

Auckland District Health Board

Research

Annual Report 2016







GROWING RESEARCH

Last year we were pleased to participate in shaping the new Health Research Strategy for New Zealand. The publication of that had earlier been prefaced by an announcement of substantial new investment in health research by the Minister of Health so we anticipate more opportunities to grow research in Auckland DHB. Our goal is to expand our research activities in healthcare delivery and health systems research whilst continuing to support biomedical and population health research in partnership with our many collaborators including the University of Auckland with whom we have a strategic alliance.

We continue to grow our internal research portfolio and in 2016 awarded the second of our Auckland Academic Health Alliance research grants. Research findings are already being published from the first round of studies reflecting the benefits of funding new research collaborations. We profile some of the successful applicants in this report.

One the advantages in working so closely with the university is that we can work together to support researchers. We have jointly established the Auckland Health Research Ethics Committee which will approve research proposals that fall below the threshold for Health and Disability Ethics Committee review. The university has a seat on our research governance committee and several clinical university employees sit on the research review committee. Our goal is to support more Auckland DHB staff to take up clinical research as ultimately our patients and families benefit.

I would like to thank all those who work tirelessly to ensure researchers can complete the administrative components of their research without hiccup – the staff in the research office, the research accountants and our legal counsel. I also acknowledge the support of the A+ Trust, Starship Foundation and Green Lane Research and Education Fund which provide funding for grants, summer students and research fellows. We acknowledge those who have donated or bequeathed funds for research. Our DHB is richer for their contributions.



Dr Margaret Wilsher

Chief Medical Officer and Head of Research, Auckland DHB

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A WORD FROM THE AUCKLAND DHB RESEARCH OFFICE

This document is a snapshot of the research activities that commenced at Auckland District Health Board in the year 2016. During this period more than 300 new study protocols were reviewed, approved and initiated. Nearly every Auckland DHB service or department was involved with research.

What's new?

The strategic refresh of the Health Research Council (HRC) in 2015 started a nationwide conversation about what central government could do to advance New Zealand's health research sector. Emerging from this, the principal vehicle proposed to achieve better connections between stakeholders and better priority setting was a **national health research strategy.** In 2016 the Ministries of Health and Business, Innovation and Employment, along with the HRC, conducted extensive consultation with over 500 stakeholder individuals via regional meetings and targeted focus

groups, at which Auckland DHB was well represented. Auckland DHB also contributed one of the 166 written submissions which, according to the HRC had a major influence on the final strategy. The New Zealand Health Research Strategy 2017 – 2027 was relased in June. It sets out the government's long-term goals for health research and the roles that DHBs will have in achieving these goals. Crucially, the strategy has sharpened the focus on the health system and the centrality of research to the quality of patients' outcomes and service delivery. One of four strategic priorities is to create a vibrant research environment in the health sector by strengthening health sector participation in research and innovation, the clinical research environment and health services research. As a leader in clinical research Auckland DHB is in a strong position to work with the ministries and contribute to the implementation of the strategy.

To find out more follow the link http://www.health.govt.nz/system/files/documents/publications/nz-health-research-strategy-jun17.pdf



Auckland DHB's Research Strategy, established in 2016 is already reaping rewards. Starship Child Health specialist emergency physician Stuart Dalziel is leading a trial that recently received a \$4.99m from the Health Research Council to look at the possible association between childhood asthma and paracetamol. The trial is not only first of its kind in the world, it also embodies many of the key planks in Auckland DHB's research strategy- collaboration at national and international levels is being one of themthese. Stuart will lead the trial alongside a team from Auckland and Counties Manukau DHBs, the Medical Research Institute of New Zealand (Wellington), and the universities of Auckland, Otago and Calgary (Canada). The strategy is also focussed on delivering more grants; enabling research quality to grow and making it easier for researchers to navigate the system. Chief Medical Officer Margaret Wilsher is driving the strategy. Margaret says there are a host of extraordinary investigations underway. "Credit goes to our big research groups—cardiology and oncology and the intensive care units, Critical Care Medicine and Cardiac and Vascular Intensive Care Unit. But there are also very active teams in interventional radiology, neurosciences, women's/newborn and the liver unit. Many of our clinicians in these groups are collaborating with colleagues locally and internationally and these relationships are not only fundamental to research growth but also to ensure that we can translate robust science into patient benefit. Fundamentally it's about doing better for patients, but it's also about lifting the profile of our researchers in the DHB and the university, and giving them more opportunities to present their proposals and their research outcomes."



In 2016, the HRC received the largest-ever increase for health research in New Zealand – \$97 million – and by 2020 that annual investment will increase to \$120 million.

Highlights in this report



This report features an evaluation of the the Auckland DHB Charitable Trust's (A+ Trust) investment in research via the annual A+ Trust Research Grant funding round. You'll be able to see the outputs emerging from the last seven years of funding and some snapshots about the value derived from grant investment, from big projects and small.



Starship Foundation has a long history of promoting children's health research, from funding Starship's dedicated research advisor, Dr Peter Reed, to supporting promising individuals with research fellowships. In 2016, supported by the generosity of donors, the Foundation expanded its research programme by launching Starship's clinical research funding round, an annual competitive funding round of half a million dollars. To find out more about the seven projects supporting in the inaugural round go to page 31.

What's on the radar?

After more than two years of consultation and planning the Auckland Health Research Ethics Committee (AHREC) is now due to convene for the first time in September 2017. The AHREC has been established under the auspices of the Auckland Academic Health Alliance (AAHA) between Auckland DHB and the University of Auckland, and is accredited to provide ethical review of research by the Health Research Council of New Zealand. AHREC will protect the ethical environment for clinical research by providing review for projects that fall outside the Health and Disability Ethics Committees' scope.

Here are some of our outputs in 2016. Please read more and discover what Auckland DHB research is accomplishing.

Number of active research projects in 2016	1341
New projects commencing in 2016	313
Published research articles in 2016	505
Successful research grant applications involving ADHB in 2016	81
Value of research grants involving ADHB in 2016	>\$18 million



Mary-Anne Woodnorth

Auckland DHB Research Office

MEET DR HELEN WIHONGI

Researchers at Auckland DHB, and hundreds more from other DHBs and tertiary institutions in Auckland and nationwide, have had their project plans reviewed for responsiveness to Māori through He Kamaka Waiora Research Services. For over four years Dr Helen Wihongi has provided critical review, consultation and leadership for Māori advancement through research, but how much do you know about our accomplished Dr Helen? It's time for a proper introduction...

Helen is a community psychologist. Her doctoral research focus was policy and the impact of policy on health populations, in particular Māori populations. Helen has a strong research and funding background. She sits on a number of clinical and research committees including the Auckland Regional Tissue Bank's governance and scientific groups, the Auckland DHB's clinical ethics advisory committee, the Cartwright working party, the AUT Māori research facilitation committee and the Precision Driven Health Independent Advisory group. Her research skills include kaupapa Māori theory and practice, and quantitative and qualitative research methodologies.

Helen started working at the Waitemata and Auckland District Health Board in 2013. One of her tasks was to establish a Māori review process across the Waitemata and Auckland interface. With the help of the Chief Advisor Tikanga, the Māori Health Gains team and the He Kamaka Waiora provider team this was completed in 2013. Since then the review process was standardised for use across the 20 other DHBs. While some DHBs are choosing to continue to use their own processes the standardised form provides opportunities to utilise the form for national studies. Helen also facilitated discussions across the University of Auckland and the Waitemata and Auckland DHBs regarding the formalisation of biobanking. One of the outcomes has been the establishment of the Auckland Regional Tissue Bank. Karanga is a research area of interest for Helen. She is working on a research project led by the Chief Advisor Tikanga exploring the health benefits of karanga for kaikaranga.

In the next two years Helen will be leading the establishment of a Māori Health Research Institute across the Waitemata and Auckland District Health Boards. With the establishment of the National Health Research Strategy this will better position the Waitemata and Auckland District Health Boards to lead research opportunities that focus on the Waitemata and Auckland District Health Boards Māori health priorities, grow new matauranga Māori, form national and international indigenous research relationships, and work collaboratively with other research institutes to achieve Māori health gain.





MAKING A DIFFERENCE

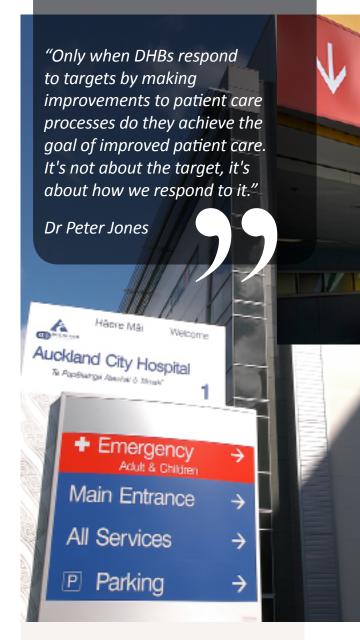
Shorter Stays in the Emergency Department – the results are out!

The main goal of the national 6-hour time target for Emergency Departments (ED) was to reduce poor patient outcomes due to overcrowding. In 2009, when the health target for shorter stays in ED was first introduced, only 70% of ED patients were admitted, transferred or discharged within 6 hours. By 2013 the emergency departments were consistently achieving the 95% target. Our patients would have spent 150,000 more hours (equivalent to 17 years) in ED each year if the average patient's stay was still as long as it was in 2009. A hospital-wide approach with every ward participating in some sort of improvement activity to meet the target has been highly successful. Tens of thousands of bed days have been saved at Auckland City Hospital and this has increased our capacity to admit acutely unwell patients.

But Director of Emergency Medicine Research, Dr Peter Jones, was sceptical at first. He was aware of UK NHS Trusts "gaming" to achieve their stricter 4-hour target, by inappropriately transferring patients to make it look like the target had been met. Dr Jones decided to study the effects of the implementation of the 6-hour target on key indicators of hospital care quality. He teamed up with researchers from the University of Auckland, and in 2010 the team won a \$1.1 million Health Research Council (HRC) "Research for New Zealand Health Delivery" project grant, one of the very first the HRC awarded.

The investigation team examined various quality indicators in 18 of New Zealand's 20 district health boards (DHBs) over a period of seven years (2006–2012), before, and after the target was introduced.

Six years later and after analysing millions of ED presentations the team have the answers to their questions and have published their results. As well as confirming that the shorter stays initiative has dramatically reduced time in ED and time to admission to a ward, the study has produced a striking finding about the positive effects of the target on crowding and patient mortality.



"We found that the introduction of the six-hour target was associated with a substantial 50 per cent reduction in the number of patient deaths in emergency departments – that's about 700 fewer deaths than predicted if pre-target trends had continued. This result mirrors the 50 per cent reduction in emergency department crowding,"

says Dr Jones.



"There was also no increase in deaths on the wards, so there was no evidence that the observed reduction was due to 'shifting' deaths to elsewhere in the system."

The researchers also found that after the target was introduced, fewer patients left the emergency department before completing their care and that admission rates did not change substantially. There was no reduction in the quality of information provided in patients' discharge summaries after the target was implemented.

Having abandoned his stance as a skeptic, Dr Jones now considers himself a full convert to shorter stays. However, he recommends taking a balanced view as the study revealed some areas of concern and further investigation will be needed.

"We looked at the number of patients readmitted to hospital 30 days after being discharged and found that this figure had increased by about 1 per cent, which is a plausible unintended consequence of reducing the amount of time people spend in hospital,"

says Dr Jones.

According to Dr Jones, his greatest learning from leading this major project was about the importance of taking a system-wide approach. "Only when DHBs respond to targets by making improvements to patient care processes do they achieve the goal of improved patient care. It's not about the target, it's about how we respond to it."

HRC Chief Executive Professor Kath McPherson says this comprehensive study will directly inform future health policy in the area of emergency medicine.

"This study has important implications for the way future health targets are implemented by helping identify which DHB management practices lead to success in meeting the target, and more importantly, which improve quality of care for patients,"

says Professor McPherson.

(Article prepared with assistance from the Health Research Council of New Zealand)

A+Trust Grant Outputs Report

A tale of seven years of funding

The Auckland District Health Board Charitable Trust, commonly known as the A+ Trust, was established in 1995 and is the official fundraising arm for adult services at the Auckland DHB. The Trust also acts as the banker for external income for research, allowing effective separation of research monies from central funding for operational services. The interest earned from monies held by the Trust allows it to be a major funder for research at Auckland DHB. There are three A+ Trust research investment rounds annually, project grants, summer student stipends and AAHA collaboration grants (with the University of Auckland's faculty of Medical and Health Sciences). This report conducted in 2017 covers the most recent seven years (2010 – 2016) of the Trust's investment.



Applications funded: 158-123 project or small project grants, 26 summer studentships and nine AAHA Collaboration grants. Note that these numbers apply to applications where the research commenced and funding drawn down. Not included are applications funded but then withdrawn.

Total funding allocated: \$3,291,104 (as above, this total does not include funding allocated to projects that were subsequently withdrawn).

Projects completed: 78(49%). Most project applications are allocated funding for two years and this report shows that a substantial proportion of projects could not be completed within this strict time frame. However, by the time this analysis was performed, all of the 2010 grant projects were complete and final reports submitted. Of the 2011 grants 19 of 22 had been completed. Its worth noting that one of the incomplete 2011 projects obtained substantial external funding subsequent to the pilot project funded from the Trust and has been scaled up to a definitive study, the results of which will be available in 2018. The statistics are therefore showing good evidence that the research teams that are allocated funding are able to complete their study objectives, although not always within the expected term of the grant according to the application. This result should perhaps be of no surprise when it is considered that the Research Office is asked to make cost-neutral extension requests for approximately 50% of Auckland DHB's Health Research Council-funded grants. Anecdotally, clinical research is more likely to be affected by slow start up and other delays than biomedical research, largely due to the necessity for robust protections for study participants.

Publication: Grants funded from 2010 to 2016 have so far produced 49 articles in peer reviewed journals. The majority of these outputs have come from the older, complete project and small project grants, but some of the summer studentship grants have also resulted in publications. The completed projects that did not result in a journal publication usually produced another high-level output such as a post-graduate degree. Some of the ongoing projects have published their protocols. We noted a trend of a peak in publications two years after funding was allocated, consistent with the normal term of the grant, and then a second peak four years later. Although any interpretation of this trend should be regarded with caution, its possible that six years reflects the extreme end of the natural life-cycle for clinical research projects sized for suitability for A+ Trust funding, for example, single-centre studies, observational studies, pilot or proof of concept studies. When the funding was for the addition of Auckland DHB as a site for a large, multi-center study, there was a trend towards greater likelihood of publication. Its worth noting that this analysis may have underestimated the number of publication outputs. Publications were either reported directly to the

Research Office by the research teams, were identified from acknowledgement to the Trust in the articles themselves, or were identified by matching the team, rationale, objectives and methodology in the article with the application for funding. Despite best efforts some publications may have been overlooked.

Other outputs: There were 13 published abstracts, 13 oral presentations, 9 poster presentations, 3 higher degrees, 4 awards and 2 guidelines originating from A+ Trust funded research projects during the seven years. At least three of the funded studies have provided feasibility data or proof of concept that has enabled successful applications to external funding bodies such as Health Research Council (HRC). The project grant awarded to Anaesthesia and Perioperative Medicine's Dr Tim Short in 2010 generated the pilot data he needed to inform his successful \$1.2M HRC application in 2012 for his definitive, international study on depth of anaesthesia and post-operative mortality. Overall, more than 90% of the completed projects achieved at least one notable outcome. The outputs case studies featured in this report were for research either part- or fully funded from the A+ Trust.

Output Case Study:

Results presented at 2017 European Society of Human Reproduction and



Professor Cindy Farquhar

Embryology Annual Meeting in Geneva - The intraUterine Insemination (TUI) study.

Professor Cindy Farquhar (National Women's Health and Fertility Plus) and team were awarded \$25,000 for a 2013 A+ Trust project grant. The research discovered that five days of treatment with clomiphene, a medication for infertility in women who don't ovulate, followed by direct insertion of sperm into the uterus, was three times more effective for relatively infertile couples than trying to conceive naturally. Professor Farquhar credits the results to the medication giving couples a helping hand by encouraging more eggs to be released, and timing conception right by getting sperm into the uterus and thus halfway to the egg before releasing them. The study has demonstrated potential benefit of clomiphene plus intrauterine insemination as an effective, less invasive and inexpensive alternative to in vitro fertilisation.

Published articles

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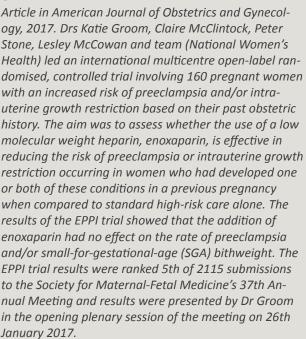
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Output Case Study:

The EPPI Trial: Enoxaparin for the prevention of pre-eclampsia and interuterine growth restriction.



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Results case study:

C. C. Grant, J. Crane, E. A.
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Professor Cameron Grant (Starship General Paediatrics) and team have shown that vitamin D supplements prevent allergy sensitisation to house dust mites in children. Vitamin D deficiency is prevalent with 57% of NZ newborns having low vitamin D. Both asthma and allergies are highly prevalent in NZ with 25% of 6 to 7-year olds reported with asthma and 35% of 11 to 12 year olds having an allergic response to common allergens.

"In our clinical trial of vitamin D supplementation during pregnancy and infancy, we showed that when these supplements were started in the mum at 27 weeks gestation and then continued in her child until the child was six months old, they prevented sensitisation of the child to house dust mites (measured when the child was 18 months old)," says Professor Grant. "Based upon a careful review of the records of the children's visits to their family doctor, we also saw that this vitamin D supplementation reduced the proportion of children making primary care visits which their family doctor thought were due to asthma," he says. "Diagnosing asthma at such a young age is a difficult thing to do so we have to take this family doctor visit data with a grain of salt and certainly could not say for sure that the study shows the vitamin D prevents asthma," says Professor Grant. "But it's the first study to show that correcting poor vitamin D status during pregnancy and infancy might prevent childhood asthma."

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Guidelines

Auckland District Health Board Cellulitis Management Pathway

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Posters

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Blincoe, A, Byrnes, C., Sinclair, J., Lim, D., Brothers, S (2015) Do Defects in the Innate Immune System Contribute to Bronchiectasis in Maori and Pacific Island Children? Auckland DHB Research Poster Week – Best Medical Poster Oliver, V., Cole, A., Gane. (2016) Auckland Central Liver Clinic (ACLC): a pilot-project. Auckland DHB Research Poster Week

Stewart, H.A., Tottman, A.C., Alsweiler, J.M., Bloomfield, F.H., Gamble, G., Thompson, B., Wouldes, T.A., Harding, J.E. Left Hand Preference and Fine Motor Outcomes in School Aged Children Born Very Preterm. 20th Annual Perinatal Society of Australia and New Zealand, Townsville, 2016

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Winbo, A. (2016) Pluripotential cells and LQTS: an update on research. Rhythm and Inherited Heart Diseases Symposium, September 2016, Auckland

Winbo, A. (2016) How to strike up a conversation with a living, beating heart cell. Green Lane Scientific Sessions, October 2016, Auckland

Degrees

Jill Depledge (Allied Health, National Women's) MHSc, AUT

Epenesa Iosua (2017) Human papillomavirus in carcinomas of the nasopharynx, oral tongue and larynx

Wikki Koopmans (LabPlus), PhD, University of Auckland, 2012. Common Variable Immunodeficiency in New Zealand: finding the molecular and cellular foundations

Rachael Parke (CVICU) PhD, University of Auckland, 2014. High flow nasal oxygen therapy in patients after cardiac surgery

Awards

Alana Ainsworth American Thoracic Society 2017 Public Advisory Roundtable (PAR) Abstract Scholarship

Jill Depledge (Allied Health, National Women's) 2016 Clinical Support Directorate Award for Research, Allied Health, Scientific and Technical Awards

Frances Dowen (Renal Department) Finalist - Young Investigator Award 2015

A+ TRUST SUMMER STUDENT PROJECTS - THE BEST OF 2016

Each year the A+ Trust awards funding to 10 or more Auckland DHB staff so that they can deploy health sciences students on research projects over the summer break. Each successful project leader is funded to a level of \$5500 to be paid as a stipend for the student. The Auckland Academic Health Alliance facilitates the linking up of researchers and eager students. Though the layout for these studentships is small and the duration of the projects short, the value of the new knowledge gained from these acorns of investment can be priceless. Dr Stuart Dalziel from Starship's Children's Emergency Department, who was awarded a \$5M Health Research Council programme grant this year, describes the recruitment feasibility work done by his summer student in 2014 as "absolutely vital" to the development of the successful programme bid.

The studentship grants awarded in 2016 produced these notable outcomes.

Project 1)

The question: How many patients with cellulitis are unnecessarily admitted to Auckland City Hospital?

The team: Tim Cutfield, Steve Ritchie, Mark Thomas (Auckland DHB Infectious Diseases), Hannah Walter (Medical Student)

The rationale: Cellulitis is a common bacterial infection affecting the skin and subcutaneous tissue. Many patients are admitted to hospital for treatment, however experts concur that many patients are admitted unnecessarily for mild to moderate disease that could be treated at home. The main problem is that clinical guidelines don't clearly define which patients require hospitalisation. The recently published Dundee severity classification uses objective information to inform this decision and might be applicable to the New Zealand setting.

The aims: To describe Auckland DHB's population presenting with cellulitis and to assess the validity of the Dundee classification to this group with a

view to identify and measure the proportion of patients with mild disease that could have been managed in the community. At the commencement of this project Auckland DHB had no cellulitis management pathway and assessment of disease was largely subjective.

The project: A retrospective review of all cellulitis admissions over a two-year period at Auckland City Hospital using data from hospital electronic records. Cellulitis severity was derived using the Dundee classification. 1465 cases were reviewed, 48 were excluded for incomplete information. Validation of the data was achieved by co-review of 390 cases by an Infectious Disease physician and a random review of a further 195 cases.

The outcomes: The majority, 55% of the cases, had mild disease (no comorbidities and no signs of sepsis) and these cases should have been managed in the community with oral antibiotics – almost all of these cases were admitted to hospital for the sole reason of receipt of intravenous antibiotics. 19% of the cohort had an important risk factor for treatment failure but no signs of sepsis. These cases should have received narrow spectrum i.v. antibiotic therapy in the community, rather than in the hospital. Therefore, these data indicate that a whopping 74% of the cohort were unnecessarily treated in hospital. It is commonly stated that many cellulitis admissions are due to social circumstances that do not allow safe community treatment, however in Hannah's review of nearly 1500 patient records, this was rarely encountered.

The impact: These results strongly indicated that use of severity scoring would positively inform the clinical management of patients with cellulitis at Auckland DHB. The economic impact analysis conducted for this project demonstrated huge potential for cost-savings by using effective community management for low severity cellulitis cases. Informed by this studentship project, and the commitment of the clinical teams, Auckland DHB has developed and implemented a new Cellulitis Clinical Pathway.

Economic Impact:

19% of those who had a Dundee score of 1 were discharged on the same day (per patient cost of \$944). Those with Dundee 1 who stayed the median length

of stay (3 days) had a mean per patient cost of \$3188. Intravenous antibiotics were a primary reason for admission for many class 1 cases, with 93% prescribed intravenous antibiotics. If all had been discharged on the same day for community management on oral antibiotics, as is recommended by the Dundee criteria, \$887,416 would have been saved per year. If class 2 cases had been discharged on the same day for community i.v. and management, a further \$601,671 would have been saved per year.

Hannah's project was judged the Most Excellent studentship report for 2016.

Project 2)

The question: Is exercise induced dyspnoea in non-asthmatic adolescent females caused by expiratory flow limitation?

The team: Kevin Ellyett, Brooke Cantley (Physiology Laboratory), Alaina McGoram (Summer Student)

The rationale: Exercise-induced dyspnoea (EID; shortness of breath, difficult or laboured breathing) is a common reason why adolescent females limit or avoid exercise. Exercise induced asthma is often diagnosed as the cause, with bronchodilator therapy recommended prior to exercise. But recent evidence suggests exercise induced asthma is overdiagnosed and alternative causes for dyspnoea overlooked. Expiratory flow limitation (EFL), when exhalation of air from the lungs ceases to increase with increasing expiratory effort, might be a reason underlying EID in adolescents. The prevalence of EFL diminishes with age and is likely to resolve with maturation. During this maturation period, nonasthmatic individuals may be incorrectly diagnosed with and treated for exercise induced asthma.

The aims: To identify what proportion, of otherwise healthy, adolescent females who experience moderate to severe EID demonstrate EFL. This is of particular importance to those in this age range who may be misdiagnosed with asthma and/or who are making choices that may influence their continued involvement in exertional activities, therefore altering their lifelong health and quality of life.

The project: After gaining informed consent and recording morphological data, pulmonary function was assessed including dynamic volumes, static volumes and gas exchange after which a cardiopulmonary exercise test was performed (including inspiratory loops). At the completion of the exercise test, spirometry was followed for 15 minutes to determine if any exercise induced bronchospasm has occurs.

The results: 50% of the cohort of adolescent females tested (between the ages of 12 and 18) were found to be expiratory flow limited- more common than the research team expected. However, maximal aerobic capacity was not significantly different between the flow-limited and the non-flow limited group suggesting that despite the presence of EFL, these adolescents, when encouraged, were able to ignore the sensation of "air hunger" during the later stages of exercise and were able to reach their maximum capacity.

The outcomes: 5 out of 24 of the participants were diagnosed with asthma and were being treated for this condition prior to taking part in the study. The results showed that no participants had any evidence of exercise-induced asthma, nor did they show any significant bronchodilator response post Salbutamol inhaler. This suggests that participants EID was not due to asthma. These results are particularly important when appreciating both the economic impact and psychological effects of taking medications throughout adolescence. One of the participants had been placed on a course of oral steroids to try and improve her symptoms of "exercise induced asthma".

The impact: The revelation that so many normal healthy active young women demonstrate respiratory limitation during exertion does require further investigation including extension to study males. Future research avenues include a larger cross-sectional study examining at what age this limitation is most prevalent and a longitudinal study to examine how the control of ventilation during exercise changes as the lung matures. The present study, and proposed future studies, will give health professionals and those involved in coaching young athletes better insight into how EID (a condition that in the past was ascribed to a form of pathology) can better be managed.

Alaina's project was judged the runner up Most Excellent studentship report for 2016.



COLLABORATION - AUCKLAND ACADEMIC HEALTH ALLIANCE





Auckland Academic Health Alliance



The Auckland Academic Health Alliance (AAHA) formalises a research, teaching and clinical delivery relationship spanning almost five decades between the Auckland DHB and the University of Auckland.

Auckland's first clinical cancer trials research centre

New Zealand cancer patients will have greater access to new treatments through clinical trials, thanks to a major donation towards a new research unit which is the first step towards an Integrated Cancer Centre.

The Centre is an AAHA initiative between the University of Auckland's Faculty of Medical and Health Sciences and the Auckland DHB's Regional Cancer and Blood Service, involving oncology clinicians and researchers working at Auckland City Hospital. The anonymous \$1.4 million donation will establish New Zealand's first specialist cancer clinical trials research unit - an oncology Phase 1 Clinical Trials Research Unit.

The Director of the Cancer and Blood Service, Auckland oncologist, Dr Richard Sullivan says, "The Cancer and Blood Service and the University want to open a research unit with the specialist infrastructure and governance framework to be able to safely deliver 'First-in-Human' studies. Such a unit will be designed and run to the highest possible standards expected of accredited Phase 1 units elsewhere globally. This also provides an excellent framework on which to launch new research in the pursuit of the delivery of personalised medicine," says Dr Sullivan.

The three key platforms for the Integrated Cancer Centre are; a tumour tissue bank; a consolidated genomics research platform; and this purpose-built Cancer Phase 1 Clinical Trials Research Unit.

Cancer Phase 1 clinical studies include those that are for the first time giving a drug to a patient – so called First in Human studies. They involve the administration of small, but cautiously escalating doses of a drug in carefully monitored patients. Once its dose has been established as optimal the drug gets further tested in phase 2 and 3 studies in larger numbers of patients. Phase 1 studies require a higher level of expertise as well as more rigorous oversight and monitoring compared to later stage human trial research.

Patients in phase 1 and later phase studies will likely have their tumour and other samples collected and stored through the tissue bank facility and analysed using the genomics platform hence an integrated use of these resources.

First results from the AAHA Collaboration Grants funding

The first annual collaborations grants round was launched in 2015 with five research projects co-funded by the A+ Trust (Auckland DHB's charitable trust) and the University of Auckland's Faculty of Medical and Health Sciences (FMHS). Through these 'seed funding' grants, the AAHA aims to directly encourage and boost relationships between FMHS and Auckland DHB research staff, and to encourage researchers from both our organisations to further work together. The scheme is already bearing fruit and for this report we feature the scientific discoveries made from two of the 2015 grant projects.

Stability of EPOCH



The EPOCH regimen of chemotherapy (vincristine, doxorubicin and etoposide) is highly effective and well tolerated in patients with Non-Hodgkin Lymphoma. For patients at Auckland City Hospital's Haematology Ward, the current practice is to continuously infuse the drug combination over 4 days, during which the patient remains in hospital the entire time. The development of portable infusion devices allows chemotherapy to be administered continuously within the outpatient or home environment, and has great potential to improve blood cancer care in New Zealand by freeing up access for other patients needing a hospital bed. However, there is only limited stability data for chemotherapy drugs within these devices, preventing their wider application in ambulatory care models. One of the first Auckland Academic Health Alliance Collaboration fund teams set out to investigate whether EPOCH could remain chemically and physically stable in infusion bags and elastomeric infusion devices under storage and usage conditions.

Aims: Development of a stability database to support the transformation of select chemotherapy services from an inpatient to an outpatient or even home setting. The developed strategy can be extended to include other chemotherapeutic agents supporting a patient care model change in New Zealand.

The team: Auckland DHB – Ian Costello (Head of Pharmacy), Richard Doocey (Haematology), FMHS – Darren Svirskis and Yongchuan Gu (School of Pharmacy)

The project: Validated stability indicating methods were developed, optimised and applied for the chemical

quantification of the EPOCH drugs at refrigerated and body temperatures over a period of time. In phase 1 the stability of the product stored at body temperature for 7 days was established. Phase 2 of the study tested the stability of the infusion across a range of environmental exposure conditions that would occur in a clinical setting. Physical stability was determined by visual examination, particle size distribution, osmolality and pH. A "current care" resource utilisation model of EPOCH chemotherapy was evaluated and guidelines were prepared to support the transition to an ambulatory service.

The results: All samples tested remained stable under the environmental conditions investigated with more than 95% of the active compounds remaining. The current care practice with this treatment on the Haematology ward is 6 cycles of chemotherapy each lasting 5 in-patient days. This translates to 720 in-patient hours per patient. The resource utilisation analysis for an out-patient model of care showed that for 3 patients per year receiving EPOCH for non-Hodgkin Lymphoma, the savings would accrue to 90 bed days or 2160 in-patient hours per year.

Conclusion: EPOCH chemotherapy for non-Hodgkin Lymphoma is a strong candidate for transition to an outpatient model of care.

Contribution to the aims of the Auckland Academic Health Alliance

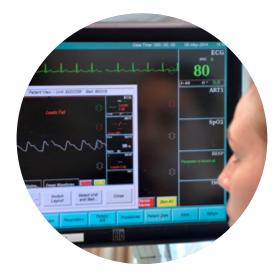
The project has supported the development of closer working relationships between the FMHS School of Pharmacy and Auckland DHB's Pharmacy department. These two organisations have set up an Academic Practice Unit which aims to combine the research expertise and capability of the School of Pharmacy with the clinical and pharmacy expertise of the hospital pharmacy to generate practice based medicines research aimed at improving patient outcomes, safety and experience.

This collaborative project was developed as a result of meetings to explore unmet needs within the hospital pharmacy sector; developing this database is seen as the first step in a unique collaborative approach to developing ambulatory chemotherapy infusion services. Future work will seek to expand the methodology to a range of other treatments which could be transferred from in-patient to ambulatory care.

Joining of hearts and minds – the cellular basis of Long QT

This pilot study focused on inherited Long QT Syndrome (LQTS), a relatively common condition where the heart does not recharge normally between beats. LQTS has a number of causative genotypes and varies greatly in severity, with 50% of people with LTQS never experience a symptom. However others may experience episodes of sudden loss of consciousness or at the most severe end, heart arrhythmia and sudden death. Symptoms are typically triggered by exercise stress or a fright or startle. There is a clinical need for accurate modelling tools so that factors that might predict disease severity, such as propensity for arrhythmia or response to medication, can be assessed scientifically and safely. This AAHA collaboration has harnessed the expertise and groundbreaking research of Swedish biologist and study team member Dr Annika Winbo. Dr Winbo brought with her to New Zealand five induced pluripotent stem (iPS) cell lines generated from Swedish LQTS patients. These are "master" cells that can potentially be reprogrammed to propagate any cell type in the body. If heart cells, cardiomyocytes, could be derived from these cell lines this would enable simulation of different heart stress events in the laboratory and aid development of LQTS risk and treatment models.

Aims: To create a multidisciplinary research team of scientists and clinicians to address the cellular basis of cardiac arrhythmias, with LQTS as the foundation project. This AAHA-funded project aimed to generate human cardiomyocytes from patient-derived iPS cell lines with the potential to model LQTS disease phenotype in the laboratory for the assessment of severity and treatability of different LQTS genotypes.



The team: Auckland DHB – Jon Skinner (Paediatric and Congenital Cardiac Service and Childhood Inherited Disease Group), FMHS – Johanna Montgomery and Annika Winbo (Department of Physiology)

The project: iPS cell lines from the controls and two of the LQTS patients were expanded and expanded clones were put through a cardiac differentiation process. Spontaneously beating cardiomyocytes were derived from controls and one patient line. These were maintained for 3-7 months in the laboratory. Immunocytochemical staining was performed to verify the presence of contractile elements in the cells. More than 100 electrophysiological recordings were performed on the differentiated cells under resting conditions and when blockers of IKs and IKr channels (implicated in LQTS) were applied. A novel adapted protocol to generate peripheral sympathetic neurons from iPS cells was developed.

The results: This AAHA project successfully achieved the formation of a new science-clinical collaboration team, combining scientific expertise from A/Prof Montgomery and Dr Winbo, with clinical expertise from Prof Skinner and Dr Winbo. Patient-derived blood cell to heart cell and blood cell to neuronal cell differentiation was established. Differentiated cardiomyocytes were evident as beating cells under the microscope. Successful recordings from these cells and physiological challenges indicated that elements of the functional loss of the donors (arrhythmia) can be reproduced in their iPS-derived cardiomyocytes in the laboratory.

The impact: This AAHA research grant has established not only a new collaboration, but also a unique multidisciplinary neuro-cardiac team of scientists and clinicians that together provide cellular physiology, cardiac physiology, genetics and clinical cardiac electrophysiology expertise. The project has provided the crucial proof of concept that patient-derived cells could enable direct genotype to phenotype correlations with LQTS patient clinical data, with potential for clinician feedback regarding arrhythmogenicity, risk and preventive factors.

Research Outputs

To read more about this cutting edge research, paste these links in your browser:

http://www.cidg.org.nz/2017/01/dr-annika-winbo-and-her-ground-breaking-research/

http://www.nzherald.co.nz/nationalvideo/news/video.cfm?c_id=1503075&gal_cid=1503075&gallery_id=170639

http://www.newshub.co.nz/home/health/2017/01/new-hope-for-child-heart-condition-patients.html

Busy ICU doctor is new Associate Professor

Dr Colin McArthur, a senior intensivist in the Department of Critical Care Medicine at Auckland City Hospital was made an Honorary Associate Professor in the Department of Anaesthesiology, University of Auckland, in 2016.

Dr McArthur is a dual qualified medical specialist (anaesthesia and intensive care) and it was his excellent research record for a busy clinician that prompted the department to nominate him. He has 85 publications in peer reviewed journals, including 10 in the New England Journal of Medicine and several in other prestigious journals including Journal of the American Medical Association, British Medical Journal, and Lancet.

Although these publications are often of collaborative multi-centre trials with large teams of investigators, Dr McArthur is often on the writing committee, and this represents an extremely impressive record of collaborative research.

He was involved in the application process for more than \$10 million in funds to support large multi-centre clinical trials, and was Vice Chair (2009-2012) and then Chair (2012-2015) of the Australia and New Zealand Intensive Care Society Clinical Trials Group.

This group has been very effective in securing funding for and conducting extremely influential clinical trials in intensive care medicine. He is the current Auckland DHB Clinical Advisor for Research and the Chair of the Auckland DHB Research Review Committee, committee. [Source – The University of Auckland]



FUNDING FOR RESEARCH

In 2016 Auckland DHB researchers and their colleagues have enjoyed considerable success in obtaining funding of more than \$18 million for their research from a variety of charitable and public-good sources.

A+ Trust Research Grants

The hallmark of a great hospital is having a research programme of excellence. The Auckland DHB Charitable Trust (the A+ Trust) is a major supporter of research and the culture of research and innovation. This culture is helping reshape healthcare for our patients to ensure that they receive the best care possible. A+ Trust Research Grants have been awarded annually via a contestable funding round since 2007. The funding has supported Auckland DHB researchers from all disciplines to undertake research across the health spectrum, from patients to population, disease to prevention, and service delivery. Applications are externally peer reviewed and assessed by the Research Review Committee for scientific merit, feasibility, rationale and methodology, deliverables, and opportunities to develop the capacity of new researchers in the organisation. Here are the successful applications for 2016.

A+ Trust Project and Small Project Grants

Kim Brackley and Amy Chan (Pharmacy) An exploratory study to investigate the medicines information needs of mental health and general medical adult inpatients at Auckland DHB (\$11,140)

Alison Burge and Alison Leversha (Community Child Health and Disability Services)- School readiness in Tamaki: The prevalence of health, developmental, behavioural, educational and social needs among new entrants in the Tamaki Community (\$49,980)

Amy Chan (Pharmacy) Retrospective study of antipsychotic use and hypersexuality (\$5,500)

Eileen Gilder (Cardiothoracic and Vascular Intensive Care Unit)- The endotracheal tube and endotracheal suction. An exploration of the patient experience in Adult Cardiac Surgical Intensive Care patients (\$4,090)

Jessica Harper (Community Child Health and Disability Service)- What Hinders and Enables Help Seeking

Behaviour in Parents Transitioning from Pregnancy to Parenthood (\$2,697)

Elizabeth Maxwell (Anaesthesia and Perioperative Medicine) - BCA-R Regional Anaesthesia and Breast Cancer Recurrence (\$40,000)

Brent McSharry (Paediatric Intensive Care Unit)- A single-centre, feasibility trial comparing Plasma-Lyte 148 (Registered Trademark) with 0.9% saline for all crystalloid fluid therapy in inpatients of a children's hospital requiring IV fluids (\$15,000)

Moira Nelson (Community Child Health and Disability Service)- Communication difficulties in primary school new entrants in Tamaki: The prevalence of speech and language problems, including the contribution of English as a second language and communication delays and disorders, in children beginning school in the Tamaki area (\$14,841)

Lynette Newby (Department of Critical Care Medicine) - A prospective multicentre observational study of aneurysmal subarachnoid haemorrhage in Australasian intensive care – PROMOTE-SAH (\$14,920)

Dick Ongley (Anaesthesia and Perioperative Medicine) - Frailty assessment for the older preoperative surgical patient in the anaesthetic assessment clinic: a multicentre prospective observational pilot study (\$25,000)

Jackie Robinson (Palliative Care)- Accessing palliative care services in the last year of life: local, regional and national data (\$14,175)

Josephine Stanton (Child and Family Unit) - A qualitative study of experiences young people and families report of admission to an acute adolescent mental health inpatient unit (\$15,000)

David Vokes (Department of Otorhinolaryngology Head & Neck Surgery)- Laryngeal injury and dysphagia after cardiac surgery (\$14,976)

Sasini Wijayaratne (Diabetes Service)- Investigating Clinical Outcomes in Youth Diagnosed with Type 2 Diabetes in the Auckland Region, in Comparison to their Type 1 Counterparts (\$7,000)

Michelle Wise (National Women's Health)- Outpatient balloon induction of labour: an RCT (\$49,653)

Tanya Wright (Child and Family Unit)- E-screening and clinical decision support for depression in pregnant mothers (\$49,558)

Chang-Ho Yoon (General Medicine)- Development and implementation of an app to support antimicrobial prescribing (\$50,000)

A+ Trust Summer Student Grants

Kim Brackley and Amy Chan (Pharmacy)- An exploratory study to investigate the medicines information needs of general medical adult inpatients at Auckland DHB

Tim Cutfield (Infectious Diseases)- How many patients with cellulitis are unnecessarily admitted to Auckland City Hospital?

Kevin Ellyett (Physiology)- Incidence of flow limitation during exercise in healthy adolescent females who experience dyspnoea on exertion

Kerry Gunn (Anaesthesia)- Massive Transfusion Registry Sub-Study: Early predictors of critical bleeding and massive transfusion in Liver Transplant patients

Alison Leversha (Community Child Health and Disability Service)- Health knowledge and transition readiness of young people with Rheumatic Fever

Gina O'Grady (Paediatric Neurology)- Microcephaly in New Zealand- Incorporating Zika virus into our diagnostic algorithm

Stephen Ritchie (Infectious Diseases)- Can an Infographic convey knowledge about the harmful effects of antibiotic treatment to consumers?

Jackie Robinson (Palliative Care)- How are ADHB services used by patients in their last 12 months of life?

Peter Ruygrok (Cardiology)- Intermediate term outcomes in patients with severe aortic stenosis discussed at the multidisciplinary "Heart Team" meeting according to treatment allocation

Sasini Wijayaratne (Diabetes Service)- Investigating Clinical Outcomes in Youth Diagnosed with Type 2 Diabetes in the Auckland Region, in Comparison to their Type 1 Counterparts

Auckland Academic Health Alliance Collaboration Fund

Mark O'Carroll (Respiratory Medicine), Raida Al-Kassas (University of Auckland) New and effective method for the treatment of cystic fibrosis using nanotechnology, an investigation into delivering sodium chloride therapy using inhaled nanoparticles. (\$100,000)

Andrew Old (Strategy and Participation), Merryn Gott (University of Auckland) End of Life Care Provision by Auckland DHB, an extensive survey on the end of life circumstances of terminal patients dying under the care of the Auckland District Health Board. (\$49,000)

Clinton Turner (LabPlus Pathology), Mike Dragunow (University of Auckland) Immune Cells in Meningioma, a retrospective observational analysis of the prognostic significance of tumour infiltrating lymphocyte and macrophage subsets. The particular focus is on the seven-year recurrence-free survival of patients with meningioma in Auckland (\$50,000)

Mark Webster (Cardiology), Susann Beier (University of Auckland) Coronary Artery Atlas, a study of coronary artery flow assessment in normal and pathological cases to improve stent strategy (\$100,000)

Accident Compensation Commission

Jennifer Weller and Alan Merry (Anaesthesia and Perioperative Medicine), Ian Civil (Trauma Service) - MORSIM – Multidisciplinary Operating Room Simulations – a national team training intervention for patient safety (\$98,000)

Auckland Medical Research Foundation

Emma Best (Starship Infectious Diseases) – Travel grant to attend the Infection and Immunity in Children Course and the Australia and New Zealand Paediatric Infectious Diseases Clinical Meeting, Perth

Doug Campbell, Tom Burrows, Cornelis Kruger and Tim Short (Anaesthesia) – Perioperative atrial fibrillation and postoperative stroke (PAFS) (\$30,743)

Justin Dean, Alistair Gunn (Newborn Services) – IGF-1 and preterm brain injury (\$158,997)

Harvey Ho, Peter Swan, **Adam Bartlett** (NZ Liver Transplant Unit), **Andrew Holden** (Radiology) – Augment reality aided liver ablation (\$110,139)

Louis Lao, George Laking (Oncology) – NIVORAD (\$104,454)

Rinki Murphy (Diabetes Service), Naomi Davies, Justin O'Sullivan, Lindsay Plank – Bariatric surgery and the gut microbiome (\$96,743)

Max Petrov, **Rinki Murphy** (Diabetes Service) – Hormonal markers of diabetes after acute pancreatitis (\$108,702)

Anna Ponnampalam, **Cynthia Farquhar** (National Women's Health) – Epigenetics of progesterone resistance in endometriosis (\$157,141)

Veronika Sander, Alan Davidson, **Rinki Murphy** (Diabetes Service) – HNF1B-associated disease in a human kidney organoid model (\$120,000)

Giuseppe Sasso (Radiation Oncology), Shankar Siva, Rebecca Montgomery – Stereotactic body radiotherapy in lung metastases. SAFRON II (\$25,000)

Clinton Turner (LabPlus Pathology), Mike Dragunow, Maurice Curtis – The prognostic significance of immune cell infiltrates in Meningioma (\$10, 432)

Mark Vickers, **Lesley McCowan and Katie Groom** (National Women's Health), Clint Gray – miRNAs as early predictors of preterm birth (\$114,379)

Andrew Wood (Paediatric Haematology and Oncology) - Douglas Goodfellow Repatriation Fellowship Extension – Developing zebrafish ETV6 models of acute myeloid leukemia (AML) for chemical suppressor screens (\$195,924)

Australia and New Zealand Gynadological Oncology Group

Michelle Wilson (Medical Oncology) - NEO Study – A Phase II, open label, randomized, multi-centre study of neoadjuvant olaparib in patients with platinum sensitive recurrent high grade serous ovarian, primary peritoneal or fallopian tube cancer

Australian and New Zealand College of Anaesthetists

Damien Castanelli, **Jennifer Weller** (Anaesthesia and Perioperative Medicine), Brian Jolly- Trusting our tools – use of WBA scores in ANZCA (\$50,000)

Jennifer Weller, Alan Merry (Anaesthesia and Perioperative Medicine) – Douglas Joseph Professorship. Multidisciplinary Operating Room Simulations (\$70,000)

Cure Kids

Katie Groom (National Women's Health), Chris McKinlay, **Frank Bloomfield** (Newborn Services), Trecia Wouldes, **Lesley McCowan** (National Women's Health) - STRIDER NZAus Childhood Outcome Study- Childhood outcomes of STRIDER NZAus: A Randomised Controlled Trial of Sildenafil Therapy in Dismal Prognosis Early-Onset Intrauterine Growth Restriction (New Zealand and Australia) (\$105,024)

Alison Leversha (Community Child Health and Disability Service)- Collective Impact: Working with children, whanau and their communities to improve health, development and school readiness among vulnerable children and families in the Tamaki Community (\$94,422)



The Welcome to School Team (including Dr Alison Leversha) – health and education collaboration at work in Panmure Bridge School

Alison Leversha (Community Child Health and Disability Service) Comparing the Old with the New: Randomised controlled trial of three different treatments for mild-to-moderate impetigo in children (\$200,000)

Can hydrogen peroxide cream be at least as effective as the increasingly anti-biotic resistant conventional treatment, Fusidic Acid?

What is the problem and who does it affect?

Serious skin infections have been among the top three reasons for admission to Starship and KidzFirst hospitals over the last 15 years. The effects are disproportionately borne by Pacific and Maori children, who are four – five times, and two – three times, more likely respectively to be admitted with serious skin infections than European children.

Skin infections are among the most common health issues affecting children in low decile schools, with increasing concern of the impact on school attendance and subsequent educational problems. The most common skin infection in schools is impetigo or 'school sores', affecting close to a third of children in schools in socioeconomically disadvantaged communities.

Currently, impetigo is treated with fusidic acid — an antibiotic cream applied to the surface of the skin. However, bacterial resistance to this medication is now approaching 30 percent causing concern about its ongoing use contributing to further antibiotic resistance. It is therefore necessary that alternative treatment options be examined.

What is the intervention hoping to achieve?

Dr Leversha, from Auckland's Starship Children's Hospital, will undertake an intervention which will recruit 480 children, aged five -13, who present with school sores at school-based health clinics. Dr Leversha will compare fusidic acid with an alternative treatment, hydrogen peroxide cream, applied to the skin infection, while also assessing these against simple wound care to help further illustrate potential benefits.]

If successful, the results of the study will inform evidence-based skin infection guidelines locally, nationally and internationally.

Genesis Oncology Trust

Avril Hull (Oncology)- To attend European Neuroendocrine Tumor Society meeting in Barcelona, Spain, from 8- 10 March 2017 (\$3,000)

Nicola Lawrence, **Michelle Wilson** (Oncology)- New Zealand One Day Concept Development Workshop (\$7,224)

Goldman Sachs Foundation Cancer Fellowship

Michelle Wilson (Oncology) (This Fellowship is awarded to a medical graduate committed to a clinical career with a major involvement in cancer medicine)

Green Lane Research and Education Fund

The Green Lane Research & Educational Fund was established at Green Lane Hospital in 1971 and incorporated under the Charitable Trusts act in 1976. Its aims then and now are to advance research and education within the departments of Cardiology, Cardiothoracic Surgery, Paediatric Cardiology and Surgery, Cardiothoracic Anaesthesia and Respiratory Medicine, within the Auckland District Health Board.

The Fund supports a Senior Research Fellowship, annual large and small project grants on a merit contested basis, a PhD Scholarship, conference support for nurses and technical staff and salary support for specified research positions. The Fund hosts an annual Scientific Session followed by the Green Lane Dinner, at which a past member or members' professional achievements are honoured.

Krish Chaudhuri (Cardiac Surgical Unit) - The COMCAB Study- predictive computer modelling to aid decision making for coronary artery bypass grafting strategies (\$50,000)

Tom Gentles (Paediatric and Congenital Cardiac Service) - To enable the introduction of pulse oximetry screening in a rural setting as part of a study investigating the feasibility of introducing a nationwide screening programme (\$19,992)

Eileen Gilder (Cardiothoracic and Vascular Intensive Care Unit) – PhD Scholarship: Suction or Not to Suction, that is the question (\$105,000)

John Kolbe (Respiratory Medicine)- Lung Clearance Index (LCI) Validating measures of airway dysfunction (\$20,000)

Rachael Parke (Cardiothoracic and Vascular Intensive Care Unit) – Senior Fellowship: Determine whether an IV fluid regime given to high risk patients following cardiac surgery, reduces ICU length of stay compared to usual care (\$100,000)

Kathryn Waddell-Smith (Paediatric and Congenital Cardiac Service) - To document reasons behind betablocker adherence, or lack thereof, amongst patients with familial long QT syndrome types 1 and 2 (\$20,000)

Mark Webster (Cardiology)- Fasting before coronary angiography and intervention (\$50,000)

Health Research Council of New Zealand

Frank Bloomfield (Newborn Services)- Feeding preterm babies for life-long health (\$4,999,704)

Cameron Grant (General Paediatrics)- Effect of early childhood ear infections on language, cognition and behaviour (\$1,191,663)

Sandra Hotu (Respiratory Medicine)- A model of care for Māori and Pacific people with chronic airways disease (\$240,000)

Colin McArthur (Department of Critical Care Medicine) - Platform trial optimising interventions in severe community acquired pneumonia (\$4,814,924)

Colin McArthur (Department of Critical Care Medicine)-Pre-hospital anti-fibrinolytics for traumatic coagulopathy and haemorrhage (\$943,384)

Shay McGuinness (Cardiothoracic and Vascular Itensive Care Unit)- Transfusion requirements in patients for cardiac surgery- TRiCS III (\$1,199,468)

Rinki Murphy (Diabetes Service)- Probiotics for prediabetes: Dose-ranging and MRI feasibility study (\$149,209)

Ralph Stewart (Cardiology)- Improving outcomes of patients with atrial fibrillation in primary care (\$1,196,335)

Li Family Cancer Research Grant

Michelle Wilson (Oncology)- PROSPER – Profiling of Oncology Patients as part of Clinical care and Research (\$480,000)

National Heart Foundation

Rachael Parke (Cardiothoracic and Vascular Intensive Care Unit) - After Bypass - the FAB study Fluids (\$133,280)

Royal Australasian College of Physicians

Michael Collins (Renal Services) – Jacquot Research Establishment Fellowship (\$90,000)

+++NEWSFLASH!+++NEWSFLASH!+++

A new multimillion dollar clinical trial involving infants born at Auckland, Middlemore and Wellington hospitals will aim to find out if using paracetamol in infancy to treat pain and fever is associated with childhood asthma.

Paediatric emergency medicine specialist at Starship Children's Hospital, Dr Stuart Dalziel, has received a \$4.99 million programme grant from the Health Research Council of New Zealand (HRC) to carry out the trial – the first of its kind in the world. Hosting an elite programme grant will be a first for Auckland District Health Board (Auckland DHB). Auckland DHB researchers have had considerable success with HRC project grants and career development awards, but the scope of this research and the level of funding are unprecedented. The study will run for 11 years and involve 3.900 infants and their families / whānau. Dr Dalziel will lead the trial alongside a highly experienced team of asthma and child health experts from Counties Manukau District Health Boards, Medical Research Institute of New Zealand (Wellington), and the universities of Auckland, Otago and Calgary (Canada).

Despite considerable investment in basic science and genetics research, asthma remains a common, chronic condition with no cure. The scientific focus is now on prevention. Dr Dalziel says he is thrilled to receive this HRC programme grant as there is an urgent need for research that leads to evidence-based primary prevention strategies to reduce the prevalence of asthma in children.

"To date, randomised controlled trials looking at the primary prevention of asthma have focused on dietary modification, probiotics, encouraging breast feeding, and avoidance of environmental triggers such as tobacco smoke, house dust mites and other allergens. Unfortunately, none of the intervention strategies trialled has provided sufficient evidence to lead to widespread public health intervention programmes," says Dr Dalziel.

The rationale for the programme study comes from the highly respected International Study of Asthma and Allergies in Childhood (ISAAC), the largest international epidemiological study of childhood asthma. The ISAAC study, which included data from over 200,000 children in 31 countries, has suggested that paracetamol given in the first year of life may influence the risk of developing later asthma. However, Dr Dalziel says that it is unclear if this finding is due to paracetamol itself or to the illness that led to it being given – for example, a chest infection.

"With this new trial, we will definitively answer whether paracetamol treat-ment, compared with ibuprofen treatment, as required for pain and fever in the first year of life, increases the risk of asthma at age six years," says Dr Dalziel.



Dr Stuart Dalziel

Paracetamol is the most commonly prescribed and over-the-counter medication dispensed to children in the first year of life, both in New Zealand and the developed world.

HRC Director of Strategy and Policy Dr Tania Pocock says asthma rates in New Zealand remain stubbornly among the highest in the world. One in seven children and one in nine adults receives treatment here for asthma, and Māori and Pacific children are disproportionately affected.

She says the results from this programme will be of relevance to all parents and health care providers who see young infants.

"If the results confirm that there is an association between paracetamol in infancy and later asthma, we will have the evidence for a public health intervention that has the potential to reduce New Zealand's high rate of asthma. If, on the other hand, the results don't confirm an association, it will provide reassurance to parents and medical professionals that this most commonly used medicine is safe," says Dr Pocock.

(Dr Stuart Dalziel has established paediatric emergency medicine (PEM) research in New Zealand and is a recognised international leader in the field. He is currently the deputy chair of the global PEM research network and chairs the Paediatric Research in Emergency Departments International Collaborative (PREDICT), a network of children's hospital emergency departments in Australia and New Zealand. Dr Dalziel currently leads a HRC clinical practitioner research fellowship study and project grant.)

(Article courtesy of the Health Research Council of New Zealand)]

Starship Foundation Clinical Research Fund



Starship Child Health and the Starship Foundation share a vision to create, at Starship, an environment of world-class research, training and innovation. In 2016, that vision took an important step forward with the announcement of a significant new investment in paediatric clinical research.

Subsequent to that announcement, seven projects were selected through the inaugural assessment round, receiving a total of \$570,000 from the Starship Foundation. The seven successful projects tackle a broad range of important child health challenges, such as the high incidence of teenage suicide and depression, the incidence of brain injury and neurodevelopmental delays in infants requiring life-saving heart surgery and poor dental health in New Zealand's preschool children.

While the Foundation has funded various research projects in the past, in addition to their longstanding contribution to Starship projects such as building refurbishments, equipment and staff training and development, the new investment in clinical research represents a significant strategic shift for the Foundation. The investment was designed to enable our national children's hospital even greater ability to lead the way in evidence-based care and improved health outcomes for New Zealand's children and while all the lead investigators work in Starship Child Health, the Foundation is keen to support collaboration across the country.

The successful recipients are Dr Katie Bach (Starship Oral Health Service) and Prof Cameron Grant (General Paediatrics); Dr Gina O'Grady (Paediatric Neuroservices); Hiran Thabrew (Starship Consult Liaison); Dr Paul Baker (Starship Paediatric Anaesthesiology); Dr Tom Gentles, (Paediatric and Congenital Cardiac Services); Dr Anusha Ganeshalingham (Paediatric Intensive Care Unit) and Dr Sarah Missen (National Metabolic Service).

The new clinical research funding announced at the end of 2016 included a special award named in memory of Athlae Lyon, a long standing supporter of Starship through her involvement in the Starship Foundation. The Athlae Lyon Starship Research Trust has been critical to the foundational support for research, previously

funding senior research fellowships. The trustees chose Dr Gina O'Grady's research into the use new genomic technologies to improve the diagnosis, treatment and prevention of inherited brain and muscle disease as the recipient of the Athlae Lyon Starship Clinical Research Award for 2017.

Both the Starship Foundation and Starship Child Health are now looking to build on this great base and raise the critical funds required to boost the research aspirations of the skilled child health teams at Starship.



Dr Gina O'Grady, pictured here with her young patient Peter, has been awarded research funding by the Starship Foundation thanks to the support of the Athlae Lyon Starship Research Trust. Previously Dr O'Grady has held a Starship Foundation Training Fellowship.

Clinical Research Project Grants awarded in 2016

Katie Bach (Starship Oral Health Service) and **Cameron Grant** (General Paediatrics)- Oh to be able to open wide and smile

Paul Baker (Starship Paediatric Anaesthesiology)- A randomised controlled clinical trial of using Transnasal Humidified Rapid-Insufflation Ventilatory Exchange (THRIVE) to ventilate paediatric patients undergoing microlyngoscopy and bronchoscopy

Anusha Ganeshalingham (Paediatric Intensive Care Unit)- The importance of mean arterial blood pressure in the development of brain injury in infants requiring cardiac surgery

Tom Gentles (Paediatric and Congenital Cardiac Services)- Pulse oximetry screening for the detection of critical congenital heart disease in newborn infants: a study assessing feasibility of a national screening programme

Sarah Missen (National Metabolic Service)- A retrospective audit of patients diagnosed with Mitochondrial Disease in New Zealand from 2000 to 2015

Gina O'Grady (Paediatric Neuroservices)- Genomic technologies for diagnosis and gene discovery in paediatric neurogenetic disease (The Athlae Lyon Starship Clinical Research Award for 2017).

Hiran Thabrew (Starship Consult Liaison)- Acceptability and utility of electronic screener YouthCHAT for young people with long-term physical conditions attending Starship and Year 9 Tamaki High School students and its comparison with HEEADSSS assessment.

Other research funding provided in 2016

Athlae Lyon Starship Research Fellowship - **Dr Craig Jefferies** (Paediatric Endocrinology)

Athlae Lyon Starship Research Fellowship - **Dr Naveen Pillarisetti** (Paediatric Respiratory) completed June
2016

Andrew Thompson (Consult Liaison) – Extraordinary children

Dr Craig Jefferies (Paediatric Endocrinology)- Type 1 Diabetes TrialNet Study

Tamaki Redevelopment Company

Alison Leversha (Community Child Health and Disability Service) School Readiness in Tamaki (\$40,000)

University of Auckland

Richard Faull, **Alan Barber** (Neurology), Lynette Tippett – University of Auckland Foundation / Seelye Fellowship (\$13,000)

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Celebrating Our People 2016





CELEBRATING OUR PEOPLE

Auckland DHB Research Excellence Award

This award, offered annually in conjunction with ADHB HealthExcellence Awards, recognises lead authors of significant, original research papers published in the preceding year. Applications are judged by a panel of top researchers for contribution to new knowledge, potential to inform best practice, stakeholders and clinical decision making, and potential to improve healthcare delivery.

2016 Winner

Michelle Wise and team (National Women's Health) – BEC1: Body mass index trumps age in decision for endometrial biopsy.



Dr Michelle Wise (third from left) with Professor Cindy Farquhar, A/Prof John Thompson and Dr Premjit Gill

Project team: Dr Michelle Wise, Dr Premjit Gill, Sarah Lensen, Assoc Prof John Thompson, Prof Cindy Farghar.

Reference: American Journal of Obstetrics and Gynecology 2016;215:598.e1-8.

The objective of this study was to evaluate the effect of body mass (BMI) on the risk of endometrial hyperplasia (pre-cancer) or cancer. A retrospective cohort study at National Women's Health of 916 pre-menopausal women referred for abnormal uterine bleeding, who had an endometrial biopsy between 2008 and 2014, found that 4.9 per cent had complex endometrial hyperplasia or cancer. Women with a BMI of 30kg/m² or more were four times more likely to develop complex hyperplasia or cancer. Other risk factors were not having any children, and anaemia; age was not a risk. In conclusion, obesity was found to be an important risk factor in women with abnormal uterine bleeding. Considering that more than half the women with complex hyperplasia or cancer were under 45 years of age (most were in their 20s and 30s, an unexpected finding), deciding to biopsy based primarily on age, as is currently recommended, potentially misses many cases or delays diagnosis. BMI should, therefore, be the first consideration in the decision in whether to perform endometrial biopsy and to refer to secondary gynaecology services.

According to Professor Farquhar "We will be able to focus on a younger group of women with high BMI and get them investigated appropriately. The real benefit is going to be in reducing inappropriate testing for women with abnormal uterine bleeding in this age group and we'll be able to incorporate this into clinical pathways and hopefully a national guideline."

Finalist:

Prof Ed Gane, Dr Fahimeh Rahnama and team (Liver Transplant Service and LabPlus Virology)- Hepatitis B infection in New Zealand Māori

Reference: Serological and clinical outcomes of horizontally transmitted chronic hepatitis B infection in New Zealand Maori: results from a 28-year follow-up study. Gut, doi:10.1136/gutjnl-2013-306247

Dr Rahnama "The main objective of this project was to identify new predictors of liver cancer in Maori living with hepatitis B which can be used in clinical practice to improve the government funded surveillance programme in almost 120,000 New Zealanders living with hepatitis B." "Currently we have about 100 cases a year of liver cancer related to Hepatitis B but only one quarter of them are detected early enough to be able to have any type of treatment and the remainder have a life expectancy of less than six months. Now every new referral with hepatitis B will be able to be prioritised for life time risk of liver cancer, and their later follow up individualised according to their risk. Early detection of liver cancer will increase the number of patients who can come to Auckland City Hospital for curative liver transplantation".

Finalist:

Dr Natasha Heather (Paediatric Endocrinology), Dr Dianne Webster (Chemical Pathology, LabPlus) and team – Newborn screening for endocrine disorders

Reference: Newborn screening for congenital adrenal hyperplasia in New Zealand, 1994-2013. J Clin Endocrinol Metab, March 2015, 100(3):1002–1008.

Dr Heather "We wanted to see whether newborn screening for CAH or congenital adrenal hyperplasia is a useful thing to do. This is a birth defect where the adrenal gland is unable to produce a number of essential hormones and because of this, babies can die or become extremely unwell in the first few weeks of life, but on the other hand if you know about it, it's a very treatable condition". "What we have found is that babies who are picked up by screening benefit greatly from early diagnosis. Early diagnosis of this condition prevents death, serious illness and long-term consequences like intellectual impairment, and what we have shown is that newborn screening picks up babies early enough so that they are still well or have very minimal symptoms".

Best Research Posters

Auckland DHB Celebration Week (final week of November) was the occasion, and ACH Level 5 Atrium was the venue, for the 2016 Research Poster Competition displays. Continuing the success of previous years, over 60 posters were on display, showcasing the commitment of our staff to research, and our expertise across a diverse range of disciplines and topics. Winners for the four judging categories are below;

Health Professions (Allied, Scientific, Technical)

Winner:

Amy Chan (Pharmacy)- Runner Up: **Barbara Cormack** (Nutrition and Dietetics)

Medical

Nicola Culliford-Semmens (Paediatric and Congenital Cardiac Service) - Runner Up: **Alana Ainsworth** (Paediatric Respiratory Department)

Nursing

Laurelle Breen, Heather Cave, Kirsty Jackson and Sele Vave Patterson (Community Child Health and Disability Service)- Runner Up- Susan Atherton (Department of Critical Care Medicine)

Starship Best Children's Reseach Poster

Amy Chan (Pharmacy)-Runner Up: **Rachel Webb** (Paediatric Infectious Diseases Department). We gratefully acknowledge the continued support of this competition by the Starship Foundation



Starship Foundation Research Poster winner Dr Amy Chan

Allied Health, Scientific and Technical Awards

The Awards celebrate the enormous contribution these services make to our patients and to Auckland DHB. There are 1800 people working across 49 professions in Allied Health, Scientific and Technical Services.

The 2016 Clinical Support Research Award went to;

Winner:

Jill Depledge (Women's Health Physiotherapy)

Runner up:

Barbara Cormack (Neonatal and Paediatric Dietetics)

Auckland DHB Young Investigator Award

The quality and impact of research undertaken by our junior clinical staff was also highlighted with the oral presentations for the Young Investigator Award, 2016. Five outstanding candidates were selected from a competitive field of entries by a multidisciplinary panel. The Physicians Grand Rounds, held at the Clinical Education Centre Auditorium, was attended by a large number of clinical and academic staff both past and present to hear the finalists' presentations, which are listed below.

2016 finalists

Cathrine Patten, The ERUPT Study – Evaluating the rate of undiagnosed Type 2 diabetes in patients referred for coronary angiograms

Lily Wu, Long-term Outcome after Curative Treatment for Hepatocellular Carcinoma: A Single Institution Intention-to-Treat Analysis of Orthotopic Transplantation Versus Liver

Nick Eichler, Investigation of the effect of a schoolbased nursing intervention on hospitalisations with skin infections

Suzanne Lydiard, Real-time adaptive cardiac and respiratory motion compensation for Cardiac Radiosurgery to non-invasively treat Atrial Fibrillation – a feasiibility study

Lily Wu was judged the winner and **Suzanne Lydiard** the runner-up. Prizes for the winner and runner up were generously donated by the A+ Charitable Trust



2016 Young Investigator winner Lily Wu



2016 Young Investigator Runner Up Suzanne Lydiard presents her research

Clarivate Analytics Highly Cited Researchers 2016

Congratulations to **Professors Ed Gane** (NZ Liver Transplant Unit) and **Harvey White** (Cardiology) who made it onto Clarivate Analytics Highly Cited list in 2016. Only a handful of New Zealand researchers made it onto the list.

Perinatal Society of Australia and New Zealand Research Awards (PSANZ)

The PSANZ annual conference showcases cutting-edge research into improving the health and long-term outcomes for mothers and their babies. At the 2016 meeting PhD candidate and neonatal and paediatric dietician **Barbara Cormack** won three awards for her two presentations:

2016 New Investigator Award Best Oral Presentation - Allied Health

2016 Best Poster in Allied Health

2016 Nutrition Research Award for best nutrition-related abstract

Sanitarium Innovator of the Year

World renowned hepatologist, academic Professor Ed Gane, was named the Sanitarium Innovator of the Year at the 2017 New Zealander of the Year Awards. Professor Ed Gane was honoured for his innovative contributions to the development of a cure for Hepatitis C.



Professor Ed Gane

He is the Deputy Director and Hepatologist of the New Zealand Liver Transplant Unit at Auckland City Hospital and an Adjunct Professor of Medicine at the University of Auckland.

For a number of years, Professor Gane supervised meticulous drug trials on Kiwi volunteers with chronic Hepatitis C. He trialled various combinations of different antivirals until he finally got the results he was looking for.

Due to Professor Gane and his international colleagues' innovative work and perseverance, almost everyone with Hepatitis C can now be cured with a short course of tablets. The World Health Organisation recently announced that more than one million people have already been cured with these new drugs and that global eradication of Hepatitis C should now be achievable within the next 30 years.

This outstanding advance in treatment of Hepatitis C will have a future global impact at a similar scale that the Polio vaccine developed by Jonas Salk has had since 1955.

[Source – University of Auckland]

Summer Students Awards 2016

Student researchers work at Auckland DHB during the summer months each year. These studentship projects are well regarded as being one of the best ways to utilise local talent to find out things Auckland DHB is interested in knowing, and for a very small investment. The A+ Trust supports Auckland DHB staff to devise projects which will answer important clinical question by funding stipends for student workers. Ten of these projects were active in the summer of 2016-2017. The scheme runs under the auspices of the Auckland Academic Health Alliance, with the Faculty of Medical and Health Sciences administering the grants. The end-of-project reports prepared by the students were recently assessed for scientific quality by an expert panel. The winner and runner up of the 2016 A+ Trust Summer Studentship prize for best students' reports were;

Hannah Walter (winner), supervised by Tim Cutfield and Stephen Ritchie (Infectious Diseases Department) "How many patients with cellulitis are unnecessarily admitted to Auckland City Hospital?"

Alaina McGoram (runner up), supervised by Kevin Ellyett (Respiratory Physiology Laboratory) "Incidence of flow limitation during exercise in healthy adolescent females who experience dyspnoea on exertion"

NEW RESEARCH UNDERWAY

Auckland DHB researchers are instigators and leaders of projects in almost all clinical and support services of the organisation. Many participate in international, collaborative, multi-centre studies, and incommercially funded clinical trials of pharmaceuticals and medical devices. ADHB also provides essential resources and partnerships for researchers from other organisations.

Below is presented a snapshot of more than 300 new research projects that commenced at Auckland DHB in 2016, along with the lead investigator.

Allied Health - Audiology, Nutrition, Pharmacy,

Physiotherapy, Social Work, Speech & Language:

Sally Cain - Quality improvement project on falls in Greenlane Clinical Centre

Amy Chan - An exploratory study to investigate the medicines information needs of mental health and general medical adult inpatients at Auckland DHB

Amy Chan - Retrospective Study of Antipsychotic use and Hypersexuality

Eamon Duffy - Determining pharmacokinetics of antibiotics in pus

Sinead Ennis - Clinical notes audit to monitor the introduction of best practice guidelines for amputee management following major lower limb amputation

Lyn Lloyd - International study concerning dietetic implementation of the Nutrition Care Process and Terminology

Amanda Meinhardt - What are the factors that impact upon the use of Motivational Interviewing skills following a two-day training in Motivational Interviewing in a health setting

Anaesthesia – Adult, Cardiothoracic, National Women's and ORL:

Allan Brown - Hepcon HMS use with patients undergoing cardiac surgery

Douglas Campbell - Trial of direct or video-laryngoscopy for endotracheal intubation during surgery: MAC-V

Tin Chiu - The use of post-operative regional analgesia rather than systemic analgesia to decrease the incidence of post-operative delirium after acute hip fracture surgery? A prospective randomised-controlled double-blinded pilot study

Rachel Donegan - Prothrombinex-VF use and compliance with the 2013 update Consensus Guidelies for Warfarin Reversal

Matthew Drake - Comparing 0.125%, 0.1% and 0.0625% Bupivacaine with 2mcg/ml Fentanyl for maintenance of epidural analgesia on delivery unit at National Women's Hospital, Auckland

Mark Fisher - The Outcome of Anaphylaxis Following Anaesthesia at a Large New Zealand Teaching Hospital

Veronica Gin - Study of Emergency Response for Intraoperative Anaesthesia Critical Events on Level 8 Operating Rooms (Red-Bell)

Ben Griffiths - ELQuIIS Emergency Laparotomy Quality Improvement Interventional Study

Kerry Gunn - Massive Transfusion Registry Sub-Study: Massive Transfusion in Liver Transplant Patients

Alison Jackson - Patient-reported Perioperative Experiences in New Zealand: A Prospective analysis of patient-reported experience measures in multiple centres throughout New Zealand. PREM

Gemma Malpas - Retrospective review of the anaesthetic management for thrombectomy in acute ischaemic stroke

Alan Merry - An observational study of current practices in preoxygenation among anaesthetists

Alan Merry - Measuring Surgical Outcomes using Days Alive and Out of Hospital

Alan Merry - Does high-flow transnasal humidified rapid-insufflation ventilatory exchange (THRIVE) improve the Reliability of routine preoxygenation before induction of anesthesia?

Martin Misur - The Perioperative ADministration of Dexamethasone and Infection - PADDI Trial

Simon Mitchell - The impact of the ADHB Surgical Safety Checklist paradigm change on the incidence of specimen labelling errors

Dick Ongley - Frailty assessment for the older preoperative surgical patient in the anaesthetic assessment clinic: a multicentre prospective observational pilot study

Keith Petrie - Can a nocebo explanation reduce side effect reporting after intravenous iron infusion? IV Iron Nocebo Study Tim Short - A Phase 3, Randomized, Double-Blind, Placebo-Controlled, Multicenter, Evaluation of the Safety of N1539 Following Major Surgery (REC-15-017)

Jay van der Westhuizen - The effect of Upfront Administration of Fibrinogen concentrate in Obstetric Haemorrhage. FIB-Up-Front

Craig Webster - Understanding possible differences in cognitive load in anaesthetists using two models of anaesthetic machine Jennifer Weller - Safety and team cultures in the operating room: using WHOBARS to understand clinician attitudes to participation in the Surgical Safety Checklist

Anaesthesia (Starship):

Morgan Edwards – 30-day post-operative mortality in paediatric patients undergoing surgery at Starship Hospital between January 2010 and December 2015

Graeme Knottenbelt - Assessment of Starship OR medical staff Chest Compression Quality before and after visual feedback educational intervention using Paediatric QCPR Mannequin.

Cardiology (Adult):

Ammar Alsamarra'i - Balloon aortic valvuloplasty for the treatment of severe aortic stenosis

Ammar Alsamarra'l - Spontaneous coronary artery dissection

Jocelyne Benatar - A Randomized, Double-blind, Placebocontrolled Study to Evaluate the Effect of AMG 334 on Exercise
Time During a Treadmill Test in Subjects with Stable Angina

Jocelyne Benatar - A phase III, double-blind, randomized placebo-controlled study to evaluate the effects of dalcetrapib on cardiovascular (CV) risk in a genetically defined population with a recent Acute Coronary Syndrome (ACS)

Elizabeth Broadbent - The experience of caring for people with heart or lung disease

Rob Doughty - A Randomized Parallel-Group, Placebo-Controlled, Double-Blind, Event-Driven, Multi-Center Pivotal Phase III Clinical Outcome Trial of Efficacy and Safety of the Oral sGC Stimulator Vericiquat in Subjects With Heart Failure

Margaret Hood - Understanding Outcomes with the EMBLEM S-ICD System in Primary Prevention patients with Low Ejection Fractions

Liji Jose - A clinical audit of nursing care practice and patient experience in the first 24 hours post radial artery sheath removal

Ralph Maddison - Text messaging to enhance self-management of cardiovascular disease

Kelly Reynish - A review of Automatic External Defibrillators issued to patients by Auckland City Hospital

Peter Ruygrok - Safety and Efficacy of the CARILLON Mitral Contour System in Reducing Functional Mitral Regurgitation (FMR) Associated with Heart Failure

Peter Ruygrok - Intermediate term outcomes in patients with severe aortic stenosis discussed at the multidisciplinary "Heart Team" meeting according to treatment allocation

Warren Smith - Oral anticoagulant usage in patients presenting with atrial fibrillation and stroke

Jim Stewart - FAST Feasibility Study: Fully Absorbable Scaffold Feasibility Study

Ralph Stewart - All New Zealand Acute Coronary Syndromes Quality Improvement Registry Trial of Oxygen Therapy

Tom Wang - Outcomes and risk models of surgery for aortic dissection

Mark Webster - Coronary artery flow assessment in normal and pathological cases to improve stent strategy by identification of risk predictors by patient profiling

Mark Webster - Biotroniks - Safety and Performance in de Novo Lesion of Native Coronary Arteries with Magmaris - Registry

Susan Wells - Identifying the online health information needs for cardiology patients with in-depth exploration of women's needs and experiences: a mixed methods study

Alistair Young - Cardiac MRI Database and Registry

Cardiology (Starship):

Tom Gentles - Improving functional outcomes after Fontan surgery by a cross-sectional study of the outcomes following variation in practice in Australia and New Zealand: focus on anticoagulation and cardiac shunting by the fenestration

Tom Gentles - Pulse oximetry for the detection of congenital heart disease in newborn infants: a study assessing feasibility of a national screening programme

Andrew Martin - Defibrillation Testing at the Time of Cardioverter Defibrillator Implantation in Pediatric and Congenital Heart Disease Patients

Cardiothoracic Surgical Unit:

Ghaz Jabur - Does emboli exposure associated with cardiopulmonary bypass alter cerebral autoregulation?

Paget Milsom - An audit of routine postoperative outcomes for the Sildenafil during CABG Operations to Reduce Endpoints for patients with Coronary ARtery Disease (SCORECARD) project

Cardiothoracic and Vascular Intensive Care Unit:

Eileen Gilder - The endotracheal tube and endotracheal suction: an exploration of Adult Cardiac Surgical Intensive Care patient's experience

Shay McGuinness - PneumoINSPIRE - International study on Nosocomial pneumonia in intensive care

Shay McGuinness - Standard versus Accelerated initiation of Renal Replacement Therapy in Acute Kidney Injury (STARRT-AKI): A Multi-Centre, Randomized, Controlled Trial

Shay McGuinness - Proton Pump Inhibitors vs. Histamine-2 Receptor Blockers for Ulcer Prophylaxis Therapy in the Intensive Care Unit (PEPTIC)

Rachael Parke - Fourth international study of mechanical ventilation - ISMV study

Rachael Parke - A Multi-centre, Open Label, Randomised Controlled Trial to Compare a Conservative Fluid Management Strategy to Usual Care in Participants after Cardiac Surgery - The FAB study

Kevin Peek - Audit of post-cardiac patients' EWS following discharge from the CVICU to ward 42

Laurence Walker - Management of glucose level in Cardiovascular Intensive Care Unit patients at Auckland District Health Board

Critical Care Medicine:

Yan Chen - AuStralaSian Evidence Translation in Traumatic Brain Injury

Colin McArthur - Short Period Incidence Study of Severe Acute Respiratory Infection (SPRINTSARI)

Colin McArthur - Australasian Management of Acute Liver Failure Investigation (AMALFI)

Colin McArthur - The Augmented vs. Routine approach to Giving Energy Trial: a randomised controlled trial. TARGET
Colin McArthur - A Phase 3, Placebo-Controlled, Randomized,
Double-Blind, Multi-Center Study of LJPC-501 in Patients with

Catecholamine-Resistant Hypotension (CRH)

Dermatology:

Steven Lamb - Australasian Psoriasis registry

Diabetes Service (Adult)

Amy Liu - Evaluation of a Type 1 Diabetes self-management education programme - Dose Adjustment For Normal Eating (DAFNE)

Simon Speight - The Three Great Pathologies of diabetic foot disease an Interpretative Phenomenological Analysis Study

Sasini Wijayaratna - Investigating Clinical Outcomes in Youth Diagnosed with Type 2 Diabetes in the Auckland Region, in Comparison to their Type 1 Counterparts

Diabetes and Endocrinology (Starship)

Wayne Cutfield - The effects of maternal preeclampsia on offspring metabolism

Natasha Heather - Defining the TSH reference interval on newborn screening blood spots

Paul Hofman - An Openlabel, Single Arm, Multicenter Study on the Efficacy, Safety, and Pharmacokinetics of Leuprolide Acetate 45 mg for Injectable Suspension Controlled Release in Subjects with Central (GonadotropinDependent) Precocious Puberty

Paul Hofman - NN8022-4179: Effect of liraglutide for weight management in paediatric subjects with Prader-Willi Syndrome **Paul Hofman** - A multicenter, Phase 3, randomized, open label, active controlled, parallel group trial investigating the safety, tolerability, and efficacy of TransCon hGH administered once a week versus standard daily hGH replacement therapy

Rosalie Hornung - Diabetes transition service, 2006-2013

Craig Jefferies - The incidence and clinical features of adolescents with type 2 diabetes, Auckland 2007-2015

Craig Jefferies - THE QT AND CGMS STUDY: Evaluating QT interval in Type 1 DM with day to day variation in Glucose excursions on CGMS

Craig Jefferies - The prevalence of abnormalities in cardiac function in Duchenne Muscular Dystrophy boys without overt cardiac disease

Emergency (Adult):

Nicole Chien - Assess current practice of co-administering medication and blood components at ADHB

Mark Le Fevre - The effect of stress management training on stress, and heart rate variability in emergency medical teams

Natalie Thorburn - Sex Trafficking and Forced Prostitution in Aotearoa New Zealand

Emergency (Starship):

Stuart Dalziel - PREDICT Project 4: Understanding practice: factors that influence bronchiolitis management in Australasian paediatric acute care settings — a qualitative study using the Theoretical Domains Framework

Stuart Dalziel - Bell's Palsy in Children: A Multi-Centre, Randomised, Blinded, Placebo-Controlled Trial To Determine Whether Prednisolone Improves Recovery At 1 Month. (BELL-PIC)

Stuart Dalziel - Knowledge Translation in Australasian Paediatric Acute Care Settings: a multicentred, cluster, randomised controlled trial comparing a tailored, theory informed Knowledge Translation intervention versus passive dissemination of a bronchiolitis quideline

Gastroenterology (Adult):

Mark Lane - A Multicenter, Randomized, Double-Blind, Placebo-Controlled Study of ABT-494 for the Induction of Symptomatic and Endoscopic Remission in Subjects with Moderately to Severely Active Crohn's Disease who have Inadequately Responded

David Orr - "Randomized Global Phase 3 Study to Evaluate the Impact on NASH with FibRosis of Obeticholic Acid TreatmEnt Clinical Study Protocol 747-303

Maggie Ow - The potential impact of gut microbiota on insulin sensitivity post-bariatric surgery

Keith Petrie - Can changing standard preparation to include an explanation of the Nocebo effect reduce side-effect reporting after a colonoscopy?

David Rowbotham - A multidisciplinary human study on the genetic, environmental and microbial interactions that cause Inflammatory Bowel Disease

Gastroenterology (Starship):

Alicia Lim - Transplant acquired allergies in the paediatric liver transplant cohort in New Zealand

General Medicine:

Lynne Weir - The experience of emotional stress following delerium: exploring the experience of delerium and its effects after discharge on the hospitalised older adult

Haematology (Adult):

Shanee Chung - Retrospective review of the use of DA induction protocol for older patients with acute myeloid leukaemia at first presentation at Auckland DHB

Timothy Hawkins - Phase 3 Randomized, Double-Blind, Placebo-Controlled, Multi-Center Study to Compare the Efficacy and Safety of Lenalidomide (CC5013) Plus R-CHOP Chemotherapy (R2-CHOP) Versus Placebo Plus

Timothy Hawkins - Adults with Acute Myeloid Leukaemia or High Risk Myelodysplastic Syndrome (AML 19)

Kiri Mann - Patient Experience of Living with Cancer Associated Thrombosis in New Zealand

Paul Ockelford - A Randomized, Open-Label Study to Evaluate the Pharmacokinetics and Safety of Recombinant Factor VIII Fc Fusion Protein (rFVIIIFc; BIIB031) Manufactured at 15K Scale and at Different Vial Strengths in Previously Treated Subjects with Severe Hemophilia A

Haematology/Oncology (Starship):

Peter Bradbeer - AALL1231: A Phase III Randomized Trial Investigating Bortezomib (NSC# 681239; IND# 58443) on a Modified Augmented BFM (ABFM) Backbone in Newly Diagnosed T- Lymphoblastic Leukemia (T-ALL) and T- Lymphoblastic Lymphoma (T-LLy)

Peter Bradbeer - Risk-stratified randomised Phase III testing of Blinatumomab (IND#117467, NSC#765986) in first relapse of childhood b-lymphoblastic leukaemia (B-ALL). AALL1331

Nyree Cole - COG AAMI1331 A Phase III study for Patients with Newly Diagnosed Acute Promyelocytic Leukaemia (APL) using Arsenic Trioxide and All-Trans Retinoic Acid

Stephen Laughton - Incidence and Survival of Childhood Melanoma in Australia and New Zealand

Tim Prestidge - MK-3475: A Phase I/II Study of Pembrolizumab (MK-3475) in Children with advanced melanoma or a PD-L1 positive advanced, relapsed or refractory solid tumour or lymphoma (KEYNOTE-051). Keytruda Paediatric

Tim Prestidge - EuroNet-PHL-C2: Second International Inter-Group Study for Classical Hogkin's Lymphoma in Children and Adolescents

Lochie Teague - A retrospective analysis of total body irradiation-based conditioning regimes in haematopoietic stem cell transplantation for paediatric patients with acute lymphoblastic leukaemia. (TRB in ALL)

Mark Winstanley - COG AOST1421: A Phase II Study of Human-Mouse Chimeric Anti-Disialoganglioside Monoclonal Antibody ch14.18 (Dinutuximab) in Combination with Sargramostim (GM-CSF) in Patients with Recurrent Osteosarcoma

Mark Winstanley - COG APEC14B1 Project Everychild: A registry, eligibility screening, biology and outcome study

Mark Winstanley - COG ARST1431: A Randomised Phase 3 Study of Vincristine, Dactinomycin, Cyclophosphamide (VAC) Alternating with Vincristine and Irinotecan (VI) Versus VAC/VI Plus Temsirolimus (TORI, Torisel, NSC# 683864, IND# 122782)

Andrew Wood - Finding new treatments for ALK +ve inflammatory myofibroblastic tumours (IMT Study)

He Kamaka Waiora:

Anneka Anderson - Maori and Pacific Whanau Experiences of Recurrent Hospitalisations with Rheumatic Fever and Unexpected Rheumatic Heart Disease in New Zealand

Immunology (Starship):

Jan Sinclair - Peanuts, nuts and seeds - avoidance, ingestion and quality of life

Infectious Diseases (Adult):

Tim Cutfield - How many patients with cellulitis are unnecessarily admitted to Auckland City Hospital?

Mitzi Nisbet - Audit of the management of multidrug resistant TB by the Respiratory Service ADHB

Stephen Ritchie - Can an Infographic convey knowledge about the harmful effects of antibiotic treatment to consumers?

Mark Thomas - Development and implementation of an app to support antimicrobial prescribing

Infectious Diseases (Starship):

Briar Peat - Duration of benzathine penicillin prophylaxis for rheumatic fever

LabPlus (Genetics, Immunology, Microbiology, Virology):

Simeon Barker - Laboratory-Clinician interaction survey Matthew Blakiston - Case report: Community acquisition of a NDM producing E. coli

Matthew Blakiston - Retrospective review of the diagnostic performance of pleural fluid adenosine deaminase (pfADA) for Tuberculous pleuritis in a low incidence setting

Mary De Almeida - Antimicrobial susceptibility and capsular serotypes of invasive and colonizing strains of Group B Streptococcus at Auckland City Hospital

Maggie Kalev - MEGBIO: Megakaryocyte and Platelet Biology study

Rebecca Lucas-Roxburgh - Early detection markers and risk factor analysis for Human papillomavirus associated oropharyngeal cancer

Gary McAuliffe - Mosquito-bourne viral infections in returning travellers, Auckland 2014-2016

Gary McAuliffe - Rotavirus infection in the Auckland region following the introduction of Rotateq to the national immunisation schedule: impact on hospitalisations and laboratory implications

Damian Pethica - An Observational Investigation of Human Papillomavirus in disease of the prostate: with an initial exploratory phase in prostate cancer followed by a Case-Control study. PC_001

Fahimeh Rahnama - The prevalence of human papillomavirus (HPV) infections in squamous cell carcinomas of the head and neck in an Auckland, New Zealand cohort

Sally Roberts - Detection of Macrolide and Fluoroquinolone Resistance in Mycoplasma genitalium strains causing infection in Auckland, New Zealand

Clinton Turner - A retrospective observational analysis of the prognostic significance of tumour infiltrating lymphocyte and macrophage subsets in the 7-year recurrence free survival of patients with meningioma in Auckland, New Zealand

Liver Transplant Unit:

Ed Gane - Multicenter, Randomized Phase 2B Study to Evaluate the Efficacy, Safety and Tolerability of OCR-002 (ornithine phenylacetate) in Hospitalized Patients with Cirrhosis and Associated Hyperammonemia with an Episode of Hepatic Encephalopathy STOP-HE Study

Ed Gane - A study of GS9620 in combination with Tenofovir Disoproxil Fumarate (TDF) for the Treatment of Participants with Chronic Hepatitis B and who are currently not on Treatment

Ed Gane - A study to evaluate the safety, antiviral activity and PK of ARB-001467 in subjects with CHB

Ed Gane - TARGET3D — An open label, multicentre, international pilot study of paritaprevir/ritonavir, ombitasvir, dasabuvir with or without ribavirin for people with recently acquired hepatitis C virus infection with or without HIV co-infection

Ed Gane - A Phase 2, Open-Label Study to Investigate the Safety and Efficacy of Sofosbuvir/Velpatasvir Fixed Dose Combination Administered for Four Weeks in Patients Infected with Chronic HCV in the Peri Operative Liver Transplantation Setting

Ed Gane - A Single-Arm, Open-Label, Multicenter Study to Evaluate the Safety and Efficacy of ABT-493/ABT-530 in Adult Post-Liver or Post-Renal Transplant Recipients with Chronic Hepatitis C Virus Genotype 1 – 6 Infection (MAGELLAN-2)

Ed Gane - Study of increasing doses of ARC-521 in volunteers and patients with Hepatitis B

Ed Gane - GS-US-402-3885: A Phase 1 Open-Label, Parallel-Group, Adaptive, Single-Dose Study to Evaluate the Pharmacokinetics and Pharmacodynamics of GS-9674 in Subjects with Normal and Impaired Hepatic Function

Ed Gane - A Phase 2, Randomized, Open Label Study to Evaluate the Efficacy and Safety of Tenofovir Alafenamide (TAF) versus Tenofovir Disoproxil Fumarate (TDF)—containing Regimens in Subjects with Chronic HBV Infection and Stage 2

Ed Gane - MK-3682 + MK-8408 in Subjects with Chronic Hepatitis C Virus (HCV) Infection

Ed Gane - A Phase 1a/1b, Dose-Ranging Study of the Safety, Tolerability and Pharmacokinetics of Orally Administered ABI-H0731 in Healthy Volunteers and Patients with Chronic Hepatitis B **Ed Gane** - YP39364: A study of RO7049389 in healthy subjects and patients chronically infected with hepatitis B virus infection

Management:

Vicente Gonzalez – Building, Quake and People – A Serious Game Platform for Informing Life Saving Strategies

Mental Health (Adult):

Tracey Forward - Formal scoping audit at the Calder Centre Medical Practice regarding workforce development and service user needs

Nicholas Hoeh - A Pilot New Zealand Study of Rapid Transcranial Magnetic Stimulation (rTMS) in Treatment-Resistant Depression

Bob Howe - What is the current practice regarding mental health nurses' choice of site when administering long acting depot antipsychotic medication?

Bob Howe - What is the attitude of undergraduate nurse educators / lecturers ' preceptors to having specific mental health competencies within undergraduate student nurse education programmes?

Joel Jackson - Lithium monitoring in a community adult outpatient setting - a clinical audit - Metabolic Side Effects of Atypical Antipsychotics in Older Adults

Suresh Muthukumaraswarmy - A randomised, double blind, active placebo-controlled crossover trial of an N-Methyl-D-Aspartate antagonist for patients with treatment resistant depression (KETDEP)

Bruce Russell - Development of a personalized model for predicting a response to first-line antipsychotic treatments for people with first episode psychosis

Ian Soosay - Audit of metabolic screening on the initiation of anti-psychotics

Mental Health (Starship):

Elizabeth Du Preez - Therapists' experiences of external group based family therapy supervision in Child and Adolescent Mental Health Services

National Women's Health – Fertility Plus, Gynaecological Oncology, High Risk Maternity, Midwifery, Obstetrics and Gynaecology:

Susan Bigby - Molecular analysis of squamous cell carcinoma of the vulva and the field of cancerization

Michael Burling - Change in the pattern of referrals for genetic counselling - impact of universal testing for high grade serous carcinoma of ovary, tube or peritoneal origin

Prathima Chowdary - Effect of warm humidified carbon dioxide on tissue oxygenation in open abdominal surgery - a pilot study

Lois Eva - Subtypes of stage IV ovarian cancer; response to treatment and patterns of disease recurrence

Lois Eva - A Phase II Randomised Clinical Trial of Mirena® \pm Metformin \pm Weight Loss Intervention in Patients with Early Stage Cancer of the Endometrium

Katie Groom - An audit of the use of antenatal corticosteroids prior to elective caesarean section from 35+0 weeks within the Auckland region

Katie Groom - A healthy life starts with a bioenergetically healthy placenta - the effect of maternal aPL antibodies and preeclamptic sera on mitochondria in the syncytiotrophoblast Katie Groom - My Baby's Movements: a stepped wedge cluster randomised controlled trial to raise maternal awareness of fetal movements during pregnancy. MBM First Stage

Neurology (Adult):

Tracey Austin - A critical analysis of current health service to patient communication in relation to "did not attend" rates at the Neurophysiology Service in Auckland

Alan Barber - Evaluation of the usefulness of the FABS algorithm at Auckland City Hospital with a retrospective clinical notes audit

Alan Barber - Extending the time for thrombolysis in emergency neurological deficits—Intra-arterial using intravenous tenecteplase

Alan Barber - Randomized, double-blind, Evaluation in secondary Stroke Prevention comparing the EfficaCy and safety of the oral Thrombin inhibitor dabigatran etexilate (110 mg or 150 mg, oral b.i.d.) versus acetylsalicylic acid

Peter Bergin - A Phase 2A, Randomized, Double-Blind, Placebo-Controlled, Multi-Center, Multiple-Dose Study to Assess the Safety and Efficacy of ZYN002 Administered as a Transdermal Gel to Patients with Partial Onset Seizures

Emma Monigatti - Assessment of muscle strength and the provision of motor prognosis in the Acute Stroke Unit

Eoin Mulroy - Diagnostic implications of septum pellucidum abnormalities on brain magnetic resonance imaging

Luciana Pelosi - High-resolution Nerve Ultrasound in CANVAS **Barry Snow** - A Phase IIb, Randomised, Double-blind, Placebocontrolled, Dose-range Investigation of the Safety and Efficacy
of NTCELL® [Immunoprotected (Alginate-Encapsulated) Porcine
Choroid Plexus Cells for Xenotransplantation] in Patients with
Parkinson's Disease

Alice Theadom - Prevalence and impact of Charcot-Marie-Tooth Disease in the Auckland Region of New Zealand

Neurology (Starship):

Gina O'Grady - Microcephaly in New Zealand - Incorporating Zika virus into our diagnostic algorithm

Claire Spooner - Retrospective audit of children with cardiac lesions who present with stroke in hospital

Neurosurgery:

Abhinav Jain - Outcome analysis of all patients diagnosed with an unruptured cerebral arteriovenous malformation (AVM) at Auckland City Hospital

Newborn:

Jane Alsweiler - An audit on the incidence and management of hypoglycaemia in at-risk newborn babies on the postnatal wards at ACH

Jane Alsweiler - Postnatal effects of Late Preterm birth: the LaP study

Malcolm Battin - Preventing Adverse Outcomes of Neonatal Hypoxic Ischaemic Encephalopathy with Erythropoietin: A Phase III Randomised Placebo Controlled Multicentre Clinical Trial: PAFAN

Frank Bloomfield - Different approaches to moderate and late preterm nutrition: Determinants of feed tolerance, body composition and development. The DIAMOND Trial

Keith Petrie - Sources of Parental Stress in the Neonatal High Dependency Unit

Northern Regional Genetics Service:

Logan Walker - The New Zealand Familial Breast Cancer Study (NZFBCS)

Nursing:

Shaun Grossberg - Managing workplace bullying in the New Zealand nursing profession

Karyn O'Keeffe - Safer Nursing 24/7: Implementing a sciencebased approach for fatigue risk management in nursing

Older People's Health:

Martin Connolly - Older people in retirement villages: unidentified need & intervention research

Nicola Kayes - Living well with Mild Cognitive Impairment (MCI)

Nisa Mohan - Adverse drug event hospital admissions in older people: The accuracy of hospital discharge coding data and the codes used for drug associated falls, bleeding and hypoglycaemia admissions

Oncology (Adult):

Reuben Broom - An open label, multicentre extension study of trastuzumab emtansine administered as a single agent or in combination with other anticancer therapies on patients previously enrolled in a Genentech

Sanjeev Deva - ARX788 - A Phase 1, Multicenter, Open-label, Multiple Dose-escalation Study of ARX788, Intravenously Administered as a Single Agent in Subjects with Advanced Breast Cancer with Multiple Levels of HER2 Expression Sanjeev Deva - A Phase 1A/1B, Open Label, Multiple Dose, Dose Escalation and Expansion Study to Investigate the Safety, Pharmacokinetics and Antitumor Activities of the anti-PD-1 Monoclonal Antibody BGB-A317

Sanjeev Deva - A Non-Randomised Open-Label Phase Ib Exploratory Study of TG02-treatment as Monotherapy or in Combination with Pembrolizumab to Assess Safety and Immune Activation in Patients with Locally recurrent Oncogenic RAS Exon 2 Mutant Rectal Cancer

Michael Findlay - A Randomised Phase III Double-Blind Placebo-Controlled Study of Regorafenib in Refractory Advanced Gastro-Oesophageal Cancer (AGOC)

Peter Fong - Phase Ib/II Trial of Pembrolizumab (MK-3475) Combination Therapies in Metastatic Castration-Resistant Prostate Cancer (mCRPC) (KEYNOTE-365)

Peter Fong - A Phase 3, Multicenter, Multinational, Randomized, Open-Label, Parallel-Arm Study of Avelumab (MSB0010718C) Plus Best Supportive Care Versus Best Supportive Care Alone as a Maintenance Treatment

Vernon Harvey - BHT datapoint collection of participants with untreated solid cancer for CID System automated software validation

Chakiath Jose - A Randomised phase II trial of Adaptive Image Guided standard or dose escalated tumour boost radiotherapy in the treatment of transitional cell carcinoma of the bladder

Ben Lawrence - Circulating Tumour DNA as a Biomarker of Pancreatic Cancer

Ben Lawrence - Napoli 2- Phase 2 study of nanoliposomal irinotecan (nal-IRI)-containing regimens versus nab-paclitaxel plus gemcitabine in patients with previously untreated, metastatic pancreatic adenocarcinoma

Tom Love - Measuring Health Related Quality of Life (HR-QoL) of patients with different stages of bowel cancer: In the New Zealand population using the EQ-5D questionnaire

Andrew Macann - Towards automated knowledge-based quality control for radiotherapy treatment planning

Tasha Mackie - Extensive stage small cell lung cancer: when is primary growth factor support as standard of care warrented in patients receiving doublet chemotherapy with carboplatin and etoposide?

David Porter - What was the incidence of pneumococcal infection in patients with a diagnosis of cancer known to the Auckland Oncology department who received chemotherapy for a 1-year period?

Rosalie Stephens - A phase II trial of immunisation with autologous dendritic cells loaded with NY-ESO-1 and alpha-galacto-sylceramide in patients with high-risk surgically resected stage II, III or IV melanoma. (MeIVac Phase II)

Rosalie Stephens - A Phase 3 Placebo-Controlled Study of Carboplatin/Paclitaxel with or without Concurrent and Continuation Maintenance Veliparib (PARP inhibitor) in Subjects with Previously Untreated Stages III or IV High-Grade Serous Epithelial

Rosalie Stephens - A Phase II study of Abemaciclib in Patients with Brain Metastases Secondary to Hormone Receptor Positive Breast Cancer, Non-small Cell Lung Cancer or Melanoma Richard Sullivan - A Phase III, open-label, multicenter trial of avelumab (MSB0010718C) versus platinum-based doublet as a first-line treatment of recurrent or Stage IV PD-L1+ non—small-cell lung cancer

Paul Thompson - Follow-up to the AVANT study up to 8 and 10 years (median follow up) in patients with colon carcinoma **Michelle Wilson** - INSIGHT: Investigating Strategies to Improve Clinical Trial Opportunities in Oncology in New Zealand Michelle Wilson - Profiling of Oncology Patients as part of Clinical care and Research - PROSPER

Ophthalmology:

Jennifer Craig - Evaluation of the impact of corneal grafting on the ocular surface and dry eye

James McKelvie - Analysis of corneal refractive power changes associated with accommodation, corneal biomechanics and cataract surgery

Stuti Misra - Assessing project and regression of diabetic peripheral neuropathy using in vivo confocal microscopy of cornea

Rachael Niederer - Predictive value of chest x-ray in the diagnosis of sarcoid uveitis

Dianne Sharp - CEDAR: Safety and Efficacy of Abicipar Pegol (AGN-150998) in patients with Neovascular Age-related Macular Degeneration. Phase 111 study

David Squirrel - Nurse Specialists for the Administration of Anti-Vascular Endothelial Growth Factor Intravitreal Injections

ORL – Head and Neck Surgery:

Bren Dorman - CO2 laser cordectomy for treatment of early glottic cancer

James Johnston - Peritonsillar abscess (PTA): clinical characteristics, microbiology, drug exposures and outcomes of patients treated as Auckland City Hospital

Hannah Linkhorn - Incidence of foreign body in throat at Auckland DHB and the usefulness of CT imaging

Anna Miles - Communication, Swallowing and Airway Outcomes after Laryngectomy in New Zealand

ORL (Starship):

James Johnston - Adenoidectomy for middle ear effusion: does it make a difference to outcomes?

James Johnston - Incidence and factors associated with revision adenoidectomy: a retrospective study

James Johnston - The nature of microbial involvement in the development of adenotonsillar hyperplasia. (TAAS)

Silvia Marinone - Castillo-Morales appliance therapy to reduce drooling: outcomes at Starship Hospital

Andrew Martin - Long-standing inhaled foreign bodies in children

Nikki Mills - Paediatric Nasogastric Tube Syndrome Study

Michel Neeff - The effect of soft tissue infections on device performance in adult cochlear implant recipient

Vikranth Visvanathan - Comparative audit of cochlear implantation in children with congenital cytomegalovirus infection versus GJB2 mutation

Orthopaedics (Adult):

Scott Bolam - Tip apex distance in peri-trochanteric femur fractures in the Orthopaedic Department of Auckland City Hospital

Jing Yi Liu - Outcome audit of ankle fractures in diabetic patients in the ADHB

Ailsa Wilson - Retrospective review of revision total hip surgery using trabecular metal shells for management of pelvic discontinuity. Looking at the functional, clinical and radiological outcomes

Orthopaedics (Starship):

Matthew Boyle - The effect of antibiotic timing on culture yield in paediatric musculoskeletal infection

Julie Choisne - Development of a data-driven model to assist in Ankle Foot Orthosis prescription based on gait analysis data and clinical measurements

Haemish Crawford - Paediatric clavicular osteomyelitis

Dhanushka Liyanage - The effectiveness of surgical lighting systems in operating rooms in orthopaedic surgery and how to improve the current lighting systems in place

Justine McCallum - Measuring the growth and nutrition of children with moderate to severe cerebral palsy in New Zealand Katherine Rooks - An improved method for triaging Developmental Dysplasia of the Hip (DDH) consults at one tertiary paediatric centre

Shiran Zhang - Incidence and risk factors for septic arthritis of the elbow following internal fixation of paediatric distal humeral fractures

Paediatrics:

Sarah Appleton-Dyer - Evaluation of Service Improvement for Alternative Education Students: Introduction of Navigators Sarah Louise Beer - Snapshot survey of over and under nutrition at Starship Hospital **Carol Chan** - The National Child Protection Alert System in New Zealand: a study of inter-rater reliability

Kamani De Alwis - Audit of pathways to admission for children residing in the North Shore Hospital catchment area

Cameron Grant - Randomised Control Study of Vitamin D to Prevent Acute Respiratory Infection Health Care Visits among children under 2 years old (PREVARID)

Jessica Harper - What Hinders and Enables Help Seeking Behaviour in Parents Transitioning from Pregnancy to Parenthood

Jessica Ives - An investigation of the techniques used by Starship staff when measuring lengths and weights of infants and children

Alison Leversha - Collective impact: Working together with children, whanau and their communities to improve health, development and school readiness among vulnerable children and families in the Glen Innes/Tamaki community

Alison Leversha - Comparing the Old with the New: Randomised controlled trial of three different treatments for mild-to-moderate impetigo in children

Collette Muir - Audit of Paediatric Neurology and Developmental Patients Requiring Transition to Adult Services

Vivienne Walker - What it means for young adults to be cared for in a paediatric setting: perspectives of patients and nurses

Paediatric Intensive Care Unit:

John Beca - Paediatric Acute Respiratory Distress Syndrome Incidence and Epidemiology (PARDIE) Study

John Beca - Point Prevalence of Platelet Transfusions in Critically III Children (PT3)

Anusha Ganeshalingham - Fluid Bolus Therapy in Children: a survey of intensive care medical staff

Fiona Miles - Conversations about realistic expectations (CARE)

Fiona Miles - Whanau/Family perspectives on Conversations Around Realistic Expectations and treatment (CARE2) planning at Starship Children's Health

Fiona Miles - Moral Distress in healthcare professionals working in paediatric Intensive Care Units

Caroline Radich - Evaluation of a new critical care outreach (CCO) service in a tertiary children's hospital

Claire Sherring - VAP Prevention in PICU – Do bundles of care make a difference?

Amanda Wevers - Discharge Experiences from the Paediatric Intensive Care Unit

Pain Services:

Malcolm Johnston - The effect of stress on pain sensitivity in people with irritable bowel syndrome

Gwyn Lewis - Who is attending our chronic pain clinics?

Palliative Care (Adult):

Anne O'Callaghan - A Retrospective Audit of Outcomes of Cardiopulmonary Resuscitation at ADHB in 2014

Andrew Old - What are the end of life circumstances of patients dying under the care of the Auckland District Health Board?

Celia Palmer - Management Of Refractory Cancer Ascites: A randomised study of a temporary placed catheter for serial intermittent use versus a permanent placed catheter (Rocket®) for continuous drainage of malignant ascites in cancer patients

Jackie Robinson - How are ADHB services used by patients in their last 12 months of life?

Lisa Williams - Helping NZ family/whaanau/fono caregivers who provide end of life care

Palliative Care (Starship):

Daniela Reyes - An audit of service demands of the Starship palliative care team at Auckland City Hospital

Physiology

Kevin Ellyett - Incidence of flow limitation during exercise in healthy adolescent females who experience dyspnoea on exertion

Public Health:

Emmanuel Badu - The burden of tuberculosis among Sub-Saharan Africans in New Zealand: The role of individual, social, economic and structural factors

Karen Bartholomew - Auckland and Waitemata DHB bariatric surgery referral audit

Karen Bartholomew - Primary HPV cervical screening selfsampling feasibility study: Acceptability for Auckland DHB Maori women

Ellie Brooking - Navigating patient centred care within the legislative framework of directly observed therapy (DOT)

Penny Neave - An epidemiological review of imported infectious diseases notifications in the Auckland Region

Radiology (Adult):

Colleen Bergin - The hypoechoic rim sign: An ultrasound finding in endometritis

Andrew Holden - Type Ia Endoleak after Nellix EVAS: Imaging observations and implication for follow up, early detection and treatment (TIEN-study)

Andrew Holden - NELLIX Ch-EVAS AUDIT 2 - Assessment of stent deformity in patients who have received Chimney Endovascular Aneurysm Sealing (Ch-EVAS) with the Nellix device

Andrew Holden - A randomIzed trial coMParing the ELUVIA $^{\text{TM}}$ dRug-elutIng stent versus Zilver $^{\text{@}}$ PTX $^{\text{@}}$ stent for treatment of superficiAL femoral and/or proximal popliteal arteries

Andrew Holden - The DESappear Study: Drug Eluting Scaffold with an absorbable platform for primary lower extremity arterial revascularisation

Andrew Holden - Safety and Feasibility of the Shockwave Lithoplasty® System for the Treatment of Peripheral Vascular Stenosis

Andrew Holden - Randomized study of the Shockwave Medical Peripheral Lithoplasty System followed by drug-coated balloon (DCB) versus DCB with standard balloon pre-dilatation in moderate and severely calcified femoropopliteal arteries

Andrew Holden - A Randomized Trial to confirm the Safety and Effectiveness of Chocolate Touch Paclitaxel Coated PTA Balloon Catheter, in Above the Knee Lesions

Andrew Holden - Prospective Study for the Treatment of Atherosclerotic Lesions in the Superficial Femoral Artery (SFA) and/or Popliteal Artery using the Serranator Device: PRELUDE Study: PRELUDE Study

Colette Kennedy - Validation of elastography in HCV patients: comparison of 2DSWE.GE with transient elastography

Greg Tarr - Retrospective assessment of model imaging markers in the evaluation of Intra-cerebral haemorrhage

Greg Tarr - Audit of CT and MR angiographic measurements of intracerebral aneurysms

Greg Tarr - Culture yield of percutaneous biopsy in spondylodiscitis at Auckland District Health Board

Radiology (Starship):

Raylene Rao - What is the radiation dose delivered by common imaging modalities used for investigation of non-accidental injury in the Auckland District Health Board?

Renal Services (Adult):

Animesh Chatterjee - Predictors of intravenous calcium replacement and recurrent hyperparathyroidism following parathyroidectomy in end stage renal failure patients

lan Dittmer - Treatment of Proteinuria Due to Treatment Resistant or Treatment Intolerant Idiopathic Focal Segmental Glomerulosclerosis: A 2 Part Prospective Study of H.P. Acthar® Gel (PODOCYTE)

Sandra Hay - What are the experiences of dialysis nurses in New Zealand on discussing advance care planning and death and dying with their patients?

Helen Pilmore - Canadian-Australasian RCT - Screening Kidney Transplant Recipients (CARSK)

David Semple - Dialysis vascular access outcomes after recurrent fistuloplasty

Reuben Wilson - Peritoneal dialysis catheter outcomes audit, Auckland City Hospital

Fei Xiong - A retrospective review of patients with biopsy proven lupus nephritis between 2004 and 2013

Renal Services (Starship):

Derisha Naicker - Kids exploring expectations, perspectives and information about Transplant

Respiratory Services (Adult):

Sandra Hotu - Understanding Maori preferences for healthcare services: a qualitative study involving Maori with chronic airways disease and their whaanau

John Kolbe - A Two Part, Phase I/IIa Assessment of Citramel: Part 2 - A Double-blind Randomised Placebo-controlled Cross-Over Study of the Effects of Citramel on the Signs and Symptoms of Cystic Fibrosis

John Kolbe - Phase 1a/1b Trial of LTI-01 (Single Chain Urokinase, scuPA) Intrapleural Fibrinolytic Therapy (IPFT) in Patients with Complicated Parapneumonic Effusions or Empyema

John Kolbe - Multicenter, Dose-Ranging Study To Assess The Efficacy And Safety Of Mstt1041a In Patients With Uncontrolled Severe Asthma

Conroy Wong - Anti-inflammatory effects of oral and transdermal clonidine in bronchiectasis

Respiratory (Starship):

Alana Ainsworth - A retrospective review of the current transition process of patients with non-Cystic Fibrosis bronchiectasis from the Starship Bronchiectasis Clinic to adult medical services

Mirjana Jaksic - Retinol-binding protein in urine, an indicator of early kidney damage in children with Cystic Fibrosis

David McNamara - Pilot Study of Humidified High Flow Air via Nasal Cannulae (HHF) During Sleep for Children and Young People with Cystic Fibrosis (CF)

Naveen Pillarisetti - Airway microbiome in two acute paediatric respiratory conditions: bronchiolitis and community acquired pneumonia

James Revie - AirSpiral and Tracheostomy connector usability with myAIRVO 2

Rheumatology (Adult):

Nicola Dalbeth - A randomized controlled trial of intensive urate-lowering therapy for bone erosion in tophaceous gout **Keith Rome** - Foot and ankle characteristics in people with systemic lupus erythematosus

Rheumatology (Adult):

Anthony Concannon - The incidence and severity of Juvenile Idiopathic Arthritis in Maori and Pacific Island children

Forting Putladge - Transition to Adult Phonometrical Societies

Eoghan Rutledge - Transition to Adult Rheumatology Services (TARS): A Qualitative & Quantitative Evaluation of Current Attitudes of Patients with Rheumatological Diagnoses to Transitional Care in New Zealand

Sexual Health Services:

Sunita Azariah - A large increase in cases of infectious syphilis presenting to Auckland Sexual Health Service in 2015

Sunita Azariah - The NZPrEP study: a demonstration project of HIV pre-exposure prophylaxis in Aotearoa, NZ

Surgery (Adult):

Grant Beban - Outcomes of patients referred for bariatric surgery

Ian Bissett - Predicting prolonged return to normal bowel function after elective colorectal surgery

Ian Bissett - A clinical audit of nursing care practice and patient experience in the first 24 hours post radial artery sheath removal

Ian Bissett - A randomized double-blind placebo controlled trial of prucalopride to reduce the duration of postoperative ileus in patients undergoing elective colorectal surgery

John Windsor - A comprehensive pain assessment tool (COMPAT) for chronic pancreatitis

John Windsor - Developing and evaluating techniques for peripheral transvenous cannulation of the thoracic duct to study the role of lymph in acute pancreatitis and critical illness - Objective 1 Percutaneous cannulation of the thoracic duct

Surgery (Starship):

Emily Smith - Audit of Tertiary Trauma Survey

Kiarash Taghavi - Hirschsprung's disease in New Zealand: qeographical and ethnic distribution

Trauma Service

Yee-Shynn Ooi - Time to definitive care in trauma

Ben Wheeler - Incidental findings from 1 year of trauma related imaging: a prospective study

Ben Wheeler - Is there evidence of ethnic disparities in trauma outcomes at a New Zealand Level 1 Trauma Centre?

Urology:

Scott Bolam - The effectiveness of BCG and interferon against non-muscle invasive bladder cancer: a New Zealand perspective: five year follow up

Vascular Service:

Andrew Hill - A randomized multicentre trial of outcomes of brachiobasilic fistula one stage vs two stage procedure



+++HOT ARTICLE+++

RESEARCH LINKS MENTAL DISTRESS TO SIGNIFICANTLY INCREASED RISK OF DEATH IN HEART PATIENTS



Professor Ralph Stewart

Stewart, R.A.H., Colquhon, D.M., Marschner, S.L., Kirby, A.C., Simes, J., Nestel, P.J., Glozier, N., O'Neill, A., Oldenburg, B., White, H.D., Tonkin, A.M., on behalf of the LIPID Study Investigators. Persistent psychological distress and mortality in patients with stable coronary artery disease. Heart, June 2017 doi: 10.1136/heartinl-2017-311610

- In the top 5% of all research outputs scored by Altmetric.com
- Among the highest-scoring outputs from this source (#31 of 2,653)
- High Attention Score compared to outputs of the same age (98th percentile)
- High Attention Score compared to outputs of the same age and source (99th percentile)
- (Altmetric.com tracks a range of sources to capture conversations about scholarly research online)

A team including Auckland City Hospital cardiologist Professor Ralph Stewart has shown persistent, moderate-to-severe mental distress is linked to a significantly heightened risk of death among patients with stable coronary heart disease.

Many studies have linked anxiety/ depression with an increased risk of heart attack/stroke, but these have mostly been done fairly soon after the event, and based on a single assessment, say the researchers. And the definitions of chronic/persistent stress in other longer-term studies have varied widely. In a bid to get around some of these issues Professor Stewart and an international team of researchers, looked at the association between occasional or persistent mental distress and the risk of death in a research cohort of 950 people aged between 31 and 74 with stable coronary heart disease (the LIPID Study).

To gauge levels of mental distress participants filled in a validated general health questionnaire (GHQ30) at six months, 1, 2, and 4 years after their heart attack or hospital admission for unstable angina. Distress was graded according to severity and the length of time it lasted at each of the assessments: never distressed; occasional (of any severity); persistent mild distress on three or more occasions: and persistent moderate distress on three or more occasions. The participants' health and survival were then tracked for an average of 12 years. During the monitoring period, 398 people died from all causes and 199 died from cardiovascular disease.

The questionnaire responses showed that 587 (62%) of participants said they had not been distressed at any of the assessments, while around one in four (27%) said they had experienced occasional distress of any severity. Around one in 10 (8%) said they had experienced persistent mild distress. Only 35 people (3.7%) complained of persistent moderate distress. Significantly however, people in this last group were nearly four times as likely to have died of cardiovascular disease and nearly three times as likely to

have died from any cause as those who said they had not been distressed at any of the assessments. No such associations were observed for those who said they had experienced persistent mild distress or those who said they had only experienced it occasionally.

The findings held true even after taking account of other potentially influential risk factors.

This is an observational study, so no firm conclusions can be drawn about cause and effect, added to which confining the assessments to a period of four years might have underestimated the true impact of persistent distress, caution the researchers.

Nevertheless, they conclude that the increase in risk of death was substantial. "These findings suggest that in patients with stable [coronary heart disease], long term mortality risk is related to the cumulative burden of psychological distress."

In a linked editorial in the latest issue of the journal Heart, Dr Gjin Ndrepepa of the Technical University, Munich, Germany, points out that the GHQ-30 is no longer widely used and highlights that the researchers did not account for the impact of traumatic life events or socioeconomic factors. However, he adds that mental distress activates the sympathetic nervous system and boosts stress hormone levels, which, if persistent, can produce potentially harmful physiological changes, some of which may be permanent. Distress can also prompt unhealthy behaviours.

"The possibility is real that [coronary heart disease] itself is the source of distress and a determinant of poor outcome," he writes, adding that health professionals should include screening for mental distress a routine part of the care provided to patients with coronary heart disease.

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DIRECTORY

Research Office

Postal Address

Private Bag 92024

Auckland Mail Centre, 1142, New Zealand

Physical Address

14th Floor, Support Building Auckland City Hospital 2 Park Road, Grafton Auckland 1023, New Zealand

Email: researchoffice@adhb.govt.nz

Website: http://www.adhb.health.nz/health-professionals/research/

Mary-Anne Woodnorth Manager

Helen Wihongi Director of Māori Health Research Rong Hu Statistical Advisor and Data Analyst

Genevieve Morris Grants Co-ordinator

Peter Reed Statistician – Starship Children's Health

Mary Righton Research Co-ordinator

Tim Sato Research Advisor and Co-ordinator

Kim Southey Kaupapa Māori Analyst

Research Governance Committee

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Richard Frith Chair of A+ Trust

Sarah Hunter Research Manager, Paediatric Haematology and Oncology

Colin McArthur Clinical Advisor for Research

Bruce Northey General Counsel

Andrew Shelling Assistant Dean – Research, Faculty of Medical and Health Sci-

ences, University of Auckland

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 Dr Karen Bartholemew
 committee member – Māori Public Health Physician

Having an excellent programme of research distinguishes great hospitals. Auckland District Health Board – Auckland DHB-is the largest tertiary care centre and the largest clinical research facility in New Zealand. Our research portfolio comprises over 1300 projects and our doctors, nurses, allied health professionals and scientists engage in research that attracts funding, participation and peer esteem both from New Zealand and internationally.

Auckland DHB's hospitals are teaching hospitals and ADHB partners with the University of Auckland in an Academic Health Alliance. Its goals, to deliver research-informed healthcare alongside clinical teaching and training, will fast-track translation of research findings from "bench to bedside", and onwards to communities and families.

Auckland DHB provides a first-class setting for research across the health spectrum. We serve a diverse population (with rapidly expanding migrant population) of over 478,000 as the local provider, and over 1.3 million as regional provider of specialist health services. Acute services are provided together under one roof so researchers can access participants under the care of skilled multidisciplinary teams of specialists with specialist equipment. Auckland DHB's accredited laboratory facility, LabPlus, provides a range of on-site laboratory services for clinical research, including diagnostic and genetic analysis, storage, disposal and shipping to central laboratories worldwide.

Research at Auckland DHB pays for itself – over 100 staff and a multitude of medical and laboratory procedures for research are paid for from external sponsorship, both commercial and charitable. The A+ Trust provides robust management of research monies, and interest earned on Trust funds is fed back into the organisation as a contestable research grants programme worth half a million dollars annually.

Auckland DHB is committed to preserving our status as a centre of clinical excellence by fostering our involvement in research activity, critiquing health care approaches and investigating new initiatives. We celebrate our contribution to health through research with our annual Auckland DHB Research Excellence Award, Young Investigator Award, Best Research Posters and now the best summer students' reports. Within the diversity, integral to all Auckland DHB research is a desire by our committed staff to build a strong evidence base for our clinical, community and policy work, and ultimately, the good health and well-being of our patients.

This was the Auckland DHB Annual Research Report for 2016.





Auckland District Health Board

Research



