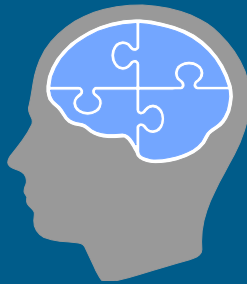


## Quick Update:

- Membership: 656 members
- 10<sup>th</sup> COGNO ASM Report
- 11<sup>th</sup> COGNO ASM Save the Date!



# COGNO

COOPERATIVE TRIALS GROUP  
FOR NEURO-ONCOLOGY

## Member Newsletter

Issue 26

Summer 2017



### Message from our Chair

Dear COGNO members,

My first two months as COGNO Chair seem to have passed very quickly. I'd like to thank those members who, at the AGM, ratified my position as incoming Chair and placed their trust in me to steer the group onwards. I am indebted to Mark and, indeed, the entire leadership team over the last 10 years, for building a strong and successful clinical trials group which now has plenty of momentum to keep moving in the right direction.

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Shortly before the COGNO ASM, Eng-Siew Koh and I chaired a Strategic Planning Meeting for COGNO, with the goal of identifying what we are doing well, what we could do better, and what changes we might make to better serve our patients and the COGNO membership. With a change of Chair, the time is ripe for the COGNO committees to re-evaluate our Articles of Association, committee procedures, and how we engage with our members and consumers. Armed with ideas and in-principle agreement from the Strategic Planning Meeting, we are taking time over the next few months to look at member engagement, how we develop junior clinicians, how we interact with the pharmaceutical industry, and what our 'public face' looks like to our colleagues and consumers. This will include a long-overdue overhaul of the COGNO website, and consideration of the best way to use social media to inform members and consumers about clinical trials and COGNO activities. We are open to any wonderful ideas from members on how COGNO might best meet your needs, so please email me or Jenny Chow ([cogno@ctc.usyd.edu.au](mailto:cogno@ctc.usyd.edu.au)) if inspiration strikes you.

The most important recent news for brain cancer clinical trials has been the announcement of the Australian Brain Cancer Mission, a \$100 million fund with the long term aim of 'defeating brain cancer'. For any members who have not seen these details, I refer you to the following fact sheet: [https://canceraustralia.gov.au/sites/default/files/brain\\_cancer\\_research\\_roadmap\\_factsheet.pdf](https://canceraustralia.gov.au/sites/default/files/brain_cancer_research_roadmap_factsheet.pdf)

It's hard to imagine a more exciting time to be working in neuro-oncology. At a time when funding for academic clinical trials across all disease states seems to be dwindling in real terms, COGNO has a real opportunity to put our best ideas to the test with this targeted research investment. Whilst the finer details of implementation are yet to be announced, 'Enhancing the capacity of ANZCHOG and COGNO trial centres' is a key immediate goal of the Mission. Nevertheless, the centrepiece must be driven by clinical trials activity. There has never been a better time to put forward your ideas to the COGNO Scientific Advisory Committee (SAC) for collaboration, refinement, funding applications, and ultimately - operational clinical trials. The recent rapid turnaround time for the MRFF funding announcement shows that we need to have our best ideas 'grant ready' at any time, and never more so than while awaiting implementation of the Mission.

Finally, I'd like to remind all members that COGNO is **your** trials group. All ideas are welcome, and we appreciate that members come with different levels of clinical trials experience, and that not all clinical trials are drug treatment trials. Find a collaborator, find a mentor, talk to our SAC chair Liz Hovey, talk to Liz Barnes, COGNO statistician. Not all ideas - even good ideas - will make it through to a clinical trial. But the next one just might be your idea.

With warm regards and best wishes for the festive season.

Professor Anna Nowak  
Group Chair

**10<sup>TH</sup> COGNO ANNUAL SCIENTIFIC MEETING**  
*Tailoring therapies for brain tumours: challenges and opportunities*  
Monday 23<sup>rd</sup> - Tuesday 24<sup>th</sup> October 2017  
Rydges Melbourne, Victoria, Australia

Another successful ASM with an outstanding program, world-renowned keynote speakers and a very well-received Patient Information Forum. Congratulations to Convenor, A/Prof Hui Gan, and the 2017 organising committee.

Congratulations to our award and grant recipients:

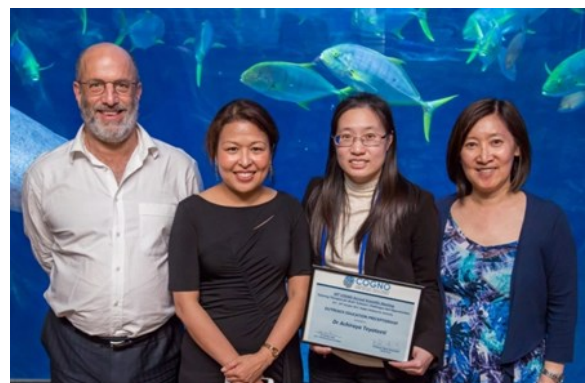
- **MSD Hubert Stuerzl Memorial Educational Award 2017** - Dr James Whittle
- **COGNO Outreach Education Preceptorship** - Dr Achiraya Teyateeti (Thailand)
- **COGNO-Roche Most Outstanding Poster Presentation** - Dr Sarah Shigdar for her abstract "*Targeting brain cancer metastases - a double targeted strategy for effective drug delivery*"
- **COGNO Most Outstanding Oral Presentation** - A/Prof Hui Gan for his presentation on "*Efficacy Analysis of Depatuzizumab mafodotin (ABT-414) +/- Temozolomide (TMZ) in Patients (Pts) With EGFR Amplified, Recurrent Glioblastoma (rGBM) From a Multicenter, International Phase 1 Clinical Trial*"
- **COGNO-Bristol-Myers Squibb Young Investigator Award** - Dr Gurvinder Toor for his poster abstract "*Health-related quality of life and cognition post-resection of benign brain tumours*"



ASM organising committee with international guest speakers, L-R: Prof Patrick Wen, Prof Koichi Ichimura, Dr Lawrence Cher, Ms Yi Feng, Dr Jonathon Parkinson, A/Prof Hui Gan, Ms Jenny Chow, Ms Marcia Fleet, A/Prof Benjamin Ellingson, Dr Maciej Mrugala, Ms Dianne Legge, Prof Daniel Kelly & Dr Anthony Dowling



L-R: Ms Dorit Becher (MSD), Dr James Whittle, Mrs Wendy Stuerzl & Prof Mark Rosenthal



L-R: Prof Mark Rosenthal, Dr Zarnie Lwin, Dr Achiraya Teyateeti & Ms Jenny Chow



L-R: Prof Mark Rosenthal & A/Prof Hui Gan



L-R: Dr Sarah Shigdar, A/Prof Hui Gan & Prof Mark Rosenthal



L-R: Dr Gurvinder Toor, A/Prof Hui Gan & Prof Mark Rosenthal

**COGNO-BRISTOL-MYERS SQUIBB YOUNG INVESTIGATOR AWARD REPORT**

Advances in the field of neuro-oncology have greatly increased and prolonged survivorship following treatment for intracranial neoplasms. This is particularly true for benign brain tumours such as low grade glioma, meningioma, and acoustic neuroma; people with these conditions make up the bulk of patients in a typical neuro-oncology practice. Consideration of the quality of survivorship following treatment has been a secondary endpoint for many studies in the field. To date, we have examined health related quality of life (HRQoL) in over 500 patients surgically treated for these tumours. Efforts have been made to collect longitudinal data. Further, we have investigated the link between cognitive function - a concern with any intracranial pathology - and HRQoL. The work presented at COGNO this year identified areas of impairment relative to reference populations as reported by 428 patients. Substantial impairment was reported in overall quality of life and with cognitive and social function across all three tumour types. With respect to symptom burden, patients reported the most impairment in relation to fatigue. Application of cognitive batteries also revealed a discord between patient-reported and objectively assessed cognitive function. We are currently investigating the reasons for this discord as well as the factors contributing to the perception of impaired cognitive function. Clinical applications of this work include the identification of interventions to ameliorate quality of life and the potential use of cognitive batteries for the early detection of tumour progression.

*Dr Gurvinder Toor*

We thank our sponsors for their support of this year's ASM. The COGNO Scientific Program was developed independent of sponsor involvement.

**Platinum Sponsor**



**Gold Sponsor**



**Silver Sponsor  
(Young Investigator Award)**



**Silver Sponsor  
(Most Outstanding Poster Presentation)**



**Bronze Sponsors**



**Other Sponsors**



**Lunchtime Symposium**



**Satchel**



**Coffee Cart**



**Patient Information Forum**



A sample of photos from the ASM and Conference Dinner available until 28 February 2018 at:  
[https://www.dropbox.com/sh/x0qxwzikipyzw/AAD7p\\_gorJJpBow\\_Y-LM-vvna?dl=0](https://www.dropbox.com/sh/x0qxwzikipyzw/AAD7p_gorJJpBow_Y-LM-vvna?dl=0)



## SAVE THE DATE: 11<sup>th</sup> COGNO ANNUAL SCIENTIFIC MEETING

Sunday 7<sup>th</sup> October - Tuesday 9<sup>th</sup> October 2018, Brisbane, Australia

Stay posted for further updates, or email [cognoasm@ctc.usyd.edu.au](mailto:cognoasm@ctc.usyd.edu.au) to join our mailing list.

### GETTING TO KNOW COGNO'S MANAGEMENT COMMITTEE MEMBERS

Professor Anna Nowak is the Chair of COGNO and a member of the COGNO Scientific Advisory Committee.

#### How did you become involved in COGNO?

I was involved in developing the national High Grade Glioma clinical practice guidelines, which was a great way to get to know people working in the field. This was not long after temozolomide came into standard care, so there were definitely fewer people working in neuro-oncology in Australia. With a postdoctoral fellowship at the NHMRC Clinical Trials Centre under my belt, becoming involved in neuro-oncology clinical trials was an obvious way to contribute. I led the 'clinical trials' chapter in the guidelines, and following on from that someone must have suggested I be an investigator on the original COGNO grant application to Cancer Australia.

#### Why are you still a COGNO member?

It's critical that we nurture academic clinical trials in neuro-oncology and do studies which the pharmaceutical industry cannot or will not do. Australian patients are incredibly generous in their research participation, when we have clinical trials available to them. I'm still a COGNO member because COGNO is the very best vehicle we have for bringing national and international academic clinical trials to our patients, and the best way to support talented young investigators to develop their new ideas.

#### Why did you become a medical oncologist and what triggered your interest in neuro-oncology research?

I was inspired to become a physician by one of the old-school renal physicians in medical school, someone who had incredible clinical acumen and looked after the whole patient. From the beginning, looking after cancer patients interested me more than any other branch of medicine. I am endlessly fascinated and awed by cancer biology. And in oncology you are helping people navigate what is often the toughest personal challenge they have faced. Putting all this together, oncology was the only specialty I ever contemplated. However I fell into neuro-oncology at a time when temozolomide became available, I had a new consultant job, and 'someone had to do it'. As I previously had a PhD in tumour immunology and a post-doc in clinical trials, it was impossible for me to avoid asking research questions when I was caring for this patient group.

#### What do you find most challenging about your work, and most rewarding?

The biggest challenge is fitting it all in. There are so many things I want to do and only 24 hours in the day! My most rewarding moments in clinical work are when I face a really tough patient or family communication issue, and

I come out of it feeling I succeeded in communicating in the way they needed at that moment. My most rewarding research experiences come from seeing a new 'aha' piece of data, and knowing I am seeing new knowledge being 'born'.

#### How do you stay motivated to continue in your role?

Knowing I can use research to broaden my role as a doctor is intensely motivating. While I want to make a difference to the patient in front of me, working on projects which might make a difference to many more people gets me up in the morning.

#### What is a typical day for you?

I have 'clinical days' and 'research days'. My day usually starts at 6am and one of my kids always has to be at school at 7am. I take the early morning driver role, so I get to work early and get a head start on doing something useful before the emails start rolling in. If I have clinic then patient care is all-consuming until the last letter has been dictated. If it's a research day, there are many meetings! Team meetings, meetings with PhD students, research committees, meetings with collaborators, and teleconferences. Somewhere in there I have to deal with email and find time for thinking, reading, and writing. That's why a lot of the thinking, reading and writing happens out of hours.

#### What do you do in your 'spare' time?

Ha ha, in my spare time! Generally I run around after my teenaged kids on the weekends. However I have also been learning to play the flute for the last 3 years and practice religiously after dinner every day. I even took it to ASCO this year.

#### What are you looking forward to in 2017-8?

As the COGNO Chair, I'm most looking forward to implementing some positive changes as a result of the Strategic Planning Meeting and to hearing from COGNO members about how COGNO can best assist them. I'm also really excited about seeing the results of one of my mesothelioma clinical trials, the ALTG DREAM study, which will read out just in time for ASCO 2018.

#### What are three things you want to achieve in 2017-8?

I'd like to raise the profile of COGNO in government and the community, building on the work that Mark has already done in this space. I'd like to see COGNO run a non-drug clinical trial, although the funding cycle makes it unlikely this will be achieved by 2018. And finally I'd like to get my son through the rigors of year 12 year and off to the real world!

## THANK YOU TO GAIL RYAN



Dr. Gail Ryan, Senior Radiation Oncologist, based at the Peter MacCallum Cancer Centre, Melbourne, has recently announced her retirement.

Gail has been a true pioneer and advocate for neuro-oncology across Australia and New Zealand. She has been an investigator in more than 20 local, national and international phase 2 and 3 studies, resulting in more than 40 peer-reviewed publications, as well as successfully mentoring many junior colleagues and post-graduate students in their neuro-oncology research.

After being the only Australian PI for the pivotal EORTC-NCIC (Stupp) protocol, she was the lead Australian PI for the EORTC-NCIC-TROG Trial in Low Grade Glioma, and was instrumental in securing NHMRC funding for ANZ participation. She played a key role in helping secure Australian participation in the NCIC CE5: a phase III RCT of temozolomide and short-course radiation versus short-course radiation alone in newly diagnosed elderly Glioblastoma patients, as well as being an Australian CI on the CATNON trial. She is also the Australian PI for EORTC1308-TROG 15.02 ROAM study in atypical meningioma.

Gail has diligently served on the Scientific Advisory Committee of COGNO for 10 years, and was also a member of the prestigious EORTC Brain Tumour Group. We have benefited greatly from her expertise, experience and collaboration.

On behalf of the COGNO community, we wish to thank Gail for not only her contribution to COGNO, but as a trailblazer for neuro-oncology across Australia and New Zealand.

We sincerely wish her all the very best for a happy and healthy retirement!

*Dr Liz Hovey and Dr Eng-Siew Koh, on behalf of the COGNO SAC and COGNO community*

## STUDY & TRIAL UPDATES

**ACED (COGNO14/02): Phase II randomised placebo-controlled, double blind, multisite study of acetazolamide versus placebo for management of cerebral oedema in recurrent and/or progressive HGG requiring treatment with dexamethasone**

The ACED study aims to recruit 84 patients across 12 sites. The ACED study is now open for recruitment at 6 sites of the 12 selected sites. The trial is currently experiencing slow recruitment but to date, we have randomised 9 patients and sites are actively looking for patients to recruit. Congratulations to the Liverpool Hospital team who has recruited 7 patients to the study! The study team is working with the Trial Management Committee to ensure high level of support is provided to the sites.

The study team continues to work diligently with the remaining sites in start-up to ensure they are activated as soon as possible to aid in recruiting more patients into the study. Please email [aced@ctc.usyd.edu.au](mailto:aced@ctc.usyd.edu.au) if you have any queries.

| ACED – PARTICIPATING SITE STATUS |                                     |       |                        |                 |                 |                       |
|----------------------------------|-------------------------------------|-------|------------------------|-----------------|-----------------|-----------------------|
| No                               | Site Name                           | State | Principal Investigator | Site Status     | Site Activation | # Patients randomised |
| 1                                | Liverpool Hospital                  | NSW   | Eng-Siew Koh           | Active          | 24-Jun-16       | 7                     |
| 2                                | Royal Brisbane and Women's Hospital | QLD   | Zarnie Lwin            | Active          | 30-Sep-16       | 2                     |
| 3                                | St Vincent's Hospital, Melbourne    | VIC   | Anthony Dowling        | Active          | 14-Nov-16       | 0                     |
| 4                                | Epworth Healthcare                  | VIC   | Ross Jennens           | Active          | 20-Feb-17       | 0                     |
| 5                                | Sir Charles Gairdner Hospital       | WA    | Anna Nowak             | Active          | 4-Apr-17        | 0                     |
| 6                                | Royal Hobart Hospital               | TAS   | Rosemary Harrup        | Active          | 28-Aug-17       | 0                     |
| 7                                | Prince of Wales Hospital            | NSW   | Elizabeth Hovey        | To be initiated | Pending         | -                     |
| 8                                | Chris O'Brien Lifehouse             | NSW   | John Simes             | To be activated | Pending         | -                     |
| 9                                | Flinders Medical Centre             | SA    | Ganessan Kichenadasse  | To be initiated | Pending         | -                     |
| 10                               | St George Hospital                  | NSW   | Tracey Dunlop          | SSA in progress | Pending         | -                     |
| 11                               | St Vincent's Hospital, Sydney       | NSW   | Cecelia Gzell          | SSA in progress | Pending         | -                     |
| Total Recruitment                |                                     |       |                        |                 |                 | 9                     |

**CABARET Study: A randomised phase II study of Carboplatin and Bevacizumab in Recurrent Glioblastoma Multiforme (GBM)**

The CABARET team have been very busy since the main results of the CABARET study were published, working on further manuscripts. We are now happy to report that we have another CABARET paper recently published since our last newsletter. The role of early MRI in predicting survival paper was recently e-published in *Cancer* on the 5<sup>th</sup> July 2017: *The role of early MRI in predicting survival while on bevacizumab in recurrent glioblastoma: results from a prospective clinical trial (CABARET)*. doi: 10.1002/cncr.30838

Congratulations to Dr Kathryn Field and all the co-authors on their dedication and hard work and to all those who were involved in the CABARET trial. If you have any enquiries regarding the CABARET study please don't hesitate to contact the CABARET team by email [cabaret@ctc.usyd.edu.au](mailto:cabaret@ctc.usyd.edu.au).

**CATNON (EORTC 26053-22054): Phase III trial on concurrent and adjuvant Temozolomide chemotherapy in non-1p/19q deleted anaplastic glioma**

The interim results from CATNON were recently published in the *Lancet*. A PDF version has been sent to sites and the link to this publication is [http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(17\)31442-3.pdf](http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(17)31442-3.pdf). Thanks to everyone. You have all contributed to getting CATNON to this stage.

A protocol amendment has resulted from IDMC recommendations based on the interim analysis findings. Protocol v5.0, 28Jun2017 has been sent to sites for local approval. Please remember to send us copies of the approvals once received and let us know if you or your site have any questions.

There has been a decrease in the number of queries and missing CRFs requested by the EORTC. We've streamlined internal processes which we believe has helped and also credit site staff for their attention to these queries and reports. During the follow-up phase, we ask that you continue to send visit CRFs and respond to EORTC queries in a timely manner. The study team can be reached at [catnon@ctc.usyd.edu.au](mailto:catnon@ctc.usyd.edu.au). Thanks as always for your ongoing efforts and support of CATNON.

**NUTMEG (COGNO 16/01): A Randomised Phase II Study of Nivolumab and Temozolomide vs Temozolomide alone in newly diagnosed Elderly patients with Glioblastoma (NUTMEG)**

The NUTMEG trial aims to determine the activity of nivolumab added to adjuvant Temozolomide (TMZ), as measured by overall survival (OS) in GBM patients who are 65 years of age or older. This trial aims to recruit 102 patients across up to 18 sites in Australia and possibly New Zealand. The trial is currently in its start-up phase, aiming to open in Q4 2017 / Q1 2018. The trial team is currently in the process of finalising contracts, eCRF database and study documentation. Currently 14 of 18 potential sites have confirmed their participation. If your site is interested to join, please contact the trial team.

| <b>NUTMEG - PARTICIPATING SITES</b> |                                     |              |                               |
|-------------------------------------|-------------------------------------|--------------|-------------------------------|
| <b>No</b>                           | <b>Site name</b>                    | <b>State</b> | <b>Principal Investigator</b> |
| 1                                   | Royal North Shore Hospital          | NSW          | Michael Back                  |
| 2                                   | Prince of Wales Hospital            | NSW          | Elizabeth Hovey               |
| 3                                   | Chris O'Brien Lifehouse             | NSW          | John Simes                    |
| 4                                   | Gosford Hospital                    | NSW          | Matthew Wong                  |
| 5                                   | Campbelltown Hospital               | NSW          | Annette Tognela               |
| 6                                   | Peter MacCallum Cancer Centre       | VIC          | Kathryn Field                 |
| 7                                   | Epworth Healthcare                  | VIC          | Ross Jennens                  |
| 8                                   | Austin Hospital                     | VIC          | Hui Gan                       |
| 9                                   | Royal Brisbane and Women's Hospital | QLD          | Zarnie Lwin                   |
| 10                                  | Princess Alexandra Hospital         | QLD          | Katharine Cuff                |
| 11                                  | ICON Cancer Care Wesley             | QLD          | Paul Eliadis                  |
| 12                                  | Flinders Medical Centre             | SA           | Ganessan Kichenadasse         |
| 13                                  | Sir Charles Gairdner Hospital       | WA           | Anna Nowak                    |
| 14                                  | Royal Hobart Hospital               | TAS          | Rosemary Harrup               |

The NUTMEG Investigator Meeting was held on the 22<sup>nd</sup> October 2017 at the Rydges Hotel in Melbourne. It was well attended, having representation from nearly all of the selected sites. The NUTMEG team felt that it was a very productive and interactive meeting and it was great to hear your comments and questions.

The highlight of the Investigator Meeting was hearing A/Prof Ben Ellingson from ULCA Brain Tumor Imaging Laboratory (BTIL) present the novel MRI imaging methodology that he will be using for the NUTMEG protocol. A/Prof Ben Ellingson and his team at BTIL, ULCA will be responsible for the central imaging review and exploratory Advanced MRI sub study and we are looking forward to this collaboration.



The NUTMEG Trial Coordinator is more than happy to provide any information that you may require on this study. Please email [nutmeg@ctc.usyd.edu.au](mailto:nutmeg@ctc.usyd.edu.au) if you have any queries.

**VERTU (COGNO 14/01): VEliparib, Radiotherapy and Temozolomide trial in Un-methylated MGMT Glioblastoma. A Randomised Phase II study of veliparib + radiotherapy (RT) with adjuvant temozolomide (TMZ) + veliparib versus standard RT + TMZ followed by TMZ in patients with newly diagnosed glioblastoma (GBM) with unmethylated O (6)-methylguanine-DNA methyltransferase (MGMT)**

The VERTU trial aims to recruit 120 patients across 18 sites. As of 2nd November 2017, 260 patients have been registered for screening and 75 were enrolled into the trial. This means that we have now achieved nearly 65% of total recruitment.

Recruitment is improving since the end of quarter 2 of 2017 with June and July having the highest amount of newly registered screening patients since the start of the trial (18 each). These are promising trends and a direct reflection of all staff's efforts. Thank you all. The VERTU Trial Coordinator is more than happy to provide any information that you may require on this study. Please email [vertu@ctc.usyd.edu.au](mailto:vertu@ctc.usyd.edu.au) if you have any queries.

| VERTU - PARTICIPATING SITE STATUS |                                     |       |                        |             |                 |                       |                     |
|-----------------------------------|-------------------------------------|-------|------------------------|-------------|-----------------|-----------------------|---------------------|
| No                                | Site name                           | State | Principal Investigator | Site status | Site activation | # Patients registered | # Patients enrolled |
| 1                                 | Canberra Hospital                   | ACT   | Ganesalingam Pranavan  | Active      | 27/02/2017      | 5                     | 3                   |
| 2                                 | Royal North Shore Hospital          | NSW   | Helen Wheeler          | Active      | 9/11/2015       | 44                    | 9                   |
| 3                                 | Westmead Hospital                   | NSW   | Najmun Nahar           | Active      | 27/07/2017      | 2                     | 1                   |
| 4                                 | Chris O'Brien Lifehouse             | NSW   | John Simes             | Active      | 26/11/2015      | 19                    | 8                   |
| 5                                 | Liverpool Hospital                  | NSW   | Eng-Siew Koh           | Active      | 21/01/2016      | 31                    | 9                   |
| 6                                 | St George Hospital                  | NSW   | Tracey Dunlop          | Active      | 4/07/2017       | 4                     | 1                   |
| 7                                 | Gosford Hospital                    | NSW   | Matthew Wong           | Active      | 7/06/2016       | 16                    | 9                   |
| 8                                 | Royal Melbourne Hospital            | VIC   | Mark Rosenthal         | Active      | 28/10/2015      | 10                    | 1                   |
| 9                                 | University Hospital Geelong         | VIC   | David Ashley           | Active      | 21/01/2016      | 17                    | 7                   |
| 10                                | Epworth Healthcare                  | VIC   | Ross Jennens           | Active      | 14/12/2015      | 13                    | 3                   |
| 11                                | Monash Medical Centre               | VIC   | Ronnie Freilich        | Active      | 11/02/2016      | 5                     | 0                   |
| 12                                | Border Medical Oncology             | VIC   | Christopher Steer      | Not active  | Not active      | 0                     | 0                   |
| 13                                | Royal Brisbane and Women's Hospital | QLD   | Zarnie Lwin            | Active      | 9/11/2015       | 34                    | 14                  |
| 14                                | Princess Alexandra Hospital         | QLD   | Matthew Foote          | Active      | 5/07/2016       | 18                    | 2                   |
| 15                                | Royal Adelaide Hospital             | SA    | Nimit Singhal          | Active      | 24/03/2016      | 21                    | 2                   |
| 16                                | Royal Hobart Hospital               | TAS   | Rosemary Harrup        | Active      | 2/12/2015       | 15                    | 4                   |
| 17                                | Launceston General Hospital         | TAS   | Stan Gauden            | Active      | 12/12/2016      | 6                     | 3                   |
| <b>Total recruitment</b>          |                                     |       |                        |             |                 | <b>260</b>            | <b>76</b>           |





**COGNO**  
COOPERATIVE TRIALS GROUP  
FOR NEURO-ONCOLOGY

### MANAGEMENT COMMITTEE

Prof Anna Nowak (Chair)  
Dr Eng-Siew Koh (Deputy Chair)  
Dr Liz Hovey (Treasurer)  
Prof Meera Agar  
Ms Marcia Fleet  
Dr Sanjeev Gill  
Dr Cecelia Gzell  
A/Prof Georgia Halkett  
Prof Terry Johns  
Ms Robyn Leonard  
Dr Jonathon Parkinson  
Prof Mark Rosenthal

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Ms Robyn Leonard  
A/Prof Kerrie McDonald  
Prof Anna Nowak  
Prof Mark Rosenthal  
Prof John Simes  
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Dr James Whittle

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Dr Liz Hovey (Treasurer)  
Ms Liz Barnes  
Ms Candace Carter  
Ms Jenny Chow  
Mrs Merryn Hall  
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## NEW CONCEPTS/TRIALS IN DEVELOPMENT

### Do you have an idea for a potential study?

The COGNO SAC (Scientific Advisory Committee) meets via teleconference 3 times a year, and hosts an open, face-to-face meeting during the COGNO ASM. During the SAC meeting, new protocols are presented both by the proposer and also by the COGNO-appointed scientific and consumer reviewer/s before a wider discussion by the Committee.

There are also opportunities to bring new ideas to COGNO throughout the year, including bringing nascent ideas to our annual Ideas Generation Workshop.

If you have a great idea, but not necessarily the resources or time to develop it into an actual protocol, you are welcome to contact the COGNO SAC to discuss how we can assist in concept development.

If you become aware of a funding opportunity during the year which might be of relevance to COGNO, or for which you would like to involve COGNO in your application, please do let us know! Under these circumstances, we can facilitate urgent COGNO SAC review and COGNO input to assist you in refining your proposal, building your team, and hopefully improving your chances of a successful application.

If you require any further information please email [candace.carter@ctc.usyd.edu.au](mailto:candace.carter@ctc.usyd.edu.au).

*Dr Liz Hovey and Dr Eng-Siew Koh, on behalf of the COGNO SAC and COGNO community*

## STRATEGIC PLANNING DAY

COGNO held a Strategic Planning Day on 1 September in Melbourne - a report is currently under preparation and will be circulated to membership for feedback.



Prof Anna Nowak and others at the COGNO Strategic Planning Day

## CREST WORKSHOP ON PREFERENCES IN CANCER RESEARCH

Thank you to COGNO for funding my attendance at a CREST workshop in Sydney about Discrete Choice Experiments (DCEs). I have been growing increasingly interested in the potential of DCEs to understand patient and health professional choices for different models of care, and this was a great opportunity to understand both the theory behind them, and some of the practical elements around experiment design and analysis. The team from CHERE (Centre for Health Economics Research and Evaluation) at UTS provided a range of presentations showcasing their extensive experience in conducting DCEs. I particularly enjoyed the examples, which really the theory come alive and showcased the potential of this method. I do hope to conduct a DCE in the cancer area (hopefully neuro-oncology in particular) in the future!

*Dr Danette Langbecker*

## COGNO TEAM UPDATE



We farewell Martijn Oostendorp and thank him for his hard work as trial coordinator for VERTU and NUTMEG. Welcome to Lauren Fisher, new trial coordinator for the VERTU and NUTMEG trials. Lauren has a clinical trials background having previously worked as an oncology clinical research coordinator at the Clinical Research Unit at St George Hospital in Radiation Oncology and prior to that she was working at Neuroscience Research Australia (NeuRA).

**Congratulations to John Simes**, who received the University of Sydney's Vice Chancellor's Award for Outstanding Research.

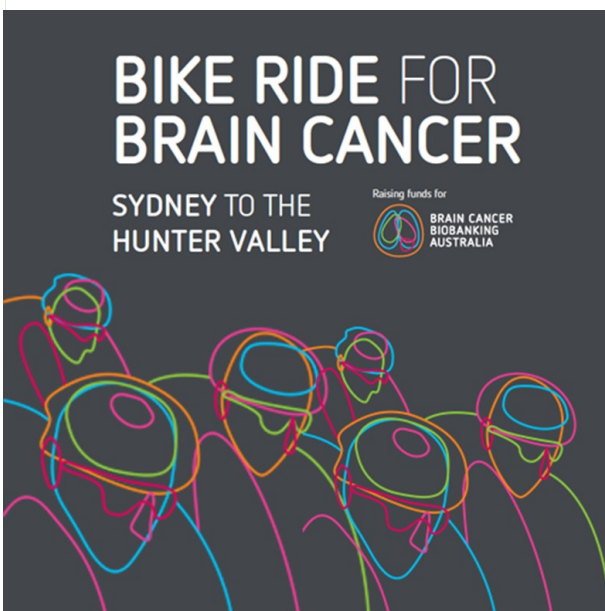


"This award recognises John's many accomplishments and contributions to clinical trials research. Under John's leadership, the NHMRC Clinical Trials Centre has had a key role in national and international trials networks. With a career spanning four decades, John is energetically and inspirationally committed to research and the life-changing benefits to those affected, as well as the wider community. His personal and professional dedication has achieved significant outcomes and he wholeheartedly deserves this recognition."

*Prof Anthony Keech, Deputy Director NHMRC CTC*

## MEMBERSHIP UPDATE

COGNO now has 656 members! Help us expand our Group's expertise and networking capacity. If you know someone who would like to join, you can refer prospective members to our online membership application on our website ([www.cogno.org.au](http://www.cogno.org.au)) or office ([cogno@ctc.usyd.edu.au](mailto:cogno@ctc.usyd.edu.au)).



Brain Cancer Biobanking Australia (BCBA) will be holding a 2 day fundraising Bike Ride for Brain Cancer - 250km from Sydney to the Hunter Valley - 9<sup>th</sup> and 10<sup>th</sup> March 2018. The date coincides with the birthday of Lucie Leonard, who died from brain cancer in 2012, and is the inspiration for the establishment of BCBA by her mother, Robyn Leonard. We would like to invite all the semi experienced and experienced cyclists amongst you to join this inaugural ride and raise funds to support BCBA's ongoing

effort to advance brain cancer research. For further details, including registering for the ride visit <http://www.bikerideforbraincancer.com.au/>.



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