In March 2003 she commenced as the inaugural Vivian Bullwinkel Chair in Nursing (Palliative Care), at Monash University, a position with three clinical partners, including Peninsula Health, all concerned with the delivery of palliative care services on the Mornington Peninsula.
Research Highlights

• **Practice Development and Clinical Supervision for Mental Health Nurses:** A study into the effectiveness for mental health nurses.

(Collaborative research between Peninsula Health Psychiatric Services and Monash University)

Researchers:
Kay McCauley, RN, MN, Monash School of Nursing
Stephen Elsom, RN, MN, Monash School of Nursing
Barbara Keeble-Devlin, RN, DipAppSci (AdvPsychNsg), BA(Med) MB ChB (Edin), FRCNA, MANZCMHN.

This project is designed to evaluate the impact of practice development and clinical supervision in mental health nursing practice. As part of an international collaboration with the University of Ulster and the Royal College of Nursing (UK) the School of Nursing at Monash University is taking a leading role in the promotion of nursing Practice Development in Australia. Recent political and professional initiatives have resulted in the state-wide introduction of a variety of models of clinical supervision for mental health nurses in Victoria. Both processes have similar goals and this study will make a significant contribution to the evidence base regarding practice development in nursing practice.

This study aims to evaluate the impact of practice development and clinical supervision on mental health nursing practice. Both processes are being introduced on a widespread basis in Victorian health services but because the two approaches are being implemented in the same context of nursing practice at Peninsula Health Psychiatric Services, a direct comparison of their effectiveness is possible.

Funding body: Monash University Small Grants Scheme.

Research Interests and Future Directions

Our focus is on identification of areas of nursing practice that could be improved by developing guidelines for practice based on the best evidence available. We are committed to developing a culture of research amongst the nursing staff across all Peninsula Health sectors through providing education and support for new projects.

Future nursing research will continue to revolve around identifying and instigating best practice in nursing care for Peninsula Health.

Current Projects

**Peninsula Health Psychiatric Services (Nursing)**

• **Nurse Practitioner Demonstration Project.**

Members of the project team are:

Chief Nursing Officer, Psychiatry
Ms Cayte Hoppner, BNSn GradDipPsychNsg, MNsg, ProfCertPharm, Doctoral Candidate Nursing, University of Adelaide, MANZCMHN MRCNA
Senior Community Nurse, Psychiatry, Nurse Practitioner Candidate (NPC)
Dr Richard Newton, F.R.A.N.Z.C.P., M.R.C., Psych.MB.Che.B.Edin)
Snr Lecturer Department of Psychiatry, Monash University,
Consultant Psychiatrist / Psychiatry
Ms Gayle Reid, RN, RPN, MANZCMHN
Nurse Practitioner Demonstration Project, Project Officer / Psychiatry

As reported in the 2003 Peninsula Health Research Report, the Nurse Practitioner Demonstration Project – Community Psychiatric Nurse Practitioner is a 12 month externally funded project through the Nurse Policy Branch, Department of Human Services. The project has been in progress since August 2003.

The nurse practitioner role is at the apex of clinical nursing practice. The role extends current practice, is advanced, with a strong foundation in knowledge, skills and competencies. The role extends nursing....
practice outside of the current legislative framework in five areas.

Limited prescribing from a context specific formulary, initiating diagnostics and pathology, referral to medical specialists, admitting and discharging privileges and approval of absence from work certificates. The project is currently collecting data to evaluate the need to extend the scope of practice in these areas. Clinical practice guidelines will be developed to provide the framework for the Nurse Practitioners extensions to practice.

The role of the Nurse Practitioner incorporates core nursing components including advanced clinical assessment and treatment approaches, education, counselling, research, quality improvement, administration and management, leadership, advocacy and policy.

**Palliative Care Unit**

- **Barriers and Facilitators to Using Nursing Research Findings in Practice.**

  Researcher: Professor Margaret O’Connor.

  Despite an acknowledgement that nursing research is integral to the delivery of effective and efficient patient care utilisation of evidence-based knowledge in nursing practice continues to be sporadic. Nurses cite many barriers to research participation and utilisation, including inadequate training, inaccessibility of research findings, lack of time, uncertainty regarding outcomes of using research, and lack of organisational and collegial support to use research in practice. Exploring perceptions of barriers to research participation and utilisation is fundamental to the development of educational strategies that will enhance nurses’ perceptions of ability and authority to initiate, participate in and disseminate findings, and to sustain change in practice that has arisen from nursing research initiatives.

  The primary aims of this study are to use an established, validated, attitudes questionnaire to identify what registered nurses believe to be barriers to and facilitators of research utilisation and implementation in clinical practice. Replicating a survey undertaken at a number of other health care sites where new nurse researcher roles have been established, data from this cohort will both add to local knowledge and to the larger research database.

  This will form the basis for further work as the Chair’s work becomes more established. Participants will be nursing staff across the whole of Peninsula Health. The project is expected to take six months and can be repeated in the future to identify changing attitudes towards research.

  Commenced March 2004.

  Funding body: Monash University Small Grants Scheme ($27,000 granted)

- **Linking the Parts: Describing palliative care nurse consultant roles.**

  Professor Margaret O’Connor.

  A qualitative study to describe the pivotal role of the palliative care nurse consultant in facilitating a person’s progress through the various hospital departments and to discharge. The project is expected to take 10 months and will provide us with knowledge about how this role works and its benefits for patient access to services. This project commenced unfunded in April 2004.

- **Communication issues in palliative care units, with staff and families.**

  Professor Margaret O’Connor.

  This project will explore the issues of family involvement in decision-making in the in-patient palliative care setting (that may lead to aggressive/violent behaviour). It is anticipated that it will provide information

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**Barbara-Anne Cass**

Barbara is enjoying her placement as a graduate nurse with Peninsula Health's inpatient palliative care unit, whilst completing the Honours Program of the Bachelor of Nursing degree at Monash University.

Palliative Care is particular area of interest and Barbara sees her future here where further research can be accomplished and also her life experience and skills can be utilized. During her nursing degree studies she worked as a medical receptionist and also as a personal carer at a hostel for the aged. Prior to commencing her nursing studies, Barbara had several years in the funeral profession and this career led to studies in bereavement and voluntary grief counselling work. She sees her extensive experience in these areas as the foundation to consolidate her passion for the immense worth in caring for the dying patient. Last year she chose to do studies in palliative care as part of her degree and this led to her current research project: “The experience of palliative care patient in a hospital emergency department”. This qualitative study aims to gain an understanding of why palliative care patients present at the emergency department and how this impacts on the end of life experience for the person. A phenomenological approach will allow the researcher to gain insight into the participant's experience. Analysis and interpretation of the data may assist in developing improved services for palliative care patients.
Research Highlights

- **Core of Life Victorian Evaluation**

  Tracy Smith, Debby Patrick, Jane Toohey, RN
  Meredith McIntyre B.App.Sc, M.Ed.st,RN, RM Senior Lecturer

  Core of Life is a prevention/early intervention program designed by Rosebud Hospital midwives Debby Patrick and Tracy Smith. It actively seeks to empower adolescent males and females with holistic information related to Pregnancy, birth, breastfeeding and early parenting to promote a more realistic awareness of the potential short and long term consequences of pregnancy and parenthood. Program managers have trained 530 new facilitators in five states (primarily Victoria), have presented to more than 140 secondary schools, and educated approximately 16,000 youth in many different service delivery settings.

  That will assist in development of policies for staff and some strategies for dealing with these situations. It is expected to last 6 months. Funding Body: NBV (Jan ‘04, $2,000), successful. Potter Foundation (Jan ‘04, $18,500)

**Publications**


Smith T and Patrick D. *A reality Check for Teenagers* PARTYLINE – Feb 2004 pp6-7 Newsletter of the National Rural Health Alliance.

**Presentations**


Reid G, Hoppner C. *Being the best nurse you possibly can be.* Werribee Mercy Mental Health Program, Werribee, December 2003.

Reid G. *Establishing a nurse practitioner project – issues from a community perspective.* Department of Human Services, Nurse Practitioner Project Network Meeting, Melbourne, February 2004.


Reid G. *Privacy and Confidentiality for Psychiatric Disability Rehabilitation Support Services (PDRSSI).* Peninsula Mental Health Service Providers Network Seminar, Frankston. April 2004.

Rees R. *The nurse as a member of a Palliative Care Consultancy Team, the role and its challenges. A personal perspective.* Japan Hospice Palliative Care Foundation Seminar, Tokyo, January 2004.

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- **Core of Life Victorian Evaluation (cont.)**

October 2002 saw Core of Life partner with Monash University School of Nursing to commence a rigorous Victoria wide evaluation. Funded by William Buckland Foundation, it independently evaluated students/educators/facilitators with regard to content, method of presentation, sustainability and impact.

More than 1600 youth were evaluated and the research suggests that the program’s aim to de-glomorise child birth was achieved. 150 Teachers were included in the study, many reinforcing that “it allowed for the unique experience for our students to be able to ask without embarrassment questions and concerns, clarifying misconstrued ideas about childbirth.”

Research identifies 160 new facilitators reporting well conducted training, very user friendly tools, and a strong desire to utilise the program with their local youth. Once having presented sessions many facilitators reported that they felt ‘excited’ to be able to share their knowledge. Facilitators believed that Core of Life was very well accepted and welcomed into the health curriculum at the schools they attended.
The Pharmacy service provides a comprehensive range of clinical, supply and information services to all sites within Peninsula Health. Four Pharmacy Departments are located at Frankston Hospital, Mt Eliza Centre, Golf Links Road and Rosebud Hospital. In addition, there are three satellite pharmacies at Frankston Hospital on the 4th and 5th floors and psychiatry ward.

Our Pharmacy services include: the purchase and supply of all pharmaceuticals, clinical/ward pharmacy services, outpatient and discharge prescription dispensing, methadone maintenance for inpatient, medication counselling, therapeutic drug monitoring, drug information, research, sterile and non-sterile manufacturing, clinical education services to undergraduate/postgraduate pharmacy students, post graduate nursing staff and medical staff, provides professional expertise on committees such as the Drug and Therapeutics Committee and the Research and Ethics Committee.

Director of Pharmacy Skip Lam is a member of the following advisory committees; Victorian Therapeutic Assessment Group, Victorian Hospitals Electronic Prescribing and Decision Support Group, Pharmacy Advisory Group (Health Purchasing Victoria). In 2004 we will have final year pharmacy students from Austria completing their final year research thesis’s on anticoagulants and gentamicin therapy.

**Members**

Director of Pharmacy – Skip Lam, BPharm, FSHP, Accredited Consultant Pharmacist
Frankston Hospital Pharmacy Manager – Ben Leung, BPharm, MBA
Rehabilitation, Aged and Palliative Care Services (RAPCS) Pharmacy Manager – Meropi Van Nooten, BPharm Grad Dip Epidemiology
Rosebud Hospital Pharmacy Manager - Ron Hookway, MPS, PhC
Research Interests and Future Directions

Current areas of interest are:

Medication Safety
Supply Chain Management
Continuum of Care issues
Use of information technology in health

List of Publications


Presentations


Collaborative Projects


Research Highlights

- Save lives, think pinK+: the IV potassium project.

Lam S, Director of Pharmacy, Peninsula Health, Victoria.
Kaufmann M, Faculty of Natural Science, Karl-Franzens-University Graz, Austria

In response to the intravenous potassium alert issued by the Australian Council for Safety and Quality in Health Care, Peninsula Health initiated a project to review the administration, prescribing and storage of IV potassium. The project’s logo was ‘Save lives, think pinK+’ and used an unmistakable bright pink colour theme throughout its promotional campaign.

A new potassium prescribing and administration protocol was completed with the involvement of clinicians and nurses. A key change was removing concentrated potassium ampoules from patient care areas and replacing them with 100mL premixed bags. In areas where concentrated ampoules could not be removed, they were kept in pink containers with pink warning labels. In emergency crash carts, potassium ampoules were kept in heat sealed plastic bags with pink warning labels. A publicity campaign comprising of education of key stakeholders, a series of posters, and a competition was conducted over three weeks.

The changeover was introduced in one day on December 8, 2003 over four hospital sites. In March 2004, an analysis of potassium usage comparing the months of February 2003 and 2004 was completed to monitor the compliance of the policy. It revealed the following key findings:

- Increase use of oral route rather than parenteral as suggested by protocol
- Changeover to 10mmol ampoules successful. No usage of 2g ampoules.
- Adoption of 10 mmol premixes by medical and nursing staff.

A similar analysis completed in July 2004 comparing the months of February to June 2003 to 2004 had the same results and confirmed the success of the project.
Neuropsychology

Faye Simpson

Clinical Neuropsychologist Faye Simpson began her health care career in 1966 with a general nursing certificate from St Vincent’s Hospital. The following decade Faye began her studies in psychology and in 1978 she graduated from La Trobe University with a Bachelor of Behavioural Sciences (Hons) and in 1984 she completed a Masters of Arts in Clinical Neuropsychology from the University of Melbourne. “Neuropsychologists are interested in how the brain develops, how behaviour changes when the brain is damaged, what is intelligence and how learning occurs,” she explains. Faye has since been employed as a psychologist at Bethlehem Hospital, Bethesda Rehabilitation Hospital, the Multiple Sclerosis Society in Melbourne, and the Anne Caudle Rehabilitation Centre in Bendigo. She has also set up a medico-legal private practice. Faye has been employed by Peninsula Health since 1995 and she is currently Neuropsychologist with the Peninsula Aged Care Assessment Service. Though the Neuropsychology department is small, there are significant opportunities to be involved in assessment, rehabilitation and behavioural programs and to work closely with allied health teams. Faye’s research projects include “Cognitive deficits associated with pre- and post-surgical temporal lobe epilepsy” Melbourne University (1984) and “Long term cognitive effects of Chemicals – a study of 400 Clinical Cases” (1995-96).

The Neuropsychology Service is located at the Mt.Eliza Campus and contributes to the RAPCS program (Rehabilitation, Aged and Palliative Care Service). Service input is also provided to Golf Links Road, Frankston and Rosebud Hospitals and Community Rehabilitation Centres (CRC’s).

Neuropsychology is one stream of the neurosciences and is concerned with the special relationship that exists between cognition (thinking) and behaviour.

Assessments can be with children or adults and may examine areas such as learning disorders, epilepsy, stroke, acquired brain injury, substance use or dementia. In the elderly, assessments often provide valuable insight into ‘falls’ or ‘memory decline’. Paper and pencil tests and tasks are used to assess areas of cognitive strength and weakness.

The identification of cognitive strengths and weaknesses can be useful for diagnosis by identifying different patterns of performance as a reflection of different conditions e.g. head injury, depression, dementia etc. This information can also be useful in determining the direction of rehabilitation programs, assisting with behaviour management issues or estimating Decision Making Capacity. The information also provides a useful background to discussions about ‘Quality of Life’ issues.

The department also supports a rotation of Doctorate student interns from Victoria University who spend around three to four months becoming involved with different areas of practice. Future directions include cognitive rehabilitation and research into the nature of learning when different health conditions prevail.

The Neuropsychologist department also participates in the Cognitive Dementia and Memory Service (CDAMS) for the early detection of dementia.

**Members**

Faye Simpson, BBSc(La Trobe), MA (Melb) (Neuropsychology).

**Research Highlights**

- **Cognitive Impairment by destination:** Descriptive findings and some thoughts.

Discharge planning is a team decision (Medical, OT, Physio, Speech, Nutrition, Social Work, Psychology) and one of the considerations is whether or not the person being discharged can cope with their discharge environment and or need additional resources or services. The discharge environment may include going home to family, living alone at home or in a village unit, or living in supported accommodation such as a Hostel or Nursing Home. A critical factor in coping was considered to be mental or cognitive capacity and the person’s need to adjust to their changed circumstances. A significant number of people who come into hospital are cognitively impaired and readily demonstrate a degree of physical dependency following admission. It was of interest to know if the cognitive status of people on discharge was correlated in any way with their discharge environment.

- **Participants**

119 (>75 yrs) patients were reviewed because cognitive data and follow-up discharge data was available.

- **Assessment Tools**

Level of cognitive impairment was based on a summary score derived from a number of neuropsychological screening tests related to executive, intellectual and memory functioning.

- **Results**

**COGNITIVE IMPAIRMENT BY DESTINATION**

around 60% of people go home

- No impairment
- Mild impairment
- Moderate impairment
- Severe impairment

N = 119
Occupational Therapy enables people to retain or regain function in their daily activities/occupations despite impairments, disabilities or handicaps which limit activity participation and/or pose risks to health and well being.

The Acute Occupational Therapy service provides assessment and treatment of inpatients, with a view to safe discharge planning. In addition a comprehensive outpatient service is provided for hand injuries and lymphoedema management.

The Rehabilitation, Aged and Palliative Care Occupational Therapy service provides assessment management and treatment services. This service can be provided within the hospital, community or home setting.

More than 80 Occupational Therapists are employed within the various areas of Acute, Sub-Acute, Domiciliary, Psychiatry and Community Health.

Members

Occupational Therapy Director
Mrs Kate MacRae, Dip OT (Edin), AFCHSE

Research Committee.
Mrs Kate MacRae, Dip OT (Edin), AFCHSE
Mrs Deidre Burgess, B.App Sci, MA OT, Grad Cert. Palliative Care & Allied Health, Grad Dip Pastoral Counselling
Mrs Sue Davies, B.AppSc. OT. GradDip. Counselling
Mrs Annette Leong. B.AppSc. OT. FLM Dip. Business

Research Interests and Future Directions:

Future research interests include:

- Pulmonary Rehabilitation
- Home modifications with regard to legal issues
- Occupational Therapy outcome measures
- Development of a palliative rehabilitation program.

Research Highlights

- The lived experience of occupational therapists whilst facilitating return to home for their palliative patients.

Burgess D.

Deidre Burgess’ minor thesis for her Master of Clinical Science (Occupational Therapy) at Curtin University of Technology in Perth involved interviewing 10 occupational therapists with palliative care experience as experts in their field to gather in-depth data.

From her thesis, Deidre hopes to complete a journal article on her research findings and publish in both OT & Palliative Care literature and present the findings at relevant conferences.

“At Peninsula Health I also have a consultancy role for other OTs regarding palliative patients. We are also currently liaising with Peninsula Hospice and recently commenced a six week trial of a rapid response referral service for community hospice clients to assess and prevent readmission where possible,” Deidre said.

“I assist with a patient’s discharge planning and help them to cope at home with their physical deterioration. I also work very closely with the patient’s family,” she said.

Deidre is also an active member of OT Oncology & Palliative Care Special Interest Group since its inception in 2001 and lectured at LaTrobe University to Masters students on Occupational Therapy and Palliative Care in 2003.

Deidre Burgess

Deidre Burgess’ work as an Occupational Therapist in a Palliative Care setting focuses on providing patient-centred care.

Deidre received a Bachelor of Applied Science (Occupational Therapy) from the Lincoln Institute of Health Sciences in 1985.

In 1997 after receiving several referrals for terminally ill patients, Deidre developed a keen interest in Palliative Care and wanted to know more. She completed a Post Graduate Certificate in Palliative Care at Edith Cowan University in Western Australia in 1998.

After gaining clinical palliative care experience at McCulloch House, a Palliative Care Unit at Monash Medical Centre Clayton, Deidre joined Peninsula Health in October 2002. Her current role as a Senior Occupational Therapy Clinician involves site management duties for both inpatient rehabilitation units at Golf Links Road and Rosebud Rehabilitation Unit. She also has clinical responsibility for Tattersalls Peninsula Palliative Care Unit based at Golf Links Road.

Deidre says the role of an occupational therapist differs dramatically between palliative care and acute/sub-acute settings.

“Working within a palliative care setting there is a greater need to accommodate patient-centred care. A large proportion of my role is goal and priority setting with my patients to improve their quality of life.”
Speech Pathology

Kate Horner

Speech Pathologist Kate Horner enjoys the wide variety of patient caseloads she manages within Peninsula Health’s busy Speech Pathology Department.

Kate graduated from La Trobe University in 2002 with a Bachelor of Speech Pathology and for the past two years, has worked as a Grade 1 Speech Pathologist within the Adult Acute and Rehabilitation streams of care at Peninsula Health. “I work two days per week in RAPCS at Rosebud Rehabilitation Unit and three days per week at Frankston Hospital on the acute wards,” she explained. Although at the moment Kate’s caseload is purely clinical, she hopes to become involved in research projects within the department in the near future.

Acute Speech Pathology provides assessment, diagnosis and management of disorders of communication and swallowing in adult and paediatric inpatients as well as provision of outpatient services to the City of Frankston and the Mornington Peninsula Shire. Services are also provided for children presenting with communication problems prior to school entry and adult patients requiring management of voice and fluency disorders.

In RAPCS, speech pathologists also work with people who have problems with communication or swallowing. This work is carried out in both in- and out-patient settings, and involves family and close others in the rehabilitation and management.

Members

Director of Speech Pathology - Ms Hannah Halloran BAppSc (SpPath), MSPAA

Chief Speech Pathologist (RAPCS) – Ms Louise Brown, BAppSc(SpPath), MEd, MSPAA, CPSP

Chief Speech Pathologist (Acute, Acting) - Ms Sue Everard, BSpPath, MSPAA, CPSP

Research Interests and Future Directions

- Development of ethical decision making - how speech pathologists learn about ethics
- Effectiveness of group programs for people with long term aphasia
- Use of electronic memory aids for people with functional memory impairment.

Above: Kate Horner and patient Ron Vaughan during a speech therapy session at Frankston Hospital Ward 5G.
The Social Work and Integrating Care unit incorporates more than 40 Social Workers who provide a counselling, assessment and discharge planning service to both inpatient and Ambulatory Services within Acute and Sub-Acute, across all sites.

Services include:

- **The Response Assessment and Discharge Team in the Emergency Department**
- **Residential and Complex Care**
- **Residential Outreach and Support**
- **Post Acute Care**
- **The ACCESS Service**
  - Single point of referral and information for sub-acute services including inpatient, home-based and community-based services.
- **Care Coordination**
  - Care Coordination provides the interface between Peninsula Health and the local community. The team is based in the Social Work Department and provides a single point of contact for community agencies and families and is designed to improve discharge outcomes for patients, families, carers and community agencies providing supports.

  Care Coordination provides the link between the acute hospital system, the Aged care assessment Service and the Residential and Complex Care team, (RACCT).

**Members**

Sue Goonan, Director Social Work & Integrating Care
Alicia Gray, Manager Post Acute Care
Judith Whitfort, Manager, ACCESS
Julie Grant, Senior Social Worker Care Coordination and Acute Services
Paul Colosimo, Team Leader Residential and Complex Care Team
Belinda Morhun, Team Leader RAD Team
Jenny Chapman, Team Leader Residential Outreach Team

**Research Interests and Future Directions**

Action research occurring through the implementation of the RAD, RACC and ROSS Teams has lead to admissions being prevented for patients presenting in the Emergency Department. Reduction in the numbers and LOS for patients waiting for Residential Care which has lead to Peninsula Health being above state benchmarks and prevention of presentations to ED for residents living in Residential Care Facilities.

The ACCESS Service now takes all referrals for sub-acute services, triages and ensures the best service options to meet client needs are identified, leading to a reduction in waiting times and waiting lists for community-based services.

**Presentations**

State-wide Forum on e-referral, March 2004: *Electronic Referral System for ACCESS.*


Residential Care Providers Group

**Julie Grant**

Julie Grant graduated from Victoria University in 1993 with a Bachelor of Social Work. Julie has been employed by Peninsula Health since 2000 and finds her role as Senior Social Worker/Care Coordinator extremely fulfilling. She says the size of the health service enables positive teamwork and the ability to ‘get the job done’.

“I lead a team of Social Workers who are open to innovative ideas that promote good patient care. My aim is to constantly strive to ensure patients get the right treatment at the right time in the right place,” she says.

Julie also lists ‘the promotion of good relations between Peninsula Health and Community Service agencies,’ as another fulfilling aspect of her job. Before Julie came to Peninsula Health she worked for Mornington Peninsula Shire Council for four years as the Coordinator of Aged and Disability Services (1996-2000). Other postings include the Queen Elizabeth Centre in Ballarat as a Social Worker (1995-96) and Melton Shire Council as Coordinator Aged & Disability Services (1993-95).
Narelle Watson

The frail elderly of Frankston are experiencing fewer falls thanks to research conducted by Narelle Watson.

Narelle received a Bachelor of Applied Science (Physiotherapy) from the University of Sydney in 2000. She then worked in an acute setting at Prince of Wales Hospital in Sydney and in an outpatient setting at Western Sydney Health between 2000 - 2002. Narelle joined Peninsula Health in December 2002 working at the Frankston Community Rehabilitation Centre at Golf Links Road. Her work at Frankston Community Rehabilitation Centre working with orthopaedic patients sparked her interest in musculoskeletal physiotherapy and led her to further postgraduate study. She is currently in the second year of post graduate study completing the Master of Physiotherapy (Musculoskeletal Physiotherapy) at the University of Melbourne which she is due to complete in November 2004. As part of her Masters coursework, Narelle completed a Research Project in late 2003, testing the effect of Group Strengthening Exercise on Standing Balance in the Frail Elderly. Her clinical interests are musculoskeletal physiotherapy and she is part of the Peninsula Health Physiotherapy Research Group which convenes to plan and coordinate Research into relevant projects pertaining to Evidence-Based Best Practice methodology.

Physiotherapy is involved with assisting people to regain movements and skills. This ranges from things such as helping infants learn to move, rehabilitation of athletes to return to activity, to the elderly re-learning balance skills to remain walking.

Achievement of optimal physical fitness is a common thread throughout Physiotherapy treatment programs.

A wide spectrum of assessment and treatment approaches can be used, depending on the treatment goal. Some examples are breathing and walking programs, muscle strengthening and stretching, pool-based exercise, neck and low back programs and re-learning of essential components of the walking cycle. Service is provided to both inpatients and outpatients, and is often delivered as a continuum as the client progresses through these Peninsula Health settings.

Peninsula Health Physiotherapy Service comprises more than 50 Physiotherapists and is delivered across seven campuses, broadly categorised into the Acute (Frankston and Rosebud Hospital), RAPCS (Chelsea, Golf Links Rd, Mt. Eliza and Rosebud) and Community services.

Research Highlights

Research Interests and Future Directions

- Strength Training effects on the Elderly
- Effective management of chronic Low Back Pain
- Physiotherapy management of Cardiopulmonary conditions
- Reduction of Patient Falls.

Current Projects

The Effect of Group Strengthening Exercise on Standing Balance in the Frail Elderly.

Previous Projects

Between 1999 and 2001 Physiotherapist Caroline Smith conducted Research into a Falls Risk Assessment tool. This tool is now commonly known as the FRAT and has been the basis of falls risk assessments within Peninsula Health RAPCS. It has since this time been adopted by many health services Australia-wide through the sale and distribution of an accompanying educational folder, the FRATPACK.

The FRAT provided a high inter-rater agreement (0.79) and was successful in predicting over 80% of all fallers. Caroline’s research findings have helped drive the ongoing evaluation of Peninsula Health’s Falls Prevention initiatives including the rollout and evaluation of the current Hip Protector pilot.

Members

Director of Physiotherapy - Natasha Toohey BPhysio (Hnrs), MAPA
Rambha Thoman MAPA GradDip BusMgt
Scott McGill BAppSc(Physio) MAPA
Peter Hough BAppSc (Physio) MAPA
GradDipHlthAdmin GradDipRehabStudies
Narelle Watson BSc (Hons) BApp Sc (Physio)
David McKenzie BSc BAppSc (Physio)
Fiona Kent BPhysio MAPA
Christian Osadnik BPhysio(Hons)
Michael Davis BAppSc (Physio)
Dietitians are professionals uniquely trained to advise on diet, food and nutrition. They can separate fact from fiction, healthy eating plans from unsafe diets, and translate the science of nutrition into healthy food choices. They have an in-depth scientific knowledge of food and human nutrition.

They are essential members of the health team who create strategies to enable clients to achieve their food and nutrition related goals. They assess the nutritional needs of patients, plan appropriate diets and educate patients and their families. Dietitians also consult with the Food Services Department.

All Dietitians working at Peninsula Health are Accredited Practising Dietitians.

In patients: Clinical Dietitians assess nutritional status, identify nutrition problems, develop care plans and monitor the effectiveness of dietary changes. They specialise in weight control, diabetes, heart disease, cancer, gastrointestinal disorders, artificial feeding, nutrition and mental health including eating disorders, and other special medical needs.

Outpatients and Community Rehabilitation Centres: Dietitians offer nutrition programs and healthy eating resources. They work with individuals, groups and communities in order to improve clients’ nutritional health, prevent disease, increase access to food and enhance personal control of health.

Members

Head of Unit – Marlis Gelsheimer, MSc, APD
Dietitian – Helen Stratmann, Master Nutrition (Research), APD
Dietitian – Sherryn Evans, B. Api Sci (HM/Psych, Hons) MND, APD
Dietitian – Sally Higgins, Health Promotion, APD
Dietitian – Lisa Schneider B. App. Sci (HM, Nutr.), MND, APDPD
Dietitian – Raisa Shaikh, B.Sc (Nutr. &Diet), APD
Dietitian – Kathy Wheatland, B.Sc (Human Nutrition Science) APD

Research Interests and Future Directions

Research interests include:
- Controlling weight gain associated with atypical antipsychotic medications
- Development of team based ethical decision making in patients being considered for gastrostomy
- Reducing fasting times for elective and ward surgical patients and improving outcome by giving a high carbohydrate drink standardising practices, and providing nutrition
- Screening and diagnosing malnutrition prevalence, and determining outcomes and revenue
- Specialised supplementation to improve wound healing in select patients
- Giving a high nutrient sip feed to patients as a medication to improve intake, outcome, and reduce wastage compared with standard supplementation
- Outcome based intervention
- Reducing fasting times post-operatively for colorectal patients, by feeding NJ, modifying pain control and early mobilisation. Pilot study in development and possible extension to RCT.

Current Projects

- Evans S, Higgins S. Nutritional intervention to minimise weight gain associated with the commencement of Olanzapine: A randomised controlled trial .

Olanzapine is the most commonly prescribed atypical antipsychotic medication in Australia. Research reports an averaged weight gain of between 4.5 and 7kg in the three months following its commencement. This randomised controlled trial investigated whether it was possible to minimise this weight gain by providing nutrition education in the three months following the commencement of this medication.


A strong association exists between malnutrition and increased morbidity and...
Nutrition and Dietetics (Acute and RAPCS)

Research Highlights

- The efficacy of alleviating nausea in elderly > 65yrs in Rehabilitation and Aged Care Units using “a drink containing 8% carbohydrate”

Shaikh, R Gelsheimer M, Wheatland K , Kumar S.

The study was designed to determine if a drink containing eight per cent carbohydrate was effective in relieving the symptoms of nausea prior to eating in elderly (>65 years) residents of Rehabilitation and Aged.

- Retrospective comparison study of two patients with Grade 4 pressure ulcers & to monitor the rate of wound healing utilizing specialized nutritional supplementation and the associated cost saving to the Hospital

Shaikh R, Wheatland K, Butler F.

Comparison of two retrospective case studies with Stage 4 pressure ulcers developed within the hospital the different types of specialised nutritional support that might have contributed to rate of wound healing and the cost associated with each patient, including the Length of Stay (LOS) in hospital.

- Development of an information booklet for families when faced with the decision of PEG placement or palliative care.

Schneider L, Eyers M, Sargent M, Rees R, Horner K, Nethercott C, Meade D.

The booklet was designed to assist family’s in making an informed, non-biased decision, based on ethical and quality of life issues, taking into account patients previously expressed wishes. The booklet is currently being trialed throughout Peninsula Health.

- Schneider L, Torey E, Webb A. Reduction of post-operative fasting times for patients undergoing lower gastrointestinal surgery.

A review of current literature was conducted and a presentation delivered to surgeons regarding current research in early post-operative feeding. A decision was made to proceed with a small pilot study, and possibly extend out to a randomised control trial in the near future.

Publications


Presentations


Description of Financial Support and Research Grants

Nutritional intervention to prevent weight gain in patients commenced on Olanzapine - funded by an investigator initiated research grant from Eli Lilly Australia Pty Ltd.
Research Proposals that were considered by the Research and Ethics Committee in the 12 months to 30 June 2004:

- A Multicenter, Randomised, Double-blind, Placebo-controlled Study of Darbepoetin Alfa for the Treatment of Anemia of Cancer. Principal Researcher: Dr Vinod Ganju

- A Randomised, Double-blind, Placebo-controlled Study of darbepoetin alfa for the Treatment of Anemia in Subjects with Non-myeloid Malignancy Receiving Multicycle Chemotherapy. Principal Researcher: Dr Vinod Ganju

- OASIS 5 International randomised double blind study evaluating the efficacy and safety of Fondaparinux versus Enoxaparin in the acute treatment of unstable angina / non ST segment elevation Ml acute coronary syndrome. Principal Researcher: Dr Greg Szto

- Phase III Multicentre randomised double blind parallel arm 52 weeks dose comparison study of the efficacy and safety of 25 mg qd and 50 mg qd of OPC-6535 oral tablets and 800 mg BID of Asacol in the maintenance of remission in subjects with Ulcerative Colitis. Principal Researcher: Dr Michael Merrett

- Validation of the Beliefs & Behaviour Questionnaire. Principal Researcher: Johnson George

- The Children’s Healthy Development Project an examination of attachment, resilience and adjustment in children. Principal Researcher: Verena Ross La Trobe University Doctoral Project

- Patient decision making in Pre-hospital Health Emergency – Questionnaires and Interviews. Principal Researcher: Ms Amee Cooper (Monash University)


- A Multicenter, Double-blind, Placebo-controlled Roll-over Study to Protocol 20010103 of Darbepoetin Alfa for the Treatment of Anaemia of Cancer. Principal Researcher: Dr Vinod Ganju

- Morning versus evening administration of 500mcg roflumilast once daily for 6 weeks in patients with asthma. Principal Researcher: Dr Martin Coffey

- Survey of Home Oxygen Recipients on the Mornington Peninsula. Principal Researcher: Associate Professor David Langton
- A randomised, double-blind, placebo-controlled, phase III study of oxaliplatin/5-fluorouracil/leucovorin with PTK787/ZK 222584 or placebo in patients with previously treated metastatic adenocarcinoma of the colon or rectum. Principal Researcher: Dr Vinod Ganju

- Phase II trial of oral vinorelbine in combination with capecitabine as first line therapy in women with previously untreated HER2 negative metastatic breast cancer. Principal Researcher: Dr Vinod Ganju

- A Randomised, Double-Blind, Phase III Study to Evaluate the Efficacy and Safety of Bevacizumab in Combination with Interferon alfa-2a (Roferon) versus Interferon alfa-2a and Placebo as First Line Treatment Administered to Nephrectomised Patient with Metastatic Clear Cell Renal Cell Carcinoma. Principal Researcher: Dr V Ganju

- Phase II trial of oral vinorelbine in combination with capecitabine, and trastuzumab as first line therapy in women with previously untreated HER2 positive metastatic breast cancer. Protocol number: PM0259 CA 215 BO. Principal Researcher: Dr Vinod Ganju

- The incidents of diabetes related lower limb amputation in Melbourne The Melbourne Lower Limb Amputation Study. Principal Researcher: Dr Jonathon Shaw (and Robyn Tapp)

- The relationship between the length of oxygen mask tusks, inspired oxygen concentration, and the patient’s partial pressure of oxygen. A pilot study. Principal researcher: Dr Darren LeBrocque

- Investigation of serious injury among adult non-elite Australian Rules football players. Principal Researcher: Ms Erin Cassell

- Measuring the impact of low back pain on everyday activities. Principal Researcher: Dr Megan Davidson (La Trobe)

- Multi centre randomised double blind study to evaluate the safety efficacy of MK-0431 mono therapy inpatients with type 2 Diabetes Mellitus who have inadequate glycaemic control (MK431 Protocol 021-00) . Principal Researcher: Dr Christopher Gilfillan

- Impact of a hospital based intervention on the outcome following minimal-trauma fracture. Principal Researcher: Dr Christopher Gilfillan

- Suppression of Ovarian Function Trial (SOFT): A Phase III Trial Evaluating the Role of Ovarian Function Suppression and the Role of Exemestane as Adjuvant Therapies for Premenopausal Women with Endocrine Responsive Breast Cancer (Phase III). Principal researcher: Dr Vinod Ganju

- A randomised Phase II study evaluating a weekly schedule of docetaxel with cisplatin and 5-FU (wTCF) or with Capecitabine (wTX) in advanced oesophago-gastric cancer. Principal Researcher: Dr Vinod Ganju

- Does adjuvant Zoledronic acid reduce recurrence in patients with high risk, localised breast cancer? (AZURE) (Phase III). Principal Researcher: Dr Jaqui Thomson

- The viability of foster care as the predominant form of out of home care. Principal Researcher: Ms Pam Sleeph (Monash)

- The Rapid Infusion of Cold Hartmann’s for hyperthermia after out of hospital cardiac arrest: A pilot pre Hospital study. (The RICH Trial). Principal Researcher: Dr Stephen Bernard

- Quantitive psychophysical models for somatosensory discrimination following stroke: Theoretical and Applied Implications (short title Somatonsensory Loss Following Stroke). Principal Researcher: Professor Thomas Matyas

- Prospective audit of parastomal hernia. Principal Research: Dr Charles Pilgrim

- How many women who give birth at Frankston Hospital breastfeed for six months? Principal Researcher: Ms Carole Gilmour.
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Frankston Integrated Health Centre
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Frankston Vic 3199
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Community Health Service
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1497 Pt. Nepean Road
Rosebud Vic 3939

Jean Turner Community Nursing Home
Tel: (03) 5986 2222
Fax: (03) 5982 2762

Lotus Lodge Hostel
Tel: (03) 5986 1011
Fax: (03) 5982 2762

Rosewood House
Tel: (03) 5982 0147
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Michael Court Residential Aged Care Unit
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Mount Eliza Vic 3930
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Rosebud Vic 3939

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