Digital dentistry, automated laboratory work, e-learning, original research, avant-garde clinic facilities - these are all in the sights of the new Head of the School of Dentistry, who took up the role in February.

Professor Camile Farah was appointed Head of School and Director of the Oral Health Centre of WA (OHCWA) after an extended international search, joining the Faculty from the University of Queensland where he was Deputy Head of the School of Dentistry and Director of Clinics. He is also the inaugural Professor of Oral Oncology and heads the Australian Centre for Oral Oncology Research & Education, a group he set up and is expanding.

A melting pot of brainpower, clinical services, resources, facilities and human energy directed ultimately at cutting-edge care for patients.

The new collaboration, known as the WA Health Translation Network (HTN), aims for swifter application of innovative research findings to more “precision or personalised” medicine, with better patient outcomes. At present it takes 17 years to turn 14% of original research to the benefit of patient care.

“There’s quite a bit of work to be done but there is significant potential,” he says of his new role. He sees the quality of the Doctor of Dental Medicine (DMD) students - who now come in as graduates - as one of the untapped resources. “The students bring a different experience to the school with their prior degrees, their learning, and their approach to university life.”

He plans to have good communication with the student body and tap into it for feedback on, for example, the curriculum. “I think they should enjoy the program more.”

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A fast-flowing pipeline from bench top to bedside

What do you get when you mix together five universities, six hospitals and five medical research institutes in WA?

Fresh change of tack for dentistry

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Previous editions of MeDeFacts can be viewed online at www.meddent.uwa.edu.au
Go to “News and events”. 

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The pick of this year’s teachers were celebrated at the recent 2015 Excellence in Teaching Awards ceremony.

**Professor Sandra Carr**, Associate Dean of Teaching and Learning, said the awards aimed to recognise and reward the efforts of the teaching staff to improve the quality of student learning within the Faculty. The nominations were an acknowledgement of the time and energy the recipients invested in fostering teaching excellence within the Faculty.

The Education Centre was buoyed by the number of staff who chose to accept their nominations this year and who, in so doing, committed themselves to a fairly rigorous selection process during what was a busy time of year of converging deadlines and heavy workloads, she said.

Keynote speaker, **Professor Jane Heyworth**, shared her experiences and insights at the ceremony with her presentation on "Inspiring students in Public Health."

The winners and nominees, who received their awards from **Professor Tony Celenza**, Director of the Education Centre, were:

**I. Small Group Teaching in a clinical/practicum setting (UWA staff)**
- Winner: Assistant Professor Helen Dugmore, School of Population Health (SPH)
- Nominees: Dr Gerard Chew, School of Medicine and Pharmacology (SMP)
  Dr Seng Khee Gan, SMP
  Professor Sean Hood, School of Psychiatry and Clinical Neurosciences (SPCN)
  Dr Donald Howarth, Rural Clinical School (RCS), Esperance – School of Primary, Aboriginal and Rural Health Care (SPARHC)
  Dr Emma Lalor, RCS, Kalgoorlie – SPARHC
  Dr Brendan McQuillan, SMP
  Dr Susannah Warwick, RCS, Derby – SPARHC

**II. Small Group Teaching in a clinical/practicum setting (non-UWA staff)**
- Winner: Dr Hooi Ee, Sir Charles Gairdner Hospital (SCGH)
- Commendation: Clinical Professor Murugasu Segasothy, Royal Perth Hospital (RPH)
- Nominees: Dr Richard Arenson, RPH and Bentley Hospital
  Dr Emma Lalor, RCS, Kalgoorlie – SPARHC
  Dr Brendan McQuillan, SMP
  Dr Susannah Warwick, RCS, Derby – SPARHC

**III. Small Group Teaching on campus**
- Winner: Dr Lucy Gikkes, SPARHC
- Nominees: Dr Carolyn Johnson, SPH
  Assistant Professor Zaza Lyons, SPCN
  Dr Lucy Rosman, SPARHC
  Francis Yap - 6th year MBBS Student, Clinical Tutor - School of Anatomy, Physiology and Human Biology

**IV. Early Career**
- Winner: Dr Robert White, School of Anatomy, Physiology and Human Biology
- Nominee: Dr Michael O’Halloran, School of Dentistry

**V. Postgraduate Coursework Teaching**
- Winner: Winthrop Professor Paul Abbott, School of Dentistry
- Nominee: Associate Professor Manfred Belforz, School of Pathology and Laboratory Medicine (PALM)

**VI. Research Supervision**
- Winner: Professor Jane Heyworth, SPH
- Nominees: Professor Sarah Dunlop, School of Anatomy, Physiology and Human Biology
  Dr Karen Martin, SPH
  Dr Vance Matthews, SMP
  Professor Linda Slack-Smith, School of Dentistry

**VII. Team Teaching**
- Winners: Associate Professor Helen Wright and Associate Professor Pam Nicol, School of Paediatrics and Child Health (SPACH) and RCS - SPARHC
  Commendation: Dr Gabrielle Brand and Dr Sue Miller, Education Centre
- Nominees: Melissa Andrade, Gail Dixon, Jacob Kenny and Marina Silich-Carrara, PALM
  Associate Professor Rosemary Saunders, Associate Professor Helen Metcalfe, Associate Professor Helen Dugmore and Leisa Smith, SPH

**VIII. Professional Staff award**
- Winner: Gail Dixon, PALM

**IX. Individual Teaching (UWA staff)**
- Winner: Associate Professor Allison Imrie, PALM
- Nominees: Winthrop Professor Paul Abbott, School of Dentistry
  Dr Gerard Chew, SMP
  Professor Graeme Hankey, SMP
  Associate Professor Lena Lejmanoski, School of Dentistry
  Associate Professor Christopher Peacock, PALM

**X. Individual Teaching (non-UWA staff)**
- Winner: Sue Darby, SCGH

**XI. Programs that Enhance Student Learning**
- Winner: Dr Michael O’Halloran, School of Dentistry
- Nominee: Geraldine Pieterse, RCS, Kalgoorlie - SPARHC

**XII. Outstanding Contribution to Student Learning**
- Winner: Associate Professor Kellie Bennett, SPCN
- Commendations:
  Dr Gerard Chew, SMP
  Ms Alexandra Tregonning, School of Women’s and Infants’ Health
- Nominees: Dr Rebekah Adams, RCS, Broome – SPARHC
  Clinical Professor Lesley Cala, PALM
  Dr Christopher Etherton-Beer, SMP
  Dr Melissa Russell, Fremantle Hospital and Health Service
Guest editorial

By Professor John Challis,
UWA Pro-Vice Chancellor (Health and Medical Research)

Partnerships and collaboration

Health research is increasingly a collaborative venture. This edition of MeDeFacts highlights two examples, the Science on the Swan conference and the Advanced Health and Research Translation Centre submission (now called the WA Health Translation Network) where research and health care in Western Australia will benefit from partnership and collaboration. Going forward, we must find more ways of sharing ideas, improving efficiencies and working together, if we are to maximise opportunities for new sources of research funding to advance the boundaries of new knowledge.

Today, research papers rarely reflect the output of a single investigator; normally they reflect the collective expertise of colleagues with different competencies, interests and skills working as a team. Some key papers may have hundreds of authors. Added to the mix is recognition of the critical role that end users, consumers and the broader community play in developing and shaping research questions and then facilitating translation of outcomes into informed clinical practice, policy, behavioural change or commercial innovation.

Edgy research

It is, in part, for these reasons that UWA is working hard at improving internal peer review of grant submissions being prepared for external funding agencies; we are trying to enhance the quality of research proposals, while concurrently building collegiality and new collaborations across the academe. We are seeking ways to fertilise co-operation between disciplines; medicine with engineering and science, with law and, as the successful “Faces of WA” workshop (sponsored by the Institute of Advanced Studies) demonstrated earlier this year, linking colleagues in computer science with those in medicine and the arts. We lag behind many other institutions in building trans- and interdisciplinary teams into networks, while breaking down the artificial silos that have been our past. Such teams will conduct research that is “edgy” and at the interface between disciplines. The WA Health Translation Network links colleagues across WA’s five universities, research institutes, health authorities and hospitals to build the translational pipelines from basic science discovery, through to clinical trials and into informed best practice. It will allow us to develop and share expensive resources and expertise in areas such as medical imaging and the application of ‘omics platforms across the State. As WA’s Chief Scientist, Peter Klinken is fond of saying, it will foster an approach that is Team WA.

Cutting red tape

Of course, collaboration between institutions in WA is not new. UWA investigators already work closely with colleagues at Curtin University and other Universities and hospitals. We can and must build on these relationships further. Through use of linked data bases, established cohorts like Busselton and Raine and new shared technologies, we have already built effective partnerships that are nationally recognised. But we can do so much more. Our State government has shown that it is prepared to help, clearly reflected in the Premier’s statement on Science priorities. If we could harmonise approaches such as our core governance, common or reciprocal ethics review, shared teaching and training opportunities, through joint Faculty appointments that are cross institutional, combined seminars and rounds, we could cut through the red tape that hampers research and frustrates researchers. There are new partnerships to be made, nationally, internationally and “within the Zone” to our north. Activities like Science on the Swan help build understanding, and raise the profile of our WA research to new national and international partners. This should help increase research funding and lead to higher impact publications. Ultimately this new environment should lead to advances in health research that translate into better health for all Western Australians. And that is why partnerships are important. That is what collaboration is all about.
Fresh change of tack for dentistry

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“We need to bring the facilities and the curriculum into the 21st century.

“All of our students are digital natives and we’re still, I think, a little bit behind in the context of how we engage digital technology and e-learning in the curriculum as a whole and how we then translate that into the clinical experience. With dentistry being very technology-based, there is always a new innovation, new procedures and equipment that can enhance what we do.”

The professor’s goal is to set the School up as a centre of excellence for digital learning and digital dentistry. He will expand the use of Simodont virtual reality dental training machines, successfully begun several years ago. He also intends to introduce digital radiology and digital laboratories, in which crowns and bridges can be fabricated via automated milling stations. “By automating much of the labour-intensive, repetitive procedures that the students do manually, it will be possible to re-purpose some of their time.”

His plans are well underway with discussions with central IT services, external partners and the dental industry as to how to embed the new technologies in the curriculum.

Existing staff will be retrained and upskilled and new staff will be recruited. “I want not just the rest of UWA but the rest of Australian and New Zealand Dental Schools and our dental profession and the dental industry to see the UWA Dental School as a centre where these technologies and curriculum design have been implemented in a way that is producing high-quality graduates and improved outcomes for patients in WA, such that their oral health and dental health benefits,” he says.

Another target is achieving cost efficiencies across the School and OHCWA and re-investing the savings in areas such as research. “One of the absolute priorities for me is to ensure the School’s research profile is increased,” Professor Farah says. “Being a clinical school, we are very keen to make sure that whatever research we are undertaking can be translated into the clinical environment and can ultimately help our patients in the community.” Staff and students will be coached in research methodologies, publication, and the processes of preparing, submitting and administering grants.

Research requires time and Professor Farah says this will become available by doing away with some time-wasters. “The organisational structure and the committee structure consume an enormous amount of time,” he says. He will cut back on some of the committees, refine their structure, reduce the number and length of meetings and ensure they have useful outcomes.

-By Cathy Saunders

Research

Professor Farah has already identified important research that has been carried out in the School that he feels has not received due recognition or dissemination in the community.

“The research that occurs in orthodontics, for example, is at the cutting edge, whether it is in 3D imaging, facial recognition or cell biology and I think that needs to be highlighted a bit more,” he says. Other successful research areas include oral epidemiology and the oral care of children, Indigenous and mental health patients.

Another area of research in which he will encourage more collaboration and growth is prostho dentrics and restorative dentistry. One staff member is working with engineering colleagues on new restorative materials. “There is significant capacity with this line of research,” Professor Farah says.

His own area of research and clinical practice is oral cancer and pre-cancerous pathology, including new imaging techniques that enable detection of pre-cancerous and cancerous lesions at an earlier stage and identification of surgical margins for these cancers when they are removed. “We have demonstrated for the first time that using this new narrow band imaging technology allows us to remove tissue into normal surgical margins without leaving any diseased tissue behind,” he explains. “That is a revolution in the context of how we go about surgically excising these tumours.” He has already set up a collaboration with ENT surgeons at Sir Charles Gardner Hospital to use this technology and is applying for grants to further his research.

Another key area of his research is molecular genomics, using molecular profiling of head and neck tumours - from scrapings, biopsy or saliva - to identify potential diagnostic and prognostic biomarkers. “We are basically trying to diagnose lesions at a very early stage by using molecular profiling compared to the traditional way of histopathology,” he says. He is establishing a wider head and neck cancer research consortium across the UWA campus.

Professor Farah obtained his undergraduate dental degree from UWA. He has a PhD in Oral Pathology and Immunology and specialised in Oral Medicine and Oral Pathology at the University of Queensland. His sub-speciality is Oral Oncology.

Professor Camile Farah

- By Cathy Saunders

www.meddent.uwa.edu.au
Homeless people and refugees, some of whom had insurmountable dental pain for months, have received free treatment, thanks to the generosity of dozens of dental professionals, students and other volunteers.

The volunteer dental care project was organised by Tzu Chi Foundation - Tzu Chi International Medical Association (TIMA). Tzu Chi means compassion relief and TIMA's mission is to provide voluntary quality health care, education and services to the disadvantaged population. The event was held at the Oral Health Centre of WA (OHCWA), which provided the venue, facilities and equipment. Tzu Chi provided consumable supplies.

More than 100 dentists, dental nurses, students, therapist and Tzu Chi volunteers rallied to provide dental treatment to 55 people from 8.30am to 5pm on Sunday, April 26. There were 18 dentists (including four OHCWA staff) and six tutors, 21 dental nurses (including four OHCWA staff) and 16 UWA dental students, one oral health therapist, three medical professionals and 68 non-dental volunteers who gave their time from 7am until 6.30pm. Many of the dentists were UWA alumni and some came from interstate.

The two key organisers from TIMA were Dr Lydia See and Dr Michelle Huang, who are both also OHCWA staff general dentist and prosthodontist respectively. They are also casual tutors to the dental students in the Faculty.

The event was deemed very successful. The dental problems ranged from decaying and broken teeth to infections, abscesses, periodontal disease and resulting long-standing severe toothache. A lot of the treatment involved fillings and other tooth repair, pain management, extractions and scale and clean.

One thank-you from a patient said, in part, “I have been in severe pain for seven months. Yesterday’s free dental treatment was such a relief.”

During the day, more than dental treatment was provided. “We look for a holistic approach to care,” Dr See said. “We had a doctor and a nurse onsite as well to talk about general health.” In the waiting room, volunteers entertained patients by teaching them sign language through song and showcasing ways to recycle and a dentist provided oral health education using quizzes and power points.

The dental students provided chairside assistance and taught the patients about oral hygiene. Dr See said the event gave dental students a different slant on dentistry. “It is all about the person they are helping, it’s all about the refugees and the homeless. They get to see the humanistic side of dentistry and that it’s not all about technique, there is a person behind it.” The students also saw that dentistry is not just about the individual dentist, it involves teamwork, and the ability to start thinking on their feet as well, she said.

TIMA dental fairs are held every year in Queensland, New South Wales and Victoria. Although two have been held previously at a small private practice in Perth, this year was the first time the project was run on a larger scale. It is hoped to hold the fair regularly at OHCWA in Perth from now on.
The Hidden/Informal Curriculum – why mentoring matters

The terms “hidden” and “informal” curricula were first developed in the mid 1990’s. They describe the interpersonal processes, organisational structures and culture that influence students’ learning and socialisation to professional behaviours and attitudes. These influences occur outside the formally stated endorsed syllabus. If we use the analogy of an iceberg, the hidden curriculum is below the surface, not easily visualised or measured, but acting as a major force in the learning environment. Examples of some of these processes and structures are interactions with patients, health professionals and teachers; norms and implicit rules learnt to survive in the system; and immersion in the clinical culture. Students may be exposed to both positive and negative experiences in their encounters with the hidden/informal curriculum. Day-to-day examples of these experiences may include watching a skilled clinician work with a distressed patient or being a member of a well-functioning multidisciplinary team. Conversely the student may witness a staff member behave in a discriminatory fashion to a patient, or be made to feel unwelcome in a clinical placement.

The hidden/informal curriculum informs us that there is a major distinction between what medical students are taught and what they learn. Health professional teachers and mentors need to be aware of the hidden/informal curricula as research demonstrates that it is these experiences which have most impact on students’ professional development and sense of learning how to be a doctor. The hidden/informal curriculum cannot be eliminated but it may be shaped to maximise its positive role and reinforce the desired goals of the formal curriculum.

In UWA, the School of Women’s and Infants’ Health has performed research to evaluate the effects of the hidden/informal curriculum in students undertaking their obstetrics and gynaecology rotations. Reassuringly the most common student experiences of the hidden/informal curriculum were positive (figure 1). More than 90% of student respondents had “often” or “always” witnessed or experienced:

- high professional standards in their learning environments
- positive patient-doctor consultations
- health professionals who they considered were positive role models
- clinicians who inspired them to develop their doctor-patient skills
- health professionals dealing with complex cases in a positive manner

However students did report negative experiences. Although these were reported in much smaller numbers, more than 5% of respondents had “often” or “always” experienced or observed:

- hearing judgemental remarks about a patient in the clinical workplace
- needing to compete with other medical students
- feeling disadvantaged because of their gender

In a hidden/informal curriculum utopia there would be no negative experiences or observations made by medical students. However students work in the real world of clinical medicine - health professionals can suffer from “burn out”, there is competition for clinical experience and female patients tend to prefer female students. Mentors have an important role in helping students navigate these challenging experiences so that students can appreciate the positive aspects and avoid turning to the dark side of the hidden/informal curriculum.

If you are a qualified medical doctor and are interested in assisting with the professional development of tomorrow’s doctors, the Faculty of Medicine, Dentistry and Health Sciences is always looking for new clinical mentors.

Please contact Ms Deborah Chapman, PPD Administrative Officer, for more information. Email: ppdmed-fmdhs@uwa.edu.au or phone 64885075. Internet: www.meddent.uwa.edu.au/students/prof-degree/mentoring/clinical-mentoring
What medical students did on their third day of Medical School

Busy doctors in hospitals around the metropolitan area had 240 shadows in February this year.
They were first year Faculty medical students who, on only their third or fourth days of medical school, were already experiencing part of what it means to be a doctor.
As part of the new Doctor of Medicine (MD) graduate curriculum which was introduced last year, they undertook an introductory clinical placement in which they shadowed a practising clinician for two to four hours.
Some went to emergency departments, others to mental health care units, medical or surgical wards, or pain clinics. The hospitals that participated included Royal Perth, Sir Charles Gairdner, Fremantle, King Edward Memorial, Princess Margaret, Joondalup, Rockingham and Graylands.

Professor Tony Celenza, Director of the Education Centre, said the point was to get an early experience of an authentic clinical environment and to look at doctor-patient rapport and how the communication occurred. “Also we try to get them to look at the teamwork that occurs in that environment,” he said. This includes the relationship between the doctors, nurses, allied health staff and orderlies.
Professor Celenza, who is also Head of Emergency Medicine and Deputy Head of the School of Primary, Aboriginal and Rural Health Care, said the students were prepared before they went on the placement. “We teach them about teamwork skills and appropriate behaviour in the clinical environment and the ethical aspects like confidentiality and consent."

Professionalism is strongly emphasised.
“That early professionalisation is something which previous students really didn’t have,” Professor Celenza said. “They were really uni students for a while before they became true medical students or clinical students whereas these students, I think, get the feeling that they are part of the profession from the first week. It enthuses them and it also enthuses us to teach them."
The early clinical placement also makes the relevance of the science teaching in the curriculum more apparent to the students. “There is some evidence about that - if they see it is relevant, they are more likely to learn it and remember it,” Professor Celenza said. “So they know that if they have to examine someone’s chest, they need to know the anatomy of the chest and how the heart is pumping."

The students also receive early practice in communication skills, with some taking patient histories that prove valuable for a later assignment on patients’ perspective of healthcare and their experiences in the health care system. “Patient perspective is understanding the effect the patient has on their illness and the effect the illness has on the patient,” Professor Celenza said.
The afternoon of each placement was devoted to debriefing the students, which revealed a diversity of experiences. One student was in a trauma unit where invasive procedures were necessary, one witnessed a medical emergency in a ward, one was present when a mental health patient tried to self-harm, some were in a children’s terminal ward, and some students fainted.
The feedback was largely positive. “A lot of comments were, ‘I think I’m in the right place’,” Professor Celenza said. “It is great to know that in the first week of your medical course rather than find out two years later that you actually don’t like doing medicine. Most felt privileged to be there and a valued and important part of the profession.”
The students also undertook a follow-up clinical visit in a different hospital a couple of months later.

BY CATHY SAUNDERS

Feedback

Second year MD student Heidi Tudehope casts her mind back to last year when she completed an introductory clinical placement at Fremantle Hospital.

I had a great experience during my first placement, which was with Professor Gunesh Rajan, an otolaryngology/head and neck surgeon at Fremantle Hospital. Professor Rajan also, I understand, has a teaching position with UWA and was well briefed with our position in the course. He gave us some general advice and information about the sort of life and career paths available and about opportunities within medicine such as teaching and research. Professor Rajan then placed myself and another student with his registrar and we had the privilege of watching him conduct a clinic. I learned so much from watching him work - from the start of each consult he was inclusive, introducing us "fly on the wall" brand-new students to the patients he brought in as "my colleagues" and gaining their consent for our presence. Patients then took breaks in between discussion and examination to tell us more about their condition, proudly showing off recent surgical scars or advancements in their hearing and balance issues.
I also learned much from witnessing how the registrar obtained accurate and honest information from patients about their treatment regime compliance without judgment, and with copious amounts of kindness, conveyed in simple words, looks and gestures. It was a great introduction to the world of medicine and to how doctors interact with patients and provided background context to our subsequent patient history-taking classes.

HEIDI TUDEOPE

BY CATHY SAUNDERS
A fast-flowing pipeline from bench top to bedside

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The HTN will foster strong collaborations, cutting edge research, training of students and researchers, and integration of resources and clinical services to achieve financial savings.

The contributing partners are The University of WA, Murdoch, Curtin, Edith Cowan and Notre Dame Universities, Sir Charles Gairdner, Princess Margaret, King Edward Memorial, Royal Perth, Fremantle and Fiona Stanley Hospitals, Telethon Kids Institute, Harry Perkins Medical Research Institute, Lions Eye Institute, Institute for Respiratory Health, and the WA Neuroscience Research Institute.

Professor John Challis, UWA’s Pro Vice-Chancellor (Health and Medical Research) and one of the key drivers of establishing the HTN, said it would bring together all the groups and link them more effectively with community and consumer groups. “It effectively would create a pipeline from discovery through clinical studies through to translation into better practice,” he said.

The seven streams of excellence selected for particular emphasis are cardio-metabolic medicine, respiratory medicine, ophthalmology, cancer, obstetrics and child health, ageing and degenerative disease which also includes neuroscience and stem cell research, and rural, remote and Indigenous health.

“We also recognise that there are a number of cross-cutting initiatives that run across the streams of excellence,” Professor Challis said. They include the two major clusters of hospitals and medical research institutes, world class clinical trials facilities, state-of-the-art imaging and computing facilities, unique study cohorts such as the long-standing Busselton Health Studies and the Raine Cohort, and the highly successful WA Linked Database that is used for key research.

The HTN is already working on three cross-institutional projects. The first is on developing a formal program for health researchers on the mechanics of doing research, the ethics and process of conducting clinical trials, translating outcomes of research and working with the public sector. The second project is on broadening a successful UWA consumer and community program into a consumer/community network, and the third is on upgrading medical imaging facilities and resources specifically for use in health research.

“There will be recruitment to new positions to really strengthen the cadre of people and build the critical mass of those involved in the health research enterprise in WA,” Professor Challis said.

He sees the HTN as a model for enhancing the research exposure and experiences for medical, dental, nursing and allied health science students and facilitating training opportunities for graduate students. The HTN will also look to increase the commercialisation aspect of research findings.

Cross-discipline collaborative research will be fostered with engineering, imaging and mathematics departments across the hospitals and universities. For example, biomaterial, bioengineering and imaging technologies are being integrated to aid translational research in areas such as 3D printing and nanotechnology.

There will also be an ongoing focus on expanding relationships with Asia and strong connections in discovery and translation with universities and institutes in China, Japan and Indonesia.

Another major plank of collaboration is the new annual international scientific meeting badged Science on the Swan (see story on opposite page).

The HTN evolved from a submission by the joint parties to the National Health and Medical Research Council (NHMRC) last year for recognition as an Advanced Health and Research Translation Centre. Although it was not one of the initial four centres chosen, it was among a further three acknowledged by the NHMRC as “moving quickly towards becoming” such a centre.

The WA government has provided funds for a small executive group to oversee the development of the HTN, a central office over two years, and one of the initial projects. An executive board has been appointed, headed by former WA governor Mr Malcolm McCusker. A central administrative hub is based at the Harry Perkins Institute located on the Sir Charles Gairdner Hospital campus.

-By Cathy Saunders
The inaugural international conference dubbed Science on the Swan was so successful that not only has it been penned in for next year but the topic has been chosen.

This year’s co-chair Professor John Challis, UWA’s Pro Vice-Chancellor (Health and Medical Research) said the aim of the conference, held in April with the theme “Hot Topics in Life Course and Development”, was to raise the profile of health research in WA. The hot topics included the influence of maternal nutrition before and during pregnancy on a child’s development of conditions including obesity, type II diabetes, autism and attention deficit disorder.

“The feedback we got from people was that actually they liked the breadth of topics we had so (the theme of) 2016 is “At the Cutting Edge of Health and Medical Research”, Professor Challis said.

While the bulk of the lectures will continue to be geared towards specialists and trainees, it is hoped that some will be focused on a wider, public audience next year.

Professor Challis said this year’s conference, held at the Perth Convention and Exhibition Centre, reflected yet another strong partnership between WA’s five universities, the Harry Perkins Institute, Telethon Kids Institute and the WA government through the Health Department and Premier’s Office of Science.

“There were 333 registrants and 99 posters so the number three figured generously in every computation,” he said, adding with a chuckle he hoped three was a lucky number.

Some of the key leaders in health research were brought to the conference from interstate and overseas. “It was a great opportunity for those people to meet some of our young graduate students, to see through the poster sessions the type of research they were doing,” Professor Challis said.

“Scientifically the conference was very successful and I think we managed to achieve pretty well all of our key objectives. These were to enhance the profile of the health research enterprise in Western Australia, to build partnerships not only within WA across the universities and research institutes but also to begin build networks and partnerships with folk from eastern Australia and colleagues from North America and Europe.”

Professor Challis’s co-chair this year was Curtin University’s Pro Vice-Chancellor (Health Sciences) Professor Michael Berndt. Next year’s co-chairs will be Professor Peter Leedman, Director of the Harry Perkins Institute of Medical Research, and Professor Margaret Jones, Director of the Office of Research and Innovation at Edith Cowan University.
The Faculty stood out in the recent round of University of WA Alumni Annual Fund grants and secured more than half of all available funding with two projects.

The fund is an initiative where graduates across all Faculties make annual gifts to Areas of Greatest Need to “support innovative projects and activities that enhance the student experience and provide direct support to students and activities”.

Faculties, student groups and clubs, and other areas of the University are invited to apply for financial support of up to $30,000.

Ms Louisa Webb, Manager of the Annual Fund, said telephone appeals were the most successful way to build a relationship with alumni and to elicit gifts and one 7-8-week appeal was held each semester.

The UWA students who make the phone calls are matched to alumni in terms of the chosen degree. “We’ve got one student who is doing fifth year medicine and she is having some fantastic conversations with doctors,” Ms Webb said.

Some students are even offered work experience places as a result of their chats with alumni. “One student who has been with us for three years, working with us for six phone appeals, loves it and he has made some connections in Singapore,” Ms Webb said.

During an appeal, 12 students are rostered for each shift, scheduled in the evening from Monday to Thursday and on Saturday morning. The average length of a call is 5-10 minutes and the students are paid for their work. About 22,000 alumni of the 107,000 on the data base are contacted each semester.

The Annual Fund also supports alumni scholarships and the Fairway program, which is an alternative pathway to UWA for eligible Year 12 students who face financial hardship. More than 10,200 UWA alumni and supporters give to the Annual Fund and donations have exceeded $5.3 million since it was established in 2001.

The two Faculty projects that will be supported this round with a total of $50,525 are:

**Using Pathology to Promote Health**

*From the School of Pathology and Laboratory Medicine. Granted $30,000.*

In this project, we will utilise the Pathology Education and Learning Centre (housing the Pathology Museum) to promote health. We will achieve this by developing educational and interactive modules illustrating how tobacco, excessive alcohol and obesity cause disease. With the richest collection of irreplaceable pathology specimens in the State and proven e-learning technologies, we will engage school students, tertiary students, medical practitioners and the broader community. It will encourage behaviour change and deliver health education messages resulting in a better informed and healthier society. See story on the museum in the March 2015 issue of MeDeFacts, page 13.

**Global Health Conference 2015**

*From the Australian Medical Students’ Association (AMSA). Granted $20,525.*

Global Health Conference (GHC) was established in 2005 by AMSA. Every year we attract hundreds of delegates from all over Australia, New Zealand and the Asia-Pacific region. GHC is renowned for its high calibre academic program, with past speakers including prominent names such as Julian Assange and His Excellency José Ramos-Horta. Delegates are educated about global health, from the Millennium Development Goals to the challenges faced in Indigenous and refugee health in our own backyard. The academic program is complemented by a social program by night. AMSA is the peak representative body for over 17,000 Australian medical students. GHC is the flagship global health event for the future doctors of Australia. More than 650 delegates are expected to attend this year’s conference, which will be held at the Perth Convention and Exhibition centre on August 26 - 30.
Half a century of social work

A book launch and a gala reunion are among the activities being held this year to mark the 50th anniversary of the program of Social Work at The University of WA.

The program began in 1965 with the first intake of students into an 18-month diploma course, for which the administrative responsibility was placed with the Head of the Department of Psychology. Several years later the Department of Social Work was established as an autonomous body and it was not until 1983 that it came under the umbrella of the Faculty of Arts.

The discipline is now called Social Work and Social Policy, and is lodged under the School of Population Health within the Faculty of Medicine, Dentistry and Health Sciences. Its early history is documented in the booklet “Looking Back - Reflections on Twenty Five Years 1965-1990” published in 1990, which notes that “It is amazing to consider that prior to 1965 there was no professional social work training available in Western Australia.”

Emeritus Professor Laksiri Jayasuriya, who was appointed Foundation Chair in 1974, after the chequered early years of the Department, says one of his main concerns was to acknowledge the link between social work and social policy. “Social work practice in many ways flows from social policy” he says. In order to promote various aspects of social policy, he played a key role in government bodies and helped develop multiculturalism in Australia.

In order to sustain the distinction between policy and practice, in 1977 he set up the Family Service Centre (FSC) within the Department but housed in its own building on campus. It was the first of its kind in Australia and is described as offering “a broad-focussed, interpersonal helping service to individuals, families and groups”. The services, which included personal and financial counselling as well as other social work services, were free to the public.

“It was like a clinical department of the Faculty of Medicine,” Emeritus Professor Jayasuriya says. “In fact, it was modelled very much on the training of medical students who were exposed to the practice of medicine, especially its clinical aspects, by attachment as hospital trainees. Social work students too had to have an exposure to social work practice at the coalface.” The FSC initiative was a distinctive feature of the WA training program. The first FSC Director was Mr Brian Cheers, who was followed by Ms Rae Lindsay.

Emeritus Professor Jayasuriya also sought successfully in the early 1980s to have the name of the Department changed from Social Work to Social Work and Social Administration primarily to highlight the link between policy and practice. He was made a Member of the Order of Australia (AM) in recognition of his contributions to social work education, and particularly the development of multiculturalism in Australia and social welfare policy.

There were many notable contributors to the Department, including the late Dr Wally Tauss, who was the first Head, the late Dr Margaret Stockbridge, affectionately known as “Teddie”, Dr Jim Ife, and Mr Brian Wooller, an early graduate of the School.

A Gala Alumni Reunion will be held on Friday, 27 November, at which a book will be launched that chronicles the 50 years of social work at UWA. Further updates and tickets to the Reunion will be available at www.sph.uwa.edu.au/research/social-work-policy-50th-anniversary

This site is also available for social work alumni to tell their own stories that may be included in the book.

The group is trying to reach as many social work alumni, current and former staff as possible. Anyone wishing to update their contact details online can visit uwa.edu.au/stayconnected to enter personal and business details.
Students in the Master of Pharmacy course headed overseas and into the bush for clinical placements for the first time this year as part of their two year intensive course.

Two students went on an international exchange to China and five students undertook a rural placement. This opportunity to experience clinical placements internationally or rurally will be available to eligible students in the future.

Ms Kerry Whitelaw, Lecturer in the Pharmacy Practice Program, said non-traditional placements added value and diversity to the program in terms of student offerings as well as enriching the student learning experience. “Sharing how pharmacy is practised in different parts of Australia and overseas with fellow students challenges traditional beliefs about the framework of pharmacy practice for the next generation of pharmacists,” she said.

The Chinese experiential placements were offered at Zhejiang University. Here’s what the students, Becky Chau and Andrew Leau, had to say:

“Our five week pharmacy placement which took place at the College of Pharmaceutical Sciences at the Zhejiang University in Hangzhou, China was definitely an experience of a lifetime. We were given the opportunity to observe the many research projects of PhD and Master students, looking into the improvement and study of existing as well as novel Traditional Chinese Medicines (TCM), from how the extraction process took place to cell behaviour upon exposure to components of existing TCM products and also those not yet well understood. Not only did we learn but we also went travelling to many interesting places in China to explore the culture, the people and way of life, including tourist attractions, museums and lots of different foods!”

The rural placements were offered in Geraldton and Albany. These are the musings of four of the students, Kate Fulford, Jayde Roberts, Marleen van Oeveren and Kristy-Lee Albrecht, who were based in Geraldton:

“We were pleasantly surprised to arrive in a beautiful beach town with incredible beaches, a remarkable community spirit and more amenities than we anticipated. During our five week placement based in Geraldton at the Western Australian Centre for Rural Health (WACRH), we each spent two weeks at a community pharmacy where we were exposed to different cultural and social profiles compared to the metropolitan areas throughout Perth and a different scale of health issues.

We visited Mt Magnet, an isolated town four hours from Geraldton, where we met health professionals from the Geraldton Regional Aboriginal Medical Service (GRAMS), the nursing post and the pharmacy and they each outlined the different health services they provided. We also had the opportunity to visit the art gallery and see the wonderful works by Aboriginal artists. On a day trip to Mullewa with the Medicare Local team we visited the local Aboriginal people to see what their health requirements were and how Medicare Local could be of assistance. A visit to the

(local Mullewa pharmacy highlighted some of the rewards and challenges of owning a pharmacy in such a small, rural community.

We also spent two weeks in the Geraldton Hospital pharmacy which put into perspective the vast clinical skills and knowledge skills we would require to be hospital pharmacists and so we were keen to learn! We saw everything from snakebites to bull attacks and everything in between.

During the placement we were also exposed to the Aged Care Assessment Team (ACAT), the Older Persons Initiative (OPI) and the Day Therapy Unit (DTU). These services functioned within the hospital and at patients’ homes to provide assistance to the elderly or permanently injured and included strengthening classes, speech therapy, occupational therapy and physiotherapy. This was great to see as these services are also available here in the metropolitan area but we never knew they existed!”

The rural placement program was made possible from funding provided by The Pharmacy Guild of Australia and support from WACRH and Rural Health West.

UWA PHARMACY STUDENTS ANDREW LEAU (LEFT) AND BECKY CHAU (RIGHT) WITH PHARMACEUTICAL SCIENCE PROFESSORS GAO JIAN QING, LOU XIAO E, WU YONG JIANG, ZHU KA LIN AND WANG YI FENG.

THE RURAL STUDENTS GET OUT AND ABOUT in the country
**Looking beyond the image**

**An innovative learning tool** to encourage students and practitioners to rethink the stereotypes associated with ageing has been developed by the Faculty’s Education Centre.

Project leader Dr Gabrielle Brand and her team have used more than 30 documentary-style photographs of 14 older West Australians, together with audio-narrated film of their health care experiences, as the basis for the resource.

The photographs for the Depth of Field: Exploring Ageing project were taken by well-known WA photographer Steve Wise, who works as a medical photographer at Royal Perth Hospital. The images portray a range of age-related health and social issues, from dependence in a hostel setting to healthy older adults living independently in the community. Fourteen Bethanie residents kindly volunteered their time and shared their stories.

The project team also included research associate Ms Karen Miller, Associate Professor Christopher Etherton-Beer, of the School of Medicine and Pharmacology, and Associate Professor Rosemary Saunders and lecturer Assistant Professor Helen Dugmore, both of the School of Population Health.

Dr Brand said the reflective learning resource was for use by health professionals working with older people and by students across the health disciplines, including medicine, dentistry, pharmacy, social work, podiatry, medicine and nursing. It is also available to other universities and the health care industry.

Dr Brand said the aim was to evoke an awareness of ageism and challenge negative attitudes towards older adults.

When used as a teaching tool, students are shown the photographs and asked to construct a story about each person featured. They are then shown the audio-narrated film of the older adults telling their actual stories.

“The sequencing of the photographs has been designed to contradict the assumptions they may make in their own story,” Dr Brand said. “It really is a very valuable teaching tool because it can shift their perceptions and, as one medical student commented, ‘I shouldn’t have jumped to that conclusion’.

The ultimate aim of the resource is to help move students and practitioners “beyond diagnosis” to a more humanistic model of care for older adults.

“The resource is evidence-based,” Dr Brand said. “We ran an inter-professional pilot with medical and nursing students and found whether the use of photographs really does enhance reflection.” The results are to be published soon.

Dr Brand is running two free training days on how to use the resource, on June 16 and 26. Anyone interested in such training, or being sent the free resource, can contact her at gabrielle.brand@uwa.edu.au. She is happy to organise more training days if there is the demand.

**Adelaide Advertiser**

**Associate Professor Desiree Silva**, of the School of Paediatrics and Child Health, is QAS that healthy brain development in early childhood is crucial. “So if we can determine any conditions that may disrupt this process and lead to lifelong effects then we may get a much clearer picture of how to prevent or treat them,” she said. She was a co-researcher of one of the largest ever studies into the origins of ADHD. It involved more than 16,880 WA children, aged four to 25, who had been prescribed ADHD medication. The study found mothers of children with the condition are more likely to be younger, single and smokers during pregnancy. The mothers were also more than twice as likely to have had threatened pre-term labour before 37 weeks and threatened abortion before 20 weeks. There was an elevated prevalence of ADHD in babies born to women who had a urinary tract infection during pregnancy, and caesarean delivery carried a higher risk. Children with ADHD were 70 per cent more likely to have been in hospital as an infant, suggesting inflammation and infection may have affected their brain development. Compared to children without ADHD, those with the condition had double the risk of being admitted to hospital for ear disease, neurological disease and poisoning.

**Australian Doctor**

**Professor Dickon Hayne**, professor of urology, is QAS a detailed survey of GPs is being carried out to better understand attitudes to the referral of haematuria. He was an author of a study that found almost one-quarter of patients with haematuria waited more than two weeks before alerting their GP to blood in their urine. The study of 100 patients attending a haematuria clinic at Fremantle Hospital also found more than one-third of patients who were referred to the clinic had waited more than one month before showing up, while 10% of patients who had been referred failed to attend at all. GPs have been urged to refer all patients with haematuria for cystoscopy regardless of their demographic, associated symptoms or anti-coagulant use.

**WITS ABOUT YOU**

(Answers page 16)

Our medical quiz is kindly supplied by Emeritus Professor Bernard Catchpole, the second Professor of Surgery appointed to the Faculty.

1. The majority of the duodenum is part of the foregut, the midgut, or the hindgut?
2. As the vaga is to the ascending colon, what corresponds to the descending colon?
3. What type of epithelium covers the uvula in the mouth?
4. The caecum in the right iliac fossa, and the foramen caecum of the ethmoid bone have names in common. What does the word caecum mean?
5. What is a glomus body?

**POINTS TO PONDER**

Does your grey matter need a kick start each day? Emeritus Professor Bernard Catchpole has posed a series of points to ponder that he suggests readers may like to contemplate as they clean their teeth in the morning.

What is the evolutionary value to old men of growing bushy eyebrows?

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**The West Australian**

**Professor Luc Delriviere**, professor of surgery and head of WA’s liver transplant service, is QAS Australia’s rate of refusal to donate organs is one of the highest in the world and that’s why organ donation in Australia is one of the lowest in the world.

Australia had about 700 potential organ donors last year but barely 50 per cent donated. WA had the second worst donor rate in the country. “If that refusal was around 10 or 15 per cent, then there would be more than enough organs and no one would die on the wait list,” Professor Delriviere said. He and two men on whom he operated after donors were found are directors of Donor Mate, a Perth-based charity trying to raise organ donation awareness among young people. He said he joined the Donor Mate team because there was nothing substantial being done to create a culture of donation. “To say no when you don’t want it is fine, but that level of refusal because people simply don’t know about it, that’s revolting. The level of organ donation is a political decision. If you want to spend enough money on a campaign to make organ donation the normal thing to do, then you can do it.”

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The photographs and audio-narrated stories were featured in an exhibition that ran in May at the Lawrence Wilson Art Gallery at The University of Western Australia.

Ms Christiane White, of the WA Centre for Health and Ageing, and Ms Erica Yeh, of the Education Centre, helped organise the exhibition and Professor Sandra Carr, Associate Dean of Teaching and Learning, was the MC for the launch.

The project was funded by a WA Nurses Memorial Charitable Trust grant.
Our people and what they do

Appointments

Many health professionals were among those recognised in the Queen’s Birthday Honours list. They include:

- Appointed as an Officer in the General Division of the Order of Australia (AO):
  - Professor Paul Abbott, of the School of Dentistry and Oral Health Centre of WA, for “distinguished service to clinical dentistry, and to higher education, as an academic, researcher and author, to endodontics as a practitioner, and to professional organisations.” Professor Nigel Laing, of the Centre for Medical Research, based in the Harry Perkins Institute of Medical Research, for “distinguished service to medicine in the field of neuromuscular disorders, as an academic and researcher, to medical education, and through contributions to professional associations.” Professor Karen Simmer, of the Centre for Neonatal Research and Education and the School of Paediatrics and Child Health, for “distinguished service to medicine in the field of paediatrics, particularly neonatal and perinatal nutrition, to medical education as an academic, researcher and clinician, and to the community.”
- Appointed as a Member in the General Division of the Order of Australia (AM):
  - Clinical Professor Richard Hermann, of the School of Pathology and Laboratory Medicine, for “distinguished service to medicine, particularly to haematology as a clinician, to bone marrow transplantation services, and to education.”
  - Awarded a Medal in the General Division of the Order of Australia (OAM):
    - Clinical Associate Professor Geoffrey Smith, of the School of Psychiatry and Clinical Neurosciences, for “service to medicine, and to mental health.”

Professor Laing is also one of two eminent researchers at The Harry Perkins Institute of Medical Research who are newly elected Fellows of an innovative national academy. He and the Perkins’ Director and Head of the Laboratory for Cancer Medicine, Professor Peter Leedman, will be part of the Australian Academy of Health and Medical Sciences, launched in March. It will provide independent advice to government, industry and the community on issues relating to evidence-based medical practice and medical research in Australia. The professors said the Academy would help them to mentor the researchers who would translate discoveries at the bench top into better treatments in the future and improve quality of life.

Awards

An exceptional contribution to stem cell research by Professor Ryan Lister, of the Harry Perkins Institute of Medical Research, has been recognised by a major award. He is one of only two recipients Australia-wide to this year win a $50,000 Mctcalf Prize from the Australian National Stem Cell Foundation of Australia. Professor Lister generated the first comprehensive maps of the human epigenome, finding that the chemical signposts that comprise the epigenome differ between embryonic stem cells and specialised adult cells. He also discovered that when specialised human cells were converted into non-specialised cells, the reprogrammed adult stem cells retained a memory of the cell they once were. He now believes it is possible to make them forget their past lives of what type of cell they once were, e.g., brain, liver and blood, which can enable them to be used for other purposes. Professor Lister’s work on human epigenome mapping was rated by TIME magazine as the second most important scientific discovery of 2009.

Establishing Lions Outback Vision, which provides specialist eye health services in regional and remote communities to nearly 5,000 people a year, has won a UWA graduate a top WA prize. Dr Angus Turner, of the Centre for Ophthalmology and Visual Science (incorporating the Lions Eye Institute), was named First Amongst Equals in the 2015 40Under40 Awards. Dr Turner, whose goal is to eliminate blindness and vision loss, set up Lions Outback Vision in 2010 to service the Pilbara, Kimberley, Great Southern and Goldfields. The rate of blindness among Indigenous Australians is more than six times higher than in non-Indigenous Australians, yet 94 per cent of vision loss is preventable or treatable. Dr Turner completed his medical studies at UWA before studying evidence-based medicine at Oxford University as a Rhodes Scholar.

Professor Ryan Lister, of the Harry Perkins Institute of Medical Research, was one of the 40 finalists in the 2015 Awards. Professor Lister – who won a Prime Minister’s Prize for Science last year – is working towards, among other things, better understanding the role of the epigenome in the human brain, advancing the application of regenerative medicine, and remedying epigenetic dysfunction in disease states.

Professor Wendy Erber, Head of the School of Pathology and Laboratory Medicine, was announced as Cancer Council Western Australia’s Cancer Researcher of the Year. She was interviewed by 6PR Morning’s Gary Adshead and gave him an insight into the work she does and why it makes her something of a “Sherlock Holmes”. The interview can be heard at https://www.cancerwa.asn.au/resources/2015-04-15-Wendy-Erber.mp3

Research

GPs require further support and education to ensure successful adoption of co-testing for patients treated for a high-grade squamous intraepithelial lesion (HSIL), according to the findings of a WA survey. “The use of co-testing (HPV DNA testing and cervical cytology) in general practice is a useful tool to identify patients with a history of HSIL, who are at the greatest risk of disease persistence/recurrence,” the researchers said. Professor Yee Leung and Clinical Senior Lecturer Mr Paul Cohen, both of the School of Women’s and Infants’ Health, were among the researchers. The survey of 745 GPs found a significant number (34.3%) were unaware of the use of co-testing for the management of such patients. “Our study specifically investigated the management of patients after treatment for CIN 2 and/ or CIN 3, and identified that the majority of GPs did not ‘always’ receive a clear follow-up plan from the specialist ob/gyn to whom the patient had been referred,” the researchers said. The survey results were published in Australian Family Physician.

Rare genetic variants associated with thyroid hormone levels have been identified by an international study and the results published in March in Nature Communications. Lead author Adjunct Associate Professor Scott G. Wilson, and Clinical Professor John Walsh, both of the School of Medicine and Pharmacology, were among the researchers in the whole genome sequencing study, the UK10K project. The project discovered a new gene called SYN2 which appears to play an important role in the control of thyroid stimulating hormone. Adjunct Associate Professor Wilson said the whole genome sequence data enabled them to identify that both common genetic variants with modest effects and rarer genetic variants with larger effects determine a person’s thyroid status. Clinical Professor Walsh said the findings had implications for the diagnosis and treatment of hypothyroidism. “Some people may have borderline thyroid function tests because they have inherited rare genetic variants and not because of thyroid disease... in which case, they don’t need to be treated with prescription medicines.” The study combined data from 16,000 people around the world including those in the Busselton Thyroid Study and other big global population studies. Thyroid disease affects up to 10 per cent of people in the world and synthetic thyroid hormones are among the most common drug therapies prescribed globally.
Information/Education

The education research studies and projects of Faculty staff and students were showcased at an event held last month. The Education Research Symposium, hosted biennially by the Education Centre, included 16 staff and student presentations plus two workshops discussing collaborative perspectives from students on refugee health and the latest in innovative learning resources for health professions educators. The presenters were Professor Ian Puddey, former Faculty Dean, Professor Sandra Carr, Associate Dean, Teaching and Learning, Ms Kylie Black, Acting Senior Librarian, UWA Medical and Dental Library, Dr Gabrielle Brand, of the Education Centre, Associate Professor Christopher Etherton-Beer, of the School of Medicine and Pharmacology, Dr Alison Creagh and Dr Jacinta Cover, both Masters of Health Professions Education candidates, Ms Molly Gilfillan, Chair of the Health Students’ Council of WA and level 6 MBBS student, Ms Lorii Jacobs, PhD candidate, School of Primary, Aboriginal and Rural Health Care (SPARHC) and the School of Population Health (SPH), Dr Susan Miller, of the Education Centre, Associate Professor Paul McGurran, of the School of Women’s and Infants’ Health (SWIH), Dr Julia Moore and Professor Florian Zepf, of the School of Psychiatry and Clinical Neurosciences (SPACN) and School of Paediatrics and Child Health (SPACH), Ms Asha Nicholson, level 5 MBBS student, Associate Professor Denese Playford, of SPARHC, Associate Professor Zarrin Siddiqui, of the Education Centre, Ms Melanie Still, level 5 MBBS student, Ms Alexandra Tregonning, of SWIH, Dr Helen Wilcox of SPARHC, and Dr Helen Wright, of SPACH.

The topic of ingrown toenails was covered by Professor Alan Bryant, Head of the Podiatric Medicine Unit in the School of Surgery, and Assistant Professor Andrew Knox, also of the Unit, in a commissioned article for Australian Family Physician. They said an ingrown toenail or onychocryptosis is a painful condition routinely managed by podiatrists and general medical practitioners alike. It may occur at any age and is the mostly commonly encountered toenail problem likely to be seen in general practice. The authors describe the common surgical approaches available for its management. “The choice of technique is largely dependent on practitioner experience and preference,” they said.

Grants

Funding to continue ground-breaking research into human immunodeficiency virus (HIV) infection has been awarded to Professor Martyn French, of the School of Pathology and Laboratory Medicine. His grant was a share of almost $6 million provided to 131 researchers by the WA Government’s Medical and Health Research Infrastructure Fund. Professor French, a Royal Perth Hospital clinical immunology consultant, and his team are investigating the possibility of using an antibody to trigger a patient’s natural immune response to fight and eradicate HIV. The aim is the development of a vaccine for HIV sufferers.

How to lead the way

Clinicians with an eye to becoming successful consultants, managers, supervisors or leaders may find themselves reaching for a recently released book, edited by a Faculty clinician.

Clinical Professor Sanjay Patole, of the Faculty’s Centre for Neonatal Research and Education (CNRE) in the School of Paediatrics and Child Health, is editor and one of several WA contributors to the book titled “Management and leadership - a guide for clinical professionals” (http://www.springer.com/medicine/book/978-3-319-11525-2).

Dr Catherine Campbell, also of the CNRE, Professor Fiona Lake, of the School of Medicine and Pharmacology, and Dr Christopher Griffin, of the School of Women’s and Infants’ Health, are contributors, as are many international experts.

The far-ranging book covers topics such as Risk Management, The Art of Negotiation, Handling Difficult Behaviour, and Facing the Media, Coping with Stress at Work, The Educational Role of Senior Hospital Staff, The Nature of Conflict in Health-Care, Handling Complaints, Meetings, and Presentations, and Communicating Bad News in the Health Care Organisation.

Clinical Professor Patole said the importance of clinical leadership in the future of the medical profession could not be over-emphasised and the authors believed that trainees and consultants in their early career would benefit from the book, which aimed to facilitate training in the area. “I am sure it will be of great help to medical students getting ready to graduate,” he said. “Many topics are relevant to researchers as well.”
Dental alumni on a roll

BY DR ANISH SHAH, COMMITTEE MEMBER OF THE UWA DENTAL ALUMNI SOCIETY

The first half of the year has been a busy one for the UWA Dental Alumni Society. We kick-started the year co-sponsoring the prestigious prize giving ceremony which celebrates the achievements of the top performers in both the undergraduate and postgraduate courses offered by the Dental School. This was followed up with a full sponsorship of all the name badges that are issued to the class that transitions itself from treating rubber heads to real ones! The alumni society was instrumental in negotiations with Orascoptic - a company specialising in microscopes and magnification equipment for the medical and dental profession, which led to the donation of four pairs of dental loupes to the Dental School, worth numerous gold crowns. The students will also receive a heavily discounted price on any equipment they purchase. We would like to thank Orascoptic for their kind gesture and support.

Our first fundraising event of the year was “Tequila Lawnbowls” which was well attended (and well regretted the next morning) by alumni who were suffering from the withdrawal one experiences after leaving university.

The two main goals of the alumni society are to:
1. Strengthen relationships between members of the dental community and the Dental School.
2. Raise much needed funds to support the Dental School in its activities. As you all know, the trickle of funds to tertiary institutions is drying up, so every dollar counts!

Our next social event is NOBOTE! on July 4 (yep, we need you as much as Uncle Sam does). Keep an eye out for details in your In-box.

A lecture series has also been organised to get dentists in touch with new knowledge. Details are below.

If you would like to get involved, or assist the committee in achieving its goals for the benefit of the dental profession, do get in touch. My email address is anishanilshah@gmail.com and my mobile is 0423 840 804.

See you all at the lectures at ADA house!