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The National Centre in HIV Epidemiology and Clinical Research (NCHECR) was established in 1986 by the Australian Government to fulfil a number of key roles in Australia’s fight against HIV/AIDS.

Located on the campus of St Vincent’s Hospital in Sydney, the Centre is directly affiliated with the Faculty of Medicine at the University of New South Wales, and receives its core funding through the Australian Government Department of Health and Ageing.

NCHECR's primary functions relate to the coordination of national surveillance programs and clinical trials. While its original focus was exclusively on HIV/AIDS, NCHECR's work has expanded to encompass hepatitis B and C, and sexually transmissible infections. NCHECR also conducts research into the transmission, prevention and natural history of these infections. NCHECR’s research program has increasingly taken on a regional focus, with major collaborative programs in Thailand and Cambodia. Other functions of NCHECR include the training of health professionals, and input into the development and implementation of health policy and programs.

NCHECR carries out its functions by working with an extensive range of collaborators, including State and Territory Health Departments, public and private clinical units, national and international organisations, and the corporate sector. It also works closely with the other national HIV research centres.

Dissemination of NCHECR’s research output is undertaken through publication in scientific journals and a range of surveillance reports.

The Director is supported in the overall management of the Centre by the Executive Committee. As well as the Director, Executive members are the Deputy Director, the Manager of Finance and Administration and the Head of the Therapeutic and Vaccine Research Program.

The Centre conducts its research through seven scientific Programs:

- Surveillance
- Therapeutic and Vaccine Research
- HIV Epidemiology and Prevention
- Viral Hepatitis
- Primary HIV Infection Research
- Biostatistics and Databases
- Laboratory Support

The Program Heads, along with the Director, the Deputy Director, the Manager of Finance and Administration and the Business Manager, form the Program Management Committee, which is responsible for overseeing the scientific activities of the Centre.

What is NCHECR?

Program Management Committee

Back Row: Greg Dore, Matthew Law, John Kaldor, David Cooper, Don Smith
Front Row: Sean Emery, Tony Kelleher, Annie Tung, Bronwen Turner, Andrew Grulich
The NCHECR is funded by the Australian Government Department of Health and Ageing, through the Faculty of Medicine at the University of New South Wales, to coordinate national surveillance and carry out clinical and epidemiological research related to HIV/AIDS, viral hepatitis and sexually transmissible infections.

During the course of 2003, NCHECR completed several major projects. The ROSEY study, a double-blind placebo controlled trial entirely developed and run by NCHECR, was a major achievement, even though the result was disappointing in that the proposed therapy did not prove to be effective. In public health, NCHECR played a central role in the evaluation of Australia’s first supervised injecting centre, located in King’s Cross, with a final report being presented to the NSW Government in the middle of the year.

Major ongoing clinical investigations included ESPRIT and SILCAAT, the large clinical end-point studies of interleukin-2 as an immunomodulatory treatment for HIV, which continued their progress in a number of countries, with NCHECR playing a central coordination role in Australia and overseas. Work began in earnest on the program of research into the pathogenesis and treatment of primary HIV infection, being conducted under a grant from the US National Institutes of Health (NIH), in collaboration with Massachusetts General Hospital.

Enrolment continued in one of the largest cohort studies of gay men in the world, reaching over 1,400 by the end of 2002. This cohort is funded by the NIH, through the Australia-Thailand Vaccine Consortium, which launched the first trial of an Australian-developed agent as a prophylactic vaccine against HIV infection. The trial aimed to investigate the safety and immunogenicity of the agent.

A new and exciting project that began during 2003 involved the recruitment of people newly infected with hepatitis C through injecting drug use. The aims of the study, also funded by the NIH, are to gain a deeper understanding of hepatitis C pathogenesis, and options for early treatment.

Collaborative research ventures in the Asia Pacific Region continued to flourish. Through funding from the American Foundation for AIDS Research, NCHECR was designated as the point of coordination for an observational data base that included a number of countries from the Region. The HIV-NAT program in Bangkok has become, more than ever, the leading site for HIV clinical research in the Region, and NCHECR’s role in Cambodia evolved, with more staff being stationed with the Ministry of Health, on secondment from NCHECR.

NCHECR could not conduct any of its research activities without the support and collaboration of a wide range of organisations and individuals in Australia and internationally. We express our ongoing gratitude for these highly productive relationships. We would also like to acknowledge the crucial contribution made by the participants in the clinical and epidemiological projects that are undertaken by NCHECR.
Margaret MacDonald

15 June 1956 – 29 September 2003

Margaret MacDonald, who died suddenly, was a unique and wonderful individual and an outstanding contributor to our knowledge about injecting drug use and its harms.

Margaret joined the research team at the National Centre in HIV Epidemiology and Clinical Research in 1992, making a transition from her already successful career as a specialist nurse in paediatric intensive care.

She quickly became involved in several key projects in disease surveillance. The annual national survey of needle and syringe programs that she developed became the cornerstone of much of her research, including the work for her doctorate. The survey was initially developed at a small number of sites. By the time of the 2003 survey, which was scheduled to begin the day Margaret died, nearly 50 sites were involved across the country in the collection of blood specimens and behavioural questionnaires from more than 2,500 participants. This innovative surveillance mechanism has guided Australia’s response to the risk of blood-borne viral transmission through injecting drug use.

In 2002, Margaret completed a comprehensive international analysis that showed a strong association between the implementation of needle and syringe programs and lower levels of HIV and hepatitis C infection. She had key responsibilities in the evaluation, published just two months ago, of Australia’s first supervised injecting room. Over the past year she was appointed as a World Health Organisation consultant to assist the Malaysian government in conducting behavioural and viral surveillance in difficult-to-reach populations.

She is survived by her partner of nine years, Kate Dolan.
The following sections describe NCHECR achievements and activities within Programs during 2003. Each project report lists any sources of funding beyond the NCHECR core grant that were used to fund the activity, as well as NCHECR personnel and external collaborators involved with the project. Three senior NCHECR personnel are not named in the project reports because they have a wide range of supervisory roles, as follows:

The Director, David Cooper directly supervises the Heads of the Programs in Therapeutic and Vaccine Research and Laboratory Support. He takes specific responsibility as a named Principal Investigator or externally recognised leading investigator in the following projects: ESPRIT, SILCAAT, INITIO, the Vaccine Design and Development Project, AIEDRP, SMART and STACCATO. He is also an active Co-Director of HIV-NAT, the clinical research collaboration in Bangkok, Thailand, and a member of the Steering Committee of the Cambodian Treatment Access Program.

The Deputy Director, John Kaldor, supports the Director, and directly supervises the Surveillance Program, and the Heads of the Programs in HIV Epidemiology and Prevention, Viral Hepatitis, Primary HIV Infection Research and Biostatistics and Databases. He takes specific responsibility as a named Principal Investigator or externally recognised leading investigator in the following projects: AIEDRP, the HIV prevention trial in Cambodia, the Cambodian research program to support the optimal use of antiretroviral therapy, the project on natural history and treatment for newly acquired hepatitis C, as well as NCHECR’s contribution to the HIV/AIDS Prevention and Care Project Phase II in Indonesia and to the evaluation of the Medically Supervised Injecting Centre in Sydney.

Sean Emery is Head of the Program in Therapeutic and Vaccine Research. In this capacity he has a particular supervisory role for all projects that fall within the Program, and takes specific responsibility as a named Principal Investigator or externally recognised leading investigator in the following projects: ESPRIT, SILCAAT, the Vaccine Design and Development Project, SMART, PHIDISA and Pacific, and provides project related support to HIV-NAT.
Surveillance Program

During 2002, the NCHECR Surveillance Program and the Australian Institute of Health and Welfare (AIHW) developed an agreement for the Surveillance Program to become an AIHW collaborating unit. Under the agreement, data obtained from States and Territories through national surveillance procedures gain legal standing through the AIHW Act.

The NCHECR Surveillance Program has continued to monitor the pattern of transmission of HIV, hepatitis B and C, and specific sexually transmissible infections in Australia in 2002, in collaboration with the Australian Government Department of Health and Ageing, State and Territory health authorities and collaborating networks.

Detailed analyses and interpretation of recent trends in new diagnoses of HIV/AIDS, viral hepatitis and sexually transmissible infections, and estimates of HIV and hepatitis C prevalence and incidence in higher and lower risk population subgroups, were published in **HIV/AIDS, viral hepatitis and sexually transmissible infections in Australia Annual Surveillance Report 2003**. The **Annual Surveillance Report 2003** was the seventh successive issue of the **Annual Surveillance Report** and was formally released by Associate Professor Cindy Shannon at the 14th Annual Conference of the Australasian Society for HIV Medicine in Cairns in October 2003.

The Australian HIV public access dataset was released for the first time in 2003, and complements the Australian AIDS public access dataset which has been available since 2001.

The **Annual Surveillance Report 2003** indicated that the number of AIDS cases remained relatively stable at around 200 cases each year in 1999 – 2002.

Following a steady decline in the annual number of new diagnoses of HIV infection from 1993 to 1998, the number of new diagnoses increased to 808 by 2002. The number of diagnoses of newly acquired HIV infection also increased from 151 in 1998 to 241 in 2002, the highest number of reported diagnoses since commencement of surveillance for newly acquired HIV infection in 1991. HIV transmission occurred primarily through sexual contact between men. There was no evidence of an increase in HIV transmission through injecting drug use or heterosexual contact.

An estimated 13,120 people were living with HIV/AIDS in Australia at the end of 2002 and around 50% were receiving antiretroviral treatment for HIV infection. Survival following AIDS had increased from 17.4 months in 1993 to 38.4 months in 1999. A report on the substantial improvement in survival following AIDS dementia complex in the era of highly active antiretroviral treatment was published in the journal **AIDS** in 2003.

An analysis of the pattern of late HIV presentation among people diagnosed with AIDS in Australia was published in the **Australian and New Zealand Journal of Public Health** in 2003.


Diagnoses of hepatitis C infection reported through the National Notifiable Diseases Surveillance System declined from 20,465 in 2000 to 15,953 in 2002. Hepatitis C transmission occurred predominantly among people with a recent history of injecting drug use. Results available through the Collaboration of Australian Needle and Syringe Programs showed that hepatitis C prevalence among men and women who had been injecting drugs for less than three years increased from 17% in 1998 to 38% in 2002. Hepatitis C prevalence also increased among people aged less than 20 years, from 22% in 1998 to 38% in 2002.

An estimated 168,000 people were living with hepatitis C infection in Australia in 2002, including 133,000 people with chronic hepatitis C infection and stage 0/1 liver disease, 29,000 with stage 2/3 liver disease and 6,900 living with hepatitis C related cirrhosis. In 2002, an estimated 1,640 people were treated with ribavirin and interferon combination treatment for hepatitis C infection. The Australia and New Zealand Liver Transplant Register reported hepatitis B and hepatitis C was the primary cause of liver disease in 9.9% and 27.2% of liver transplants in 2002, respectively.

Chlamydia was the most frequently reported notifiable communicable infection in Australia in 2002. The number of new diagnoses increased from 14,000 in 1999 to over 24,000 in 2002. The population rate of diagnosis of gonorrhoea also increased slightly, but the rate of diagnosis of syphilis declined.
The *Australian HIV Surveillance Report* continued to be published in 2003, providing quarterly updates on the number of new diagnoses of HIV/AIDS and HIV prevalence and incidence among people seen through a network of metropolitan sexual health clinics. Brief reports on topics of special interest in HIV/AIDS epidemiology were also published in the *Australian HIV Surveillance Report*. An assessment of underreporting of AIDS, evaluated by matching AIDS cases notified to the National AIDS Registry as having died to deaths registered with the National Death Index, was published in the January 2003 issue. The assessment indicated almost complete notification of AIDS and death following AIDS for AIDS cases diagnosed in 1988 – 1997. The clinical implications of late HIV presentation were discussed in the context of a case report in the April 2003 issue of the *Australian HIV Surveillance Report*. In the July 2003 issue, a continuing trend of increasing CD4+ cell count at AIDS diagnosis was reported among people with AIDS whose HIV diagnosis was at least three months prior to AIDS. The October 2003 issue included a report on the National Donovanosis Eradication (Elimination) Project 2001–2004.

In October 2003, the NCHECR Surveillance Program hosted the seventh annual workshop of national HIV/AIDS surveillance programs from Europe, North America and Australia. Representatives of Canada, the United States, Europe as a whole, Australia, France, Italy and the United Kingdom attended the meeting. Methodological issues in HIV/AIDS surveillance such as use of incidence assays for monitoring HIV transmission, development of statistical methods for modelling HIV transmission, methods for monitoring HIV subtype, and methods for monitoring HIV infection in special populations such as Indigenous people and immigrants, were discussed during the two day meeting.

**National surveillance coordination and information dissemination**

**Support for national surveillance committees**

The National HIV Surveillance Committee, the National Viral Hepatitis Surveillance Committee and the Sexually Transmissible Infections Surveillance Committee each co-ordinate ongoing national surveillance activities within their terms of reference including the development of new initiatives in case surveillance, new analyses of surveillance data, development of standardised surveillance procedures, and communication with and feedback of surveillance outputs to organisations directly involved in surveillance activities.

**HIV/AIDS, viral hepatitis and sexually transmissible infections in Australia Annual Surveillance Report**

Detailed analyses and interpretations of national surveillance data on HIV/AIDS, viral hepatitis and sexually transmissible infections are published in *HIV/AIDS, viral hepatitis and sexually transmissible infections in Australia Annual Surveillance Report*.

**Australian HIV Surveillance Report**

The *Australian HIV Surveillance Report* provides quarterly updates on the number of new diagnoses of HIV infection and AIDS and estimates of HIV incidence and prevalence through a network of sexual health clinics. Articles on topics of special interest in HIV epidemiology are also published in the *Australian HIV Surveillance Report*.

**Australian HIV Surveillance Report**

The *Australian HIV Surveillance Report*, in its current format, has been published each quarter from July 1990.

**Ann McDonald, Andrew Grulich, Greg Dore, John Kaldor, Melanie Middleton**

In October 2003, the NCHECR Surveillance Program hosted the seventh annual workshop of national HIV/AIDS surveillance programs from Europe, North America and Australia. Representatives of Canada, the United States, Europe as a whole, Australia, France, Italy and the United Kingdom attended the meeting. Methodological issues in HIV/AIDS surveillance such as use of incidence assays for monitoring HIV transmission, development of statistical methods for modelling HIV transmission, methods for monitoring HIV subtype, and methods for monitoring HIV infection in special populations such as Indigenous people and immigrants, were discussed during the two day meeting.

**Ann McDonald, Andrew Grulich, Greg Dore, John Kaldor, Melanie Middleton**
Surveillance for HIV/AIDS

Monitoring cases of AIDS

The past pattern of HIV transmission, the pattern of illness associated with advanced HIV immunodeficiency and the impact of antiretroviral treatment on the pattern of illness is monitored through national AIDS surveillance.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald, Melanie Middleton, Handan Wand
Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections

Monitoring cases of newly diagnosed HIV infection

The pattern of HIV transmission is monitored through national surveillance for newly diagnosed HIV infection, potentially providing information on more recent patterns of HIV transmission than does AIDS surveillance.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald, Handan Wand
Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections

Monitoring diagnoses of newly acquired HIV infection

Diagnoses of newly acquired HIV infection are monitored to provide an indication of the current pattern of HIV transmission in Australia.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald
Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections

Monitoring perinatal exposure to HIV

The extent and outcome of perinatal exposure to HIV in Australia, including risk factors for perinatal HIV transmission, is monitored to indicate the rate of mother-to-child HIV transmission, the impact of interventions for reducing the risk of perinatal HIV transmission and HIV prevalence among childbearing women.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald

Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections

Monitoring long-term outcome of newly acquired HIV infection

The long-term outcome of HIV infection is monitored among cases with a known date of HIV acquisition that have progressed to AIDS.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald, Handan Wand
Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections

Monitoring HIV transmission through specialised tests for incident HIV infection

Specialised tests for diagnosing incident HIV infection are evaluated by comparison with the results of national surveillance for newly acquired HIV infection.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald
Collaborators: NSW State Reference Laboratory for HIV; State and Territory health authorities; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections

Monitoring HIV subtypes among new HIV diagnoses

HIV subtype is ascertained among cases of newly acquired HIV infection and cases whose exposure to HIV was attributed to sources other than male homosexual contact.

Status: Funding was been obtained for employment of a national study co-ordinator, and for laboratory tests.
Personnel: Mary Poynten, Ann McDonald, Melanie Middleton
Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit; networks involved in surveillance for HIV/AIDS, viral hepatitis and sexually transmissible infections
Funding: National Centre for HIV Virology Research
Monitoring survival following HIV/AIDS diagnosis in Australia

The date and cause of death among people with diagnosed HIV infection and AIDS is obtained through linkage to deaths registered with the National Death Index, and the pattern of survival following HIV/AIDS diagnosis analysed and modelled.

Status: Ethics Committee clearance has been obtained through UNSW and the Australian Institute of Health and Welfare.
Personnel: Ann McDonald, Matthew Law, Fatemeh Nakhaee (PhD student)
Collaborators: Australian Institute of Health and Welfare; State and Territory health authorities

Assessment of self-report of HIV exposure history

Documentation of self-report of exposure to HIV is obtained through structured sexual history taking among cases of newly diagnosed HIV infection whose exposure was attributed to sources other than male homosexual contact

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Ann McDonald
Collaborators: State and Territory health authorities; Australian Paediatric Surveillance Unit

Surveillance for viral hepatitis

Monitoring cases of newly diagnosed hepatitis C

Notifications of newly acquired and newly diagnosed cases of hepatitis C to the National Notifiable Diseases Surveillance System (NNDSS) are tabulated. Additional information on newly acquired hepatitis C notifications, including risk factors for acquisition, is obtained from State and Territory health authorities.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Greg Dore, Melanie Middleton
Collaborators: State and Territory health authorities, Australian Government Department of Health and Ageing

Monitoring of long-term outcomes of chronic hepatitis B and C

Data is obtained from the Australian and New Zealand Liver Transplant Register on number and underlying cause (hepatitis B and C, other) for liver transplants performed.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Greg Dore
Collaborators: Australia and New Zealand Liver Transplant Register

Surveillance for sexually transmissible infections

A national framework for sexually transmissible infection (STI) control is developed through the Sexually Transmissible Infections Surveillance Committee.

Status: A report detailing the Committee's recommendations for reporting of National Notifiable Diseases Surveillance System (NNDSS) STI notifications was developed and presented to the Communicable Diseases Network. The Committee also finalised a report reviewing the jurisdictional procedures for STI surveillance, further refined the STI case definitions and continued its review of the prevalence of chlamydia in Australia.
Personnel: Claire Vajdic, Melanie Middleton
Collaborators: State and Territory health authorities, Australian Government Department of Health and Ageing, networks involved in surveillance for sexually transmissible infections

Surveillance in selected populations

Needle and syringe program surveys

Annual surveys are conducted over a one-week period at around 50 needle and syringe program (NSP) sites across Australia. Approximately 2,500 clients attending NSP sites complete a behavioural survey and have finger-prick blood samples taken for HIV and hepatitis C testing. This survey is the major tool for monitoring HIV and hepatitis C prevalence among injecting drug users in Australia.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Margaret MacDonald, Jialun Zhou, Megan Buddle, Greg Dore
Collaborators: Collaboration of Australian Needle and Syringe Programs, National Drug and Alcohol Research Centre, St Vincent's Hospital, Sydney, Macfarlane Burnet Institute for Medical Research and Public Health

Monitoring hepatitis C incidence among injecting drug users

Incidence of hepatitis C is monitored among injecting drug users attending the Kirketon Road Centre. All injecting drug users who are hepatitis C antibody seronegative and have had repeat testing are included in the analysis.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.
Personnel: Greg Dore
Collaborators: Kirketon Road Centre
Monitoring HIV prevalence and incidence through sexual health clinics

HIV prevalence and incidence is monitored among people seen at sexual health clinics who are voluntarily tested for HIV antibody as part of their clinical care.

**Status:** Ongoing during 2003, with publication in NCHECR's surveillance reports.

**Personnel:** Ann McDonald

**Collaborators:** Collaborative group on sentinel surveillance in sexual health clinics

Monitoring HIV antibody prevalence among prison entrants in Australia

State and Territory Departments of Corrections provide summaries of the number of men and women received into prison each quarter, the number who were voluntarily tested for HIV antibody and the number with diagnosed HIV infection.

**Status:** Ongoing during 2003, with publication in NCHECR's surveillance reports.

**Personnel:** Ann McDonald

**Collaborators:** State and Territory Departments of Corrections

Monitoring hepatitis C antibody prevalence through sexual health clinics

Hepatitis C prevalence is monitored among people seen through a network of sexual health clinics who are voluntarily tested for hepatitis C.

**Status:** Ongoing during 2003, with publication in NCHECR's surveillance reports.

**Personnel:** Ann McDonald, Greg Dore

**Collaborators:** Collaborative group on sentinel surveillance in sexual health clinics

Monitoring HIV and viral hepatitis among blood donors

Newly emerging patterns of transmission of HIV and viral hepatitis are monitored among blood donors, a subgroup of the population at low risk of infection who are compulsorily tested for blood borne viruses.

**Status:** Ongoing during 2003, with publication in NCHECR's surveillance reports.

**Personnel:** Melanie Middleton, Ann McDonald, Greg Dore

**Collaborator:** Australian Red Cross Blood Service

Behavioural surveillance for HIV risk factors among homosexual men

Repeated community-based cross sectional surveys of the risk behaviour of homosexual men.

**Status:** In 2003, surveys were conducted in Sydney (1,854 completed questionnaires in February; 687 completed questionnaires in August), Melbourne (2,064 completed questionnaires in February), Queensland (1,510 completed questionnaires in June), Adelaide (834 completed questionnaires in October) and Canberra (255 completed questionnaires in November).

**Personnel:** Garrett Prestage; Andrew Grulich

**Collaborators:** National Centre in HIV Social Research; Australian Federation of AIDS Organisations; National Association of People Living with HIV/AIDS

**Funding:** NSW Health Department; Department of Human Services, Melbourne; Queensland Health; South Australian Department of Human Services, ACT Department of Health, Housing and Community Care
Therapeutic and Vaccine Research Program

During 2003, recruitment into the ESPRIT study of interleukin-2 was completed at a little over 4,000 patients worldwide, making this the largest single randomised trial of an experimental intervention in HIV disease. NCHECR supports the conduct of this trial through regional governance and national coordination. Extended follow up of the ROSEY and MITOX studies were completed with results being presented at national and international meetings shortly thereafter. The ROSEY study showed that rosiglitazone does not offer a therapeutic option for most patients with lipoatrophy, but more optimistically, the MITOX extension study indicated that modest gains in peripheral fat were sustained for over one year in patients who switched away from thymidine analogue nucleoside reverse transcriptase inhibitors in their antiretroviral regimens. Work continued on the development of a study of subcutaneous poly-lactic acid injections to the face to correct facial lipoatrophy.

The NCHECR network completed recruitment into the ML16992 protocol studying a new fusion inhibitor T-20, with 59 subjects recruited in a little less than three months. Staff in the Therapeutic and Vaccine Research Program (TVRP) also commenced phase II of the implementation plan for the SMART study of treatment initiation strategies, by opening a further 14 sites to recruitment in Australia/New Zealand, and supporting the conduct of the study in Argentina. Recruitment into SMART went well through to the end of the year with all objectives being met.

After a period of acute funding uncertainty toward the end of 2002, new structures were implemented to continue the SILCAAT study of interleukin-2 after Chiron’s withdrawal. Once again NCHECR personnel played a significant role in leadership and operational support, and all study sites in Australia and Argentina distinguished themselves by their willingness to embrace the new funding structures and continue the protocol in dramatically different circumstances to those which existed when the study began.

TVRP personnel were invited to support an exciting new international collaboration in South Africa (called PHIDISA) sponsored through the US National Institutes of Health (NIH), the US Department of Defense and the South African National Defence Force. The program builds on existing bilateral Defence Force initiatives aimed at prevention of HIV transmission. The principal objectives of PHIDISA are to conduct rigorous randomised studies of treatment for HIV disease, to develop research and health care infrastructure and to guide the ongoing development health care policy in the region.

Several years of intense activity in both therapeutic and prophylactic vaccine research bore fruit during 2003. Completion of the therapeutic vaccine trial generated preliminary data indicating that vaccination with a recombinant fowlpox co-expressing HIV genes and human interferon-gamma led to reduced rates of virus replication in patients who subsequently ceased their antiretroviral therapy. Although further work is required to better understand the biological mechanisms of this outcome, these results are unique in the research area and warrant further clinical evaluation. TVRP personnel guided recruitment into the phase I study of a prophylactic vaccine under the NIH HIV Vaccine Design and Development Team Contract. A large multidisciplinary group involving community, social researchers and laboratory investigators designed this small study recruiting through St Vincent’s Hospital, Sydney. NCHECR was also required to liaise closely with the statutory bodies in Australia that have responsibility for oversight of human research involving recombinant technologies.

Throughout the year TVRP personnel supported the clinical trials network through combined working group meetings, workshops and ongoing project related coordination. Internally TVRP Standard Operating Procedures were subject to an independent audit across five projects, with results of this process contributing to the further strengthening of NCHECR’s compliance and Good Clinical Research Practice requirements.
Antiretroviral therapy

Studies closed to recruitment or completed during 2003

INITIO

A randomised trial to evaluate different therapeutic strategies of combination therapy for HIV infection.

**Status:** Recruitment closed April 2002 (Follow-up to be completed March 2004)

**Sites:** 28 (25 Australia, 2 New Zealand, 1 Brazil)

**Enrolled/target:** 171 (140 Australia and New Zealand, 31 Brazil)/100

**Personnel:** Dianne Carey, Susan Phipps

**Funding:** Medical Research Council, UK

Studies recruiting during 2003

SMART

A large, simple, trial comparing two strategies for management of antiretroviral therapy: this study is examining the impact of long-term HIV control by randomising patients to receive antiretrovirals to either maintain an undetectable viral load or maintain an acceptable CD4 count.

**Status:** Open May 2002

**Sites:** 22 Australia (21 open), 3 New Zealand (0 open), 1 Japan (0 open), 13 Argentina (0 open)

**Enrolled/target:** 79/200 Australia, 1,486/6,000 internationally

**Personnel:** Fraser Drummond, Sue Phipps, Claudette Satchell

**Funding:** US National Institutes of Health

ML16992

An open-label study to determine the efficacy and safety of enfuvirtide (T20, Fuzeon) in patients changing therapy to an NRTI-sparing regimen.

**Status:** Recruitment closed February 2003

**Sites:** 19

**Enrolled/target:** 59/60

**Personnel:** Gillian Hales

**Funding:** Roche Products Pty Ltd

STACCATO

The Swiss-Thailand-Australia Treatment Interruption Study. This study compares continuous therapy with intermittent therapy either based on CD4 cell count or on a fixed week on/week off regimen.

**Status:** Open October 2002

**Sites:** 6 (2 Australia, 1 Thailand, 1 Switzerland, 1 Canada, 1 Argentina)

**Enrolled/target:** 8/30 Australia, 397/600 internationally

**Personnel:** Fraser Drummond, Claudette Satchell

PHIDISA I


**Status:** In development

**Sites:** 6 military medical sites in Republic of South Africa

**Enrolled/target:** 700/unlimited

**Personnel:** Allison Martin

**Funding:** US National Institutes of Health; US Department of Defense; South African National Defence Force

PHIDISA II

A randomised, open-label 2x2 factorial study to compare the safety and efficacy of different combination antiretroviral therapy regimens in treatment naïve patients with advanced HIV disease and/or CD4+ cell counts < 200 cells/µL.

**Status:** In development

**Sites:** 6 military medical sites in Republic of South Africa

**Enrolled/target:** 30/2,800

**Personnel:** Allison Martin

**Funding:** US National Institutes of Health; US Department of Defense; South African National Defence Force
Studies in preparation 2003

Pacific
A comparison of once-daily antiretroviral therapy (ART) in HIV infected treatment-naïve subjects.

Status: In development
Sites: To be decided
Target: To be finalised
Personnel: Allison Martin

PHIDISA III
A randomised, controlled study to compare immediate versus deferred treatment with antiretrovirals alone or in combination with nutritional supplementation in patients with HIV infection and CD4+ cell counts ≥ 250 and <350 cells/µL and no category III or IV symptoms of disease (WHO criteria).

Status: In development
Sites: 6 military medical sites in Republic of South Africa
Target: 4,800
Personnel: Allison Martin
Funding: US National Institutes of Health; US Department of Defense; South African National Defence Force

Lipodystrophy studies

Studies closed to recruitment or completed during 2003

MITOX extension
A long-term comparative study of immediate versus deferred replacement of thymidine analogue with guanosine analogue in patients with lipoatrophy.

Status: Recruitment closed February 2003
Sites: 16
Enrolled/target: 82/105
Personnel: Allison Martin
Funding: GlaxoSmithKline

ROSEY
A randomised, double blind, placebo-controlled, multi-centre study of rosiglitazone for the treatment of HIV lipodystrophy with a 48-week open label extension phase.

Status: Recruitment closed June 2002
Sites: 17
Enrolled/target: 108/100
Personnel: Dianne Carey, Allison Martin
Funding: GlaxoSmithKline; Bristol-Myers Squibb

SAMA 001
Seronegatives, Antiretrovirals and Metabolic Abnormalities
A randomised study of the effect of treatment with zidovudine (AZT) and lamivudine (3TC) versus stavudine (d4T) and lamivudine (3TC) in HIV-negative healthy subjects on the development of abnormalities of lipid and glucose metabolism.

Status: Recruitment closed May 2003
Sites: 1
Enrolled/target: 20/20
Personnel: Paddy Mallon
Funding: US National Institutes of Health

Studies recruiting during 2003

SAMA 002
Seronegatives, Antiretrovirals and Metabolic Abnormalities
A randomised study of the effect of treatment with protease inhibitors versus non-nucleoside reverse transcriptase inhibitors in HIV-negative healthy subjects on the development of abnormalities of lipid and glucose metabolism.

Status: In development
Sites: 1
Target: 50
Personnel: Paddy Mallon
Funding: US National Institutes of Health

HAMA 001
HIV Infection and Metabolic Abnormalities
A prospective study of the effect of treatment with antiretroviral medications in HIV-infected individuals on the development of lipodystrophy, cardiovascular risk and bone metabolism.

Status: Recruitment opened March 2003
Sites: 1
Enrolled/target: 16/80
Personnel: Paddy Mallon
Funding: US National Institutes of Health

Study in preparation during 2003

Surgical correction of facial lipoatrophy
A randomised, open-label study to assess the safety, efficacy and durability of immediate versus deferred subcutaneous injections of polylactic acid in individuals with antiretroviral-associated facial lipoatrophy.

Status: In development
Sites: To be decided
Target: To be finalised
Personnel: Dianne Carey
**Immune-based therapies and vaccines**

**Studies closed to recruitment or completed during 2003**

**SILCAAT**

A phase III, multicentre, randomised study of the biological and clinical efficacy of subcutaneous recombinant, human interleukin-2 in HIV-infected patients with low CD4+ counts receiving active antiretroviral therapy.

**Status:** Recruitment closed October 2002  
**Sites:** 17 (12 Australia, 5 Argentina)  
**Enrolled/target:** 293 (126 Australia, 167 Argentina/125 Australia)  
**Personnel:** Sarah Pett, Brooke Cordwell, Cate Carey, David Courtney-Rodgers  
**Funding:** US National Institutes of Health

**ESPRIT**

A randomised, open-label, phase III, international study of subcutaneous recombinant interleukin-2 in patients with HIV infection and CD4 lymphocyte count greater than or equal to 300 cells/mm³.

**Status:** Recruitment closed May 2003  
**Sites:** 48 (23 Australia, 3 Japan, 1 Singapore, 5 Thailand, 13 Argentina, 3 Israel)  
**Enrolled/target:** 1,233/106% of enrolment target  
(205/247 Australia, 64/65 Israel, 365/300 Thailand, 20/20 Singapore, 354/494 Argentina, 25/35 Japan)  
**Personnel:** Sarah Pett, Cate Carey, David Courtney-Rodgers, Brooke Cordwell  
**Funding:** US National Institutes of Health

**ITV extension**

A double-blind placebo-controlled extension study to assess the antiretrovirological properties of a therapeutic HIV vaccine candidate based on recombinant fowlpox virus (rFPV) (ITV extension study).

**Status:** Recruitment closed April 2003  
**Sites:** 5  
**Enrolled/target:** 25/35  
**Personnel:** Rebekah Puls, Tony Kelleher  
**Funding:** Virax Immunotherapeutics

**Studies recruiting during 2003**

**HVDDT vaccine**

A randomised, placebo-controlled, double blind, phase I/IIa clinical trial to evaluate the safety and immunogenicity of a candidate clade B prophylactic DNA prime-rFPV boost HIV vaccination strategy.

**Status:** Open May 2003  
**Sites:** 1  
**Enrolled/target:** 23/24  
**Personnel:** Rebekah Puls, Tony Kelleher  
**Funding:** US National Institutes of Health

**Studies in preparation during 2003**

**HVDDT vaccine (AE#1)**

An open label, dose escalation study to assess safety and preliminary immunogenicity of a candidate clade A/E prophylactic DNA prime-rFPV boost HIV vaccination strategy.

**Status:** In development  
**Sites:** 1  
**Target:** 10  
**Personnel:** Rebekah Puls  
**Funding:** US National Institutes of Health

**HVDDT vaccine (AE#2)**

A randomised, partially blinded study to investigate the safety and immunogenicity of a candidate clade A/E prophylactic DNA prime-rFPV boost vaccination strategy employing different does of each vaccine.

**Status:** In development  
**Sites:** 1  
**Target:** 160  
**Personnel:** Rebekah Puls  
**Funding:** US National Institutes of Health

**Recombinant fowlpox #1**

A randomised, double blind placebo controlled trial to assess the safety and efficacy of two doses of recombinant fowlpox vaccine expressing HIV genes and human interferon-gamma in the treatment of HIV infected patients with asymptomatic disease and CD4+ cell counts >500 copies/µL.

**Status:** In development  
**Sites:** To be decided  
**Target:** 180  
**Personnel:** Rebekah Puls  
**Funding:** Undetermined
Recombinant fowlpox #2
A randomised double blind placebo controlled trial to assess the safety and efficacy of two dosing schedules of recombinant fowlpox vaccine expressing HIV genes and human interferon-gamma in the treatment of HIV infected patients with asymptomatic disease and CD4+ cell counts >500 copies/µL.

Status: In development
Sites: To be decided
Target: 120
Personnel: Rebekah Puls
Funding: Undetermined

HIV-NAT Studies
Studies closed to recruitment or completed 2003

HIV-NAT 009
An open-label, single-arm, non-randomised study to evaluate the efficacy, safety and tolerability of indinavir 800mg BID plus ritonavir 100mg BID, in combination with efavirenz 600mg OD, in HIV-1 infected patients who are pre-treated with and have failed combination nucleoside reverse transcriptase therapy.

Status: Recruitment closed October 2002
Sites: HIV-NAT
Enrolled/target: 60/60
Personnel: Mark Boyd
Funding: Merck Sharpe and Dohme

HIV-NAT 010
A randomised, open-label, comparative study to evaluate the efficacy, safety, and cost of immediate versus deferred therapy with AZT/3TC/NVP in HIV-infected Thai children with moderate immunodeficiency.

Status: Open January 2002
Sites: 3
Enrolled/target: 19/40

Personnel: Chris Duncombe
Funding: HIV-NAT; Ministry of Public Health, Thailand

ESPRIT
Phase III comparative study of subcutaneous recombinant IL-2 plus antiretrovirals versus antiretroviral alone. It is a multi-national trial with total volunteers of 4,000.

Status: Recruitment closed November 2002
Sites: 5
Enrolled/target: 300/300
Personnel: Chris Duncombe
Funding: US National Institutes of Health; Ministry of Public Health, Thailand; Merck Sharpe and Dohme; Bristol-Myers Squibb (Thailand); The Government Pharmaceutical Organization (Thailand)

SPD 754.201
Multinational phase II, randomised, double blind, placebo-controlled study to evaluate the antiretroviral activity, pharmacokinetics, genotyping and viral rebound after cessation of four different doses of a new nucleoside reverse transcriptase inhibitor. SPD 754.201.

Status: Open November 2002
Sites: HIV-NAT
Enrolled/target: 0/20
Personnel: Chris Duncombe
Funding: Shire Pharmaceutical Development Inc

AI-455-099
Evaluation of the safety and antiviral efficacy of stavudine extended release formulation as compared to stavudine immediate release formulation, each as part of a potent antiretroviral combination therapy.

Status: Open October 2000
Sites: 54 internationally
Enrolled/target: 15/35
Personnel: Chris Duncombe
Funding: Bristol-Myers Squibb

HIV-NAT 009
An open-label, single-arm, non-randomised study to evaluate the efficacy, safety and tolerability of indinavir 800mg BID plus ritonavir 100mg BID, in combination with efavirenz 600mg OD, in HIV-1 infected patients who are pre-treated with and have failed combination nucleoside reverse transcriptase therapy.

Status: Recruitment closed October 2002
Sites: HIV-NAT
Enrolled/target: 60/60
Personnel: Mark Boyd
Funding: Merck Sharpe and Dohme

STACCATO
The Swiss-Thai-Australia Treatment Interruption Study. This study compares continuous therapy with intermittent therapy either based on CD4 cell count or on a fixed week on/week off regimen.

Status: Open January 2002
Sites: 7
Enrolled/target: 100/300
Personnel: Chris Duncombe
Funding: F Hoffman-La Roche Ltd
HIV Epidemiology and Prevention Program

Work in the HIV Epidemiology and Prevention Program has been focussed in two main areas: HIV transmission and its prevention, and the natural history of HIV-related disease, with a major focus on HIV-related cancer.

The primary results of the Australian Survey of Health and Relationships, the most comprehensive survey of the sexual behaviour of Australians were published in 2003. This survey of the sexual behaviour and sexual health of over 19,000 Australians is one of the largest such studies on the world with particular relevance to HIV prevention. The study provided key information on sexual risk behaviour in homosexual men, and bisexual men and women. It also demonstrated poor levels of knowledge about sexually transmissible infections in the general population. The primary analyses were published as a special edition of the *Australian and New Zealand Journal of Public Health*.

During 2003, the vaccine preparedness cohort study, known as HIM, continued to grow. By the end of the year, there were 1,333 participants and 798 had attended for at least one follow up interview. In 2003 screening for chlamydia and gonorrhoea was added to the existing sexually transmissible agents that were assessed at baseline (hepatitis A and B, syphilis and HIV). This study will allow for a comprehensive analysis of the interaction between HIV and sexually transmissible infections in this population. Plans were developed during 2003 to add herpes simplex testing to the cohort.

The rapid increase in diagnoses of infectious syphilis in homosexual men in Sydney led to the development by the NCHECR of a study of risk factors for this resurgent sexually transmissible infection.

Another large-scale epidemiological study, the observational study of non-occupational post-exposure prophylaxis, had enrolled 1370 participants by the end of 2003. Data presented from this study at the 2nd IAS Conference on HIV Pathogenesis and Treatment in Paris during 2003 showed that there had been no infections related to treatment failure in this population.

In the field of HIV natural history, our study of diagnostic methods for anal intra-epithelial neoplasia was completed. This randomised controlled trial enrolled 151 homosexual men who all underwent sampling of anal cells by both a blind sampling method and with a proctoscope-guided technique. The study demonstrated a clear benefit of the blind technique with respect to specimen adequacy.

**HIV transmission and prevention research**

**Australian Survey of Health and Relationships**

A national random survey of the sexual behaviour of Australians aged 16-59 years.

**Status:** Over 19,000 individuals were selected by random digit telephone dialling, and underwent a detailed interview regarding sexual behaviour.

**Personnel:** Andrew Grulich

**Collaborators:** Australian Centre for Sex, Health and Society; Central Sydney Area Health Service; National Centre in HIV Social Research

**Funding:** Australian Government Department of Health and Ageing; Victorian Health Promotion Foundation; NSW, Queensland and Western Australian Health Departments; Central Sydney Area Health Service

**HIV vaccine preparedness cohort study (Health in Men (HIM) Study)**

A vaccine preparedness cohort study of HIV-negative homosexual men.

**Status:** By the end of 2003, 1,333 men had been enrolled. In addition to testing for HIV, hepatitis A and B and syphilis, testing for gonorrhoea and chlamydia in the urine, throat and anus was added to the study in 2003.

**Personnel:** Andrew Grulich, Garrett Prestage, Jeff Jin

**Collaborators:** National Centre in HIV Social Research; Australian Federation of AIDS Organisations

**Funding:** US National Institutes of Health; NSW Health Department; Becton Dickinson and Company

Back Row: Wayne Bleakley, Daniel Madeddu, Patrick McGrath, Harry Smith, Garrett Prestage, Jack Bradley, Brian Acraman

Front Row: Hagen Tuschke, Paul Kelly, Hedimo Santana
Interaction between sexually transmissible infections and HIV infection in the HIM study

A cohort study to examine the interaction between sexually transmissible infections and HIV incidence among initially HIV-negative homosexual men.

**Status:** 1,333 men enrolled by the end of 2003, of whom more than 95% consented to sexual health screening. 1,020 had been tested for gonorrhoea and chlamydia.

**Personnel:** Andrew Grulich, Garrett Prestage, Jeff Jin

**Collaborators:** National Centre in HIV Social Research; Basil Donovan, Cathy Pell, Sydney Sexual Health Centre

**Funding:** US National Institutes of Health; NSW Health Department; Becton-Dickinson

Transmission of hepatitis C in the Health in Men (HIM) Study

A cross sectional study of prevalence and risk factors for hepatitis C infection in homosexual men.

**Status:** Men enrolled in the HIM study in 2001 and 2002 were offered hepatitis C testing, and 824 consented.

**Personnel:** Andrew Grulich, Garrett Prestage, Jeff Jin, Greg Dore

**Collaborator:** National Centre in HIV Social Research

**Funding:** US National Institutes of Health; NSW Health Department

Risk factors for syphilis in homosexual men

A cross sectional study of risk factors for syphilis among men diagnosed with infectious syphilis in inner Sydney medical practices.

**Status:** 57 men were recruited in 2003, and recruitment ceased in December.

**Personnel:** Andrew Grulich, Garrett Prestage, Jeff Jin

**Collaborators:** National Centre in HIV Social Research; Taylor Square Private Clinic; Sydney Sexual Health Centre; Marrickville Sexual Health Centre; Holdsworth House General Practice; 407 Doctors

HIV natural history research

Time trends in AIDS lymphoma


**Status:** 300 cases of AIDS-related lymphoma occurring in Sydney hospitals between 1984 and 2002 were included. The median CD4 count at lymphoma diagnosis increased markedly from around 30 to 180, corresponding with the widespread introduction of effective antiretroviral therapy. Lymphoma became a more frequently occurring first AIDS-defining illness. In a multivariate model, survival from lymphoma improved by 50% in the era of highly active antiretroviral therapy.

**Personnel:** Andrew Grulich, Monica Robotin

**Collaborators:** St Vincent's Hospital, Sydney; Prince of Wales Hospital; Royal Prince Alfred Hospital

Diagnosis of anal intra-epithelial neoplasia (AIN) in homosexual men

A randomised controlled trial of proctoscope guided versus blind anal swabs for the diagnosis of AIN.

**Status:** 151 patients were enrolled, and the study ceased recruitment in 2003.

**Personnel:** Andrew Grulich, Claire Vajdic, Jonathan Anderson

**Collaborators:** Albion Street Centre; Carlton Clinic, Victorian Cytology Service

Anal intraepithelial neoplasia (AIN) and anal cancer

A cohort study of AIN and anal cancer in HIV negative and HIV positive homosexual men.

**Status:** A collaborative group has been established to examine the incidence, prevalence, and risk factors for anal intraepithelial neoplasia (AIN), anal human papilloma virus (HPV) infection and anal cancer in HIV-positive and HIV-negative Australian homosexual men. A funding submission was submitted.

**Personnel:** Andrew Grulich, Claire Vajdic, Jonathan Anderson, Tony Kelleher

**Collaborators:** Victorian Cytology Service; Sexually Transmitted Infections Research Centre; Centre for Immunology, St Vincent's Hospital, Sydney; Centre for Immunology and Cancer Research, University of Queensland; Royal Perth Hospital; The University of Sydney
Australian long-term nonprogressor (LTNP) cohort

A cohort study, established in 1994, of people with slowly progressive HIV disease.

**Status:** 72 individuals remained under active follow-up to the end of 2003. The majority of LTNP participants have now been infected with HIV for at least 15 years.

**Personnel:** Melanie Middleton, Tony Kelleher

**Collaborators:** Long-term nonprogressor study group, including clinical sites in Sydney, Canberra and Brisbane; Centre for Immunology, St. Vincent's Hospital, Sydney; HIV Immunovirology Laboratory, Garvan Institute of Medical Research

Positive Health Study

A cohort study of the health and health-related behaviours of HIV positive people.

**Status:** A total of 505 people living with HIV/AIDS had been enrolled by the end of 2003, and 147 were interviewed in 2003, including 73 who were interviewed for the first time.

**Personnel:** Garrett Prestage, Andrew Grulich

**Collaborators:** National Centre in HIV Social Research; Australian Research Centre in Sex, Health and Society; Australian Federation of AIDS Organisations; National Association of People Living with HIV/AIDS

**Funding:** NSW Health Department
Viral Hepatitis Program

The Viral Hepatitis Program broadened the scope of its activities during 2003, particularly into the area of therapeutic research. The Viral Hepatitis Working Group, jointly auspiced by NCHECR and the Australian Liver Association, provided the foundation for the development of several projects, including a proposal to examine the safety and efficacy of induction dosing pegylated interferon (in combination with ribavirin) in people with hepatitis C genotype 1. Enrolment into the first clinical trial undertaken by the Program, the HEPCOG study, commenced in 2003. This trial is an open label study of the impact of pegylated interferon and ribavirin on neurocognitive function among people with hepatitis C infection and HIV/hepatitis C coinfection.

The major highlight for the Viral Hepatitis Program during 2003 was the awarding of a US National Institutes for Health (NIH) five year grant to examine the natural history of acute hepatitis C infection, and the safety, efficacy and feasibility of pegylated interferon monotherapy for treatment of acute hepatitis C infection among injecting drug users. This is the first NIH grant the Centre has received for hepatitis C research, and brings together a large team of Australian investigators in the areas of epidemiology, public health, drug and alcohol research, clinical research and primary and tertiary clinical care.

Presentation of eleven papers (six as oral presentations) at the 13th International Symposium on Viral Hepatitis and Liver Disease was evidence of the expanding program and quality of research activities within the Viral Hepatitis Program. Further international recognition of the Program’s work came through PhD student, Joanne Micallef’s oral presentation on hepatitis C re-infection at the American Association for the Study of Liver Disease Annual Meeting in Boston.

The Program suffered a great loss with the death of Margaret MacDonald in September 2003 (see Obituary on page 3). Margaret was responsible for programs in the areas of research into prevention of drug related harm among people who inject drugs.

Hepatitis B and C linkage study

This study involves the cross matching of hepatitis B and C notifications to the NSW Health Department over the period 1992–2002 with the NSW Cancer Register and the National Death Index. The information will enable determination of the hepatitis B and C attributable fractions for liver cancer cases, and the liver cancer incidence, liver disease-related and overall mortality rates among people with chronic hepatitis B and hepatitis C.

Status: Preliminary work was undertaken, including finalisation of the study protocol
Personnel: Janaki Amin, Greg Dore, Matthew Law
Collaborators: NSW Department of Health; NSW Cancer Council; Australian Institute of Health and Welfare

Hepatitis C incidence in prisons (HITS)

Hepatitis C incidence and risk factors for seroconversion are determined among a cohort of seronegative prison inmates in New South Wales prisons. Incident hepatitis C cases undergo more intensive clinical and virological assessment to examine the early natural history of hepatitis C.

Status: Ongoing
Collaborators: Department of Pathology, UNSW; Royal Prince Alfred Hospital; Prince of Wales Hospital
Funding: NHMRC

Systematic review of viral clearance in newly acquired hepatitis C

A systematic review of studies of acute and newly acquired hepatitis C natural history to provide an estimate of the proportion and predictors of viral clearance.

Status: Analyses were completed.
Personnel: Joanne Micallef, Greg Dore
Collaborators: None

Hepatitis C viral clearance among a cohort of injecting drug users

A study of viral clearance among a retrospective cohort of injecting drug users with newly acquired hepatitis C at Kirketon Road Centre over the period 1992–2002.

Status: Analyses were completed.
Personnel: Joanne Micallef, Janaki Amin, Greg Dore
Collaborators: Marianne Jauncey, Centre for Epidemiology and Research, NSW Health Department; Kirketon Road Centre; Prince of Wales Hospital
Funding: Bayer Diagnostics
Models for estimating disease progression in chronic hepatitis C infection

Natural history models for estimating hepatitis C-related liver disease progression to underpin cost effectiveness evaluations of therapeutic interventions.

**Status:** Collaboration was formed with the Harvard University School of Public Health to undertake international hepatitis C modeling and projects. Ongoing work was also undertaken through the World Health Organisation Global Burden of Hepatitis C Disease Project.

**Personnel:** Greg Dore, Janaki Amin, Matthew Law

**Collaborators:** School of Public Health, Harvard University, USA; World Health Organisation, Switzerland

Hepatitis C and quality of life: Neuro-psychological involvement (HEPCOG)

An open label trial of combination pegylated interferon and ribavirin to examine the impact of hepatitis C, treatment and viral clearance in neurocognitive impairment in people with HIV/hepatitis C coinfection, and hepatitis C mono infection.

**Status:** 13 people with HIV/hepatitis C coinfection, and 7 people with hepatitis C mono-infection were recruited into the study as at the end of 2003.

**Personnel:** Rosie Thein, Greg Dore

**Collaborators:** Bruce Brew, St Vincent’s Hospital, Sydney; Paul Maruff, La Trobe University; David Koorey, Royal Prince Alfred Hospital

**Funding:** Roche Products Pty Ltd

Quality of life in hepatitis C

A systematic review of quality of life studies in hepatitis C. Translation of SF-36 scores into utility indices is performed to enable estimates of quality of life impairment at different stages of liver disease and treatment outcome.

**Status:** Initial literative review completed. Analyses ongoing.

**Personnel:** Rosie Thein; Greg Dore

**Collaborators:** Murray Krahn, Department of Medicine and Health Policy, University of Toronto, Canada

Tenofovir in HIV/hepatitis B coinfection

A randomized controlled trial to compare the safety and efficacy of tenofovir versus lamivudine versus tenofovir plus lamivudine as anti hepatitis B active agents within the HAART regimen. The trial will also compare early hepatitis B viral responses in people with HIV/hepatitis B coinfection, and hepatitis B mono infection.

**Status:** In development

**Personnel:** Gail Matthews, Greg Dore

**Collaborators:** Royal Melbourne Hospital; The Alfred Hospital; Victorian Infectious Diseases Reference Laboratory; International AIDS Therapy Evaluation Centre; HIV-NAT

**Funding:** Gilead Sciences

Therapy for newly acquired hepatitis C

A study examining the natural history, safety and efficacy of interferon therapy for acute and newly acquired hepatitis C among injecting drug users.

**Status:** In development

**Personnel:** Greg Dore, Gail Matthews

**Collaborators:** Australian Liver Association/NCHECR Viral Hepatitis Working Group

**Funding:** National Institutes of Health, USA; Roche Products Pty Ltd

Evaluation of the Medically Supervised Injecting Centre (MSIC)

NCHECR had substantial involvement in the evaluation of the trial MSIC established in Kings Cross by the NSW government in 2001. NCHECR was specifically responsible for surveys of health and risk behaviour in people who inject drugs from the Kings Cross area, analyses of data on blood-borne virus infection, telephone surveys of community attitudes to the MSIC, and analyses of counts of needle syringes discarded in public places in Kings Cross.

**Status:** Data collection and analysis was completed and the final report was submitted to the NSW government.

**Personnel:** Margaret MacDonald, Jialun Zhou, Rosie Thein

**Collaborators:** AIDS/Infectious Diseases Branch, NSW Health Department; Bureau of Crime Statistics and Research; Kirketon Road Centre; National Drug and Alcohol Research Centre; Medically Supervised Injecting Centre; School of Public Health and Community Medicine, UNSW
Primary HIV Infection Research Program

2003 saw a continuation of activity into NCHCR’s special interest area of primary HIV infection. Central to the activities in this area was the implementation of the US National Institutes of Health-funded Acute Infection Early Disease Research Program (AIEDRP) in collaboration with Massachusetts General Hospital, a five-year program of research into treatment and pathogenesis of primary HIV infection.

The PULSE study of treatment interruption continued follow up of 68 patients during 2003. Additional immunological sub-studies of factors associated with control of viremia were undertaken.

The Australian Primary HIV Infection Database

An ongoing prospective cohort of patients with Primary HIV infection.

Status: During 2003 updated information was obtained in this cohort of over 400 people with newly acquired HIV infection with electronic downloading of laboratory data.

Personnel: Tim Ramacciotti, Jan Guerin, Pat Grey, Kathy Petoumenos, Don Smith

Collaborators: Mark Bloch, Holdsworth House General Practice; Cassy Workman, AIDS Research Initiative; Robert Finlayson, Taylor Square Private Clinic; Robert McFarlane, 407 Doctors; Nick Medland, The Centre Clinic; Philip Cunningham, John Zaunders, Centre for Immunology, St Vincent’s Hospital, Sydney

Concerted Action on Seroconversion to AIDS and Death in Europe Study

The Concerted Action on Seroconversion to AIDS and Death in Europe (CASCADE) collaboration is a collaborative cohort study on the vital status, laboratory markers, antiretroviral treatment changes, and disease progression to discern whether survival or rate of progression to AIDS is altered by earlier treatment.

Status: 279 Australian subjects contribute to this cohort.

Personnel: Tim Ramacciotti, Jan Guerin (to September 2003)

Collaborator: Concerted Action on Seroconversion to AIDS and Death in Europe, UK

Funding: Medical Research Council (UK)

Acute Infection Early Disease Research Program

A five-year program for research into the treatment and pathogenesis of primary HIV infection.

Status: One cohort has opened for recruitment, one randomised trial is in design and pathogenesis work is underway.

Personnel: Pat Grey, Jan Guerin, Tim Ramacciotti, Matthew Law, Don Smith, Tony Kelleher

Collaborators: Partners AIDS Research Centre (Massachusetts General Hospital), Harvard University, USA; National Institutes of Health, USA; Mark Bloch, Holdsworth House General Practice; Cassy Workman, AIDS Research Initiative; Robert Finlayson, Taylor Square Private Clinic; Robert McFarlane, 407 Doctors; Nick Medland, The Centre Clinic; Philip Cunningham, John Zaunders, Centre for Immunology, St Vincent’s Hospital, Sydney

Funding: US National Institutes of Health

Primary HIV and early disease research – Australian cohort (PHAEDRA)

A systematic mechanism to recruit and follow up a cohort of people in Sydney and Melbourne with acute and early HIV-1 infection.

Status: During 2003 127 additional individuals were enrolled.

Personnel: Jan Guerin, Don Smith, Tony Kelleher, Tim Ramacciotti, Mee-Ling Munier

Collaborator: Concerted Action on Seroconversion to AIDS and Death in Europe, UK

Funding: US National Institutes of Health
Treatment interruption trial in primary HIV infection (PULSE)

A treatment interruption trial in primary HIV infection to determine whether control of the HIV virus can be achieved by the patient’s own immune system using intermittent therapy initiated in primary infection.

Status: During 2003, the majority of patients completed the interruption cycles of the study.

Personnel: Don Smith, Pat Grey, Mee-Ling Munier

Collaborators: Robert Finlayson, Taylor Square Private Clinic; Mark Bloch, Holdsworth House Private Practice; Robert Mcfarlane, 407 Doctors; Norman Roth, Prahran Market Clinic; Dr John Chuah, Gold Coast Sexual Health Clinic; Kate McGhie, HIV Immunology Laboratory, Garvan Institute of Medical Research; John Zaunders, Phillip Cunningham, Centre for Immunology, St Vincent’s Hospital, Sydney

Funding: Bristol Myers Squibb
Biostatistics and Databases Program

The Biostatistics and Databases Program combines both technical support and research functions. The primary functions of the Program are to ensure that across the wide range of NCHECR activities studies are designed appropriately from a statistical perspective, data are housed in properly specified robust databases, and statistical analyses are conducted to high scientific standards. Virtually all NCHECR research activity relies on these technical support functions. As well as supporting the Centre's other Programs' research, the Biostatistics and Databases Program has its own research activities, primarily in clinical cohort studies, mathematical modelling, and statistical methodology.

The Program develops databases, based on Oracle software, for all NCHECR clinical trials, and also for a number of other studies. Of particular note during 2003 was the development of databases for the prophylactic vaccine trial and the T-20 trial (see Therapeutic and Vaccine Research Program). The Program also continued to support study Data and Safety Monitoring Boards, both for the rosiglitazone and the prophylactic vaccine studies.

During 2003 the Program continued to undertake clinical cohort studies. The Australian HIV Observational Database (AHOD), now into its fifth year of operation with over 2,000 patients recruited from 26 sites, continued to provide regular information on antiretroviral use among patients with HIV infection in Australia. Data from AHOD also contributed to the Data Collection on Adverse Events of Anti-HIV Drugs (DAD) Study, a large, international collaborative observational study designed to evaluate the medium-term risk of cardiovascular disease in patients with HIV receiving antiretroviral drugs. The Program used mathematical prediction equations to estimate the numbers of myocardial infarctions that would be expected in the DAD study during follow-up.

A new HIV observational study, the TREAT Asia HIV Observational Database, was initiated in several countries in the Asia-Pacific region during 2003. Data from some 1,200 patients at 11 sites throughout the region were aggregated at the initial data transfer in the last quarter of 2003.

The Australian HIV Observational Database (AHOD)

Observational cohort study of patients with HIV. Demographic, clinical and treatment data are aggregated twice each year via electronic data transfer.

Status: The study has recruited some 2,300 patients from 28 sites throughout Australia, with ongoing follow-up.

Personnel: Kathy Petoumenos, Matthew Law

Collaborators: Network of clinical sites (GPs, hospitals and sexual health clinics) throughout Australia

Funding: Clinical Trials and Treatments Committee

The Data Collection on the Adverse Events of Anti-HIV Drugs Study (DAD)

Large, international, collaborative study aimed at assessing the medium to long-term effects of antiviral treatment of people with HIV in terms of possible increased risk of cardiovascular events.

Status: The study has recruited over 22,000 patients from 11 cohorts, Australia's contribution being 676 patients from the Australian HIV Observational Database, with follow-up continuing until 2005.

Personnel: Kathy Petoumenos, Matthew Law

Collaborators: Network of clinical sites (GPs, hospitals and sexual health clinics) throughout Australia; Copenhagen HIV Program

Funding: European Medicines Evaluation Agency (EMEA)

Data from the highly specialised drugs program

Summary data of patients receiving antiretroviral treatments funded through the Highly Specialised Drugs Program are received from the Australian Government Department of Health and Ageing, and published in annual and biannual surveillance reports.

Status: Ongoing during 2003, with publication in NCHECR's surveillance reports.

Personnel: Kathy Petoumenos

Collaborator: Highly Specialised Drugs Program, Special Access and Coordination Section, Pharmaceutical Access and Quality Branch, Australian Government Department of Health and Ageing
TREAT Asia HIV Observational Database

Observational cohort study of patients with HIV at eleven sites throughout the Asia-Pacific region. Demographic, clinical and treatment data are aggregated twice each year via electronic data transfer.

**Status:** At the initial data transfer in September 2003, baseline and retrospective data from some 1,200 patients were aggregated. Follow-up is to continue for at least 3 years.

**Personnel:** Jialun Zhou, Matthew Law

**Collaborators:** Network of clinical sites at eleven countries through the Asia-Pacific region

**Funding:** American Foundation for AIDS research (amfAR)

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![Back row: Handan Wand, Jialun Zhou, Kathy Petoumenos, Noorul Absar  
Front row: Janaki Amin, Matthew Law](image)

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Biostatistics and database support

Writing clinical trial databases, and providing biostatistical input to the design and analysis of all NCHECR projects.

**Status:** During 2003, members of the Program actively contributed to the ROSEY, MITOX, PIIIR, Lipodystrophy Case Definition, INITIO, and HVDDT vaccine studies.

**Personnel:** Matthew Law, Noorul Absar, Janaki Amin, Kathy Petoumenos, Terry Sharkey, Handan Wand, Jialun Zhou

**Collaborators:** Other Programs at NCHECR

**Funding:** Project-specific grants

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Causes of death among ex-prisoners in NSW

Mortality rates among ex-prisoners in NSW between 1998 and 2002 are assessed by linkage between the Offender Management System at the Department of Corrective Services, and the National Death Index at the Australian Institute of Health and Welfare.

**Status:** Data linkage was performed during 2003, with initial analyses of sensitivity and specificity of the linkage process, and analyses of mortality rates post-release, ongoing.

**Personnel:** Azar Kariminia, Tony Butler, Matthew Law

**Collaborator:** Corrections Health Service

**Funding:** NHMRC
Laboratory Support Program

The work of the Laboratory Support Program during 2003 can be divided into two major categories. First of all, much of the laboratory’s activity is directed towards providing support of a routine or semi-routine nature to clinical trials and epidemiological studies, through processing of specimens and conduct of specialised assays. Secondly, the laboratory’s senior scientists are responsible for their own research programs on pathogenesis.

The highlight of the year was undoubtedly the successful commencement of the prophylactic vaccine trial funded through the HIV Vaccine Design and Development Team Contract from the US National Institutes of Health. The Laboratory Support Program is responsible for assessing the markers of T-cell immunogenicity. The initiation of the trial allowed the laboratory to undertake assays which took over twelve months to develop and validate, with substantial outside scrutiny.

As the Laboratory Support Program receives minimal direct funding from NCHECR’s core grant, success in attracting additional external funding is essential for its functioning. 2003 was the award of an NHMRC program grant in collaboration with research groups under Peter Doherty and Stephen Kent at the University of Melbourne, and Ian Ramshaw at the Australian National University. This collaboration represents an unparalleled opportunity to advance investigator driven research within the laboratory.

During 2003, the laboratory took delivery of a Zeiss ELIspot reader acquired through a UNSW equipment grant, and also made successful application to the Ramaciotti Foundation for a grant towards a Packard beta/gamma counter.

Service and support

Specimen receipt and processing for clinical trials and natural history studies

The laboratory provides a service to other NCHECR Programs encompassing the separation of blood components; cryopreservation of serum, plasma and PBMC; and archiving and onshipping of samples.
Transmission of resistance in primary infection

This study defines prevalence of resistance mutations in the Sydney population at primary infection, giving insight into the effect of widespread antiretroviral therapy on the prevalence of transmitted resistance virus in the Australian population.

Status: More than 50 genotypes were performed on acute seroconverters
Personnel: Tony Kelleher
Collaborators: Palanee Ammaranond (PhD Student); Philip Cunningham, Kazuo Suzuki, Leakhena Leas, St Vincent’s Hospital, Sydney
Funding: US National Institutes of Health; NSW Health Department

Dried blood spot serology

Dried blood spot serology is used to generate surveillance data regarding the incidence and prevalence of HIV and hepatitis C in injecting drug users.

Status: 2,427 blood spots were screened
Personnel: Tony Kelleher
Collaborators: Philip Cunningham, Brian Seckold, St Vincent’s Hospital, Sydney
Funding: NSW Health Department

Pathogenesis research

Evolution of immune responses in primary infection and long-term nonprogressors

This study furthers study mechanisms of viral escape from cytotoxic T-lymphocyte responses, and particularly the events leading up to escape from the HLA-B27 mediated T-cell response at the level of T-cell receptor usage. It employs samples and data gathered during the follow-up of the Long-Term Non-Progressor Cohort (see HIV Epidemiology and Prevention Program), and samples collected from the PHAEDRA Cohort (see Primary HIV Infection Research Program).

Status: Novel escape mutations for HLA-B27 and A24 were defined
Personnel: Tony Kelleher
Collaborators: Palanee Ammaranond (PhD Student); Akicihi Iwamoto, Tokyo University, Japan
Funding: US National Institutes of Health; Japanese Society Health Foundation

iRNA inducing viral latency

This project is established to determine the optimal design of dsRNAs for the induction of transcriptional gene silencing (TGS) of viral genes in HIV-1 infected cells; and to define the pathways by which dsRNAs targeting the promoter regions of HIV-1 induce TGS.

Status: Ongoing
Personnel: Tony Kelleher
Collaborators: Kazuo Suzuki, Cathie Suter, St Vincent’s Hospital, Sydney; David Martin, Victor Chang Cardiac Research Institute, Sydney

CD4+ cytotoxic T-cells

This project involves investigations of the role of cytotoxic CD4+ T-cells in the outcome of disease in the Long-term nonprogressor and PHAEDRA Cohorts (see HIV Epidemiology and Prevention and Primary HIV Infection Research Programs).

Status: HIV-specific CD4+ cytotoxic T-cells were definitively identified
Personnel: Tony Kelleher, Mee-Ling Munier, Susanna Ip
Collaborators: John Zaunders, St Vincent’s Hospital, Sydney; Wayne Dyer, Australian Red Cross Blood Service, Sydney; Nitin Saksena, Westmead Millennium Institute and Centre for Virus Research, Sydney
Funding: US National Institutes of Health

IL-7 receptor modulation

The impact of IL-7 and the expression of its receptor on T-cell subsets, T-cell homeostasis and CD4 T-cell recovery post HAART, is being explored using both in vitro and ex vivo techniques.

Status: Novel insights into the regulation of IL7 receptor on T-cells were made
Personnel: Tony Kelleher, Sarah Sasson
Collaborators: John Zaunders, St Vincent’s Hospital, Sydney; Giulia Zanetti (Bachelor of Science student, Padua University, Italy)
Funding: US National Institutes of Health
Research outside Program areas

Creutzfeldt-Jakob Disease

Analyses of the National Creutzfeldt-Jakob Disease Registry

Biostatistical and epidemiological advice and support is provided for the analysis and interpretation of Registry data.

Status: Ongoing
Personnel: Handan Wand
Collaborator: The Australia National Creutzfeldt-Jakob Disease Registry

Transmissible spongiform encephalopathies

Biostatistical and epidemiological advice and support regarding assessments of risk of transmission of transmissible spongiform encephalopathies through products derived from blood donations or foetal-calf serum is provided.

Status: Ongoing
Personnel: Matthew Law
Collaborators: Australian Red Cross Blood Service; Therapeutic Goods Administration; Australian Government Department of Health and Ageing

Immune deficiency and cancer

NSW lymphoma case-control study

A case control study of risk factors for non-Hodgkin lymphoma.

Status: In 2003 over 700 cases and controls were enrolled, data entry and cleaning was completed, and data analysis had begun.
Personnel: Andrew Grulich, Claire Vajdic
Collaborators: The University of Sydney; Viral Epidemiology Laboratory; United States National Cancer Institute; St Vincent's Hospital, Sydney; University of Western Australia; Monash University
Funding: NHMRC

Cancer in kidney dialysis patients and kidney transplant recipients

A project to link the Australian and New Zealand Dialysis and Kidney transplant and dialysis register (ANZDATA) with the national cancer register to allow the identification of cancers that occur at increased rates, and the identifications of risk factors for development of cancer.

Status: Ethics approval was obtained from all States and Territories during 2003.
Personnel: Andrew Grulich, Claire Vajdic, Matthew Law
Collaborators: Australian and New Zealand Dialysis and Transplant Registry (ANZDATA); University of Otago; Westmead Hospital
Funding: NSW Cancer Council
International activities

Thailand

The Netherlands, Australia, Thailand Research Collaboration (HIV-NAT) was established in 1996. This partnership between NCHECR, the Thai Red Cross AIDS Research Centre and the International Antiviral Therapy Evaluation Centre in Amsterdam is now in its seventh year, and continues to conduct research and training, and provide access to treatment for people living with HIV in Thailand.

HIV-NAT continued to conduct studies relevant to the use of antiretroviral therapy in a resource-limited setting, in addition participating in international multi-centre studies. The two largest international trials are the ESPRIT study of interleukin-2 with 365 participants enrolled at five sites, and the STACCATO study of structured therapy interruption with 300 participants at a further six sites in Bangkok and regional Thailand. HIV-NAT’s clinical trials network has expanded to twenty-two sites in Thailand. HIV-NAT is the coordinating centre for the network, providing study management, clinical and laboratory training, drug distribution, site monitoring and data management.

NCHECR is a member of the Australia-Thailand Vaccine Consortium, established in March 2003, with funding from the National Institutes of Health, USA to develop a DNA prime, recombinant fowlpox boost preventive HIV vaccine. Two vaccines have been produced: a B clade vaccine for trialing in Australia, and an A/E clade vaccine which will be tested in Thailand. Phase I studies in healthy human volunteers have commenced in Sydney, with the Thai trial set to commence in 2004.

HIV-NAT also interacted closely with other projects of the Thai Red Cross AIDS Research Centre. During 2003, the AIDS Research Centre established voluntary counselling and testing (VCT) centres in three Thai provinces in Thailand. These centres are based on the Bangkok anonymous clinic model. They act as entry points for care, providing VCT, affordable CD4 count testing, provision of opportunistic infection prophylaxis for those with a CD4 count less than 200 and referral to clinics prescribing antiretroviral therapy.

Another Thai Red Cross AIDS Research Centre program, the MTCT-Plus initiative, co-funded by Columbia University and Thai Red Cross Society, had enrolled 245 mothers by the end of 2003. These women, and their families, will receive antiretroviral therapy for life.

An important objective at HIV-NAT is training of students and health care workers. During 2003, six students from Australia and The Netherlands spent three to six months studying and working at HIV-NAT.

Cambodia

During 2003, NCHECR expanded the scope of its partnership with the National Center for HIV/AIDS, Dermatology and STDs (NCHADS) at the Cambodian Ministry of Health through the newly re-established Research Unit within NCHADS. This Unit is now directly responsible for the implementation of a number of research and treatment projects supported by NCHECR:

The Cambodia Treatment Access Program (CTAP), funded by F. Hoffmann-La Roche Ltd, supported the expansion of HIV care, including antiretroviral therapy through two mechanisms:

Technical support to the AIDS Care Unit at NCHADS

Julian Elliott continued to assist with policy development, program management, development of clinical and operational guidelines, monitoring and evaluation systems, logistics management including antiretroviral drug procurement and development of grant proposals. 2003 saw a rapid increase in the work of the Unit as the national Continuum of Care program expanded and prepared for scaled-up access to antiretroviral therapy. To assist with these programs, Sous Prem Prey joined the Unit as Deputy Chief with support from CTAP.
Support for HIV care at two sites

Planning for the NCHADS HIV clinic in Phnom Penh and a provisional site in Pursat took place during 2003. The purpose of these sites is to provide an ongoing HIV care program comprising initial screening, prevention and management of opportunistic infections and access to antiretroviral therapy. During 2003 Sarah Huffam and Jenne Roberts joined NCHADS to assist with the development of these services. Initial project development was completed and clinical services are planned to commence in mid-2004.

Preparation continued for a study of daily oral tenofovir to prevent HIV-1 infection among sex workers in Cambodia, including formative research to inform trial procedures. This study is to be carried out as collaboration between NCHECR, NCHADS and the University of California San Francisco. Preparation of the National Laboratory at the National Institute of Public Health to provide laboratory support for this trial was begun, facilitated by the arrival of Robert Oelrichs who is assisting the Biomedical Research Unit to implement laboratory services that conform with good laboratory practice.

In 2003, NCHECR was awarded a contract by AusAID to implement a Cambodian research program to support the optimal use of antiretroviral therapy. This program will use a two-phase design comprising an initial cohort period followed by a randomised intervention to investigate methods to optimise the use of antiretroviral therapy in Cambodia such as adherence, monitoring and regimen choice. The program will be implemented at the clinical sites supported by the CTAP project, to commence in mid-2004.

Throughout 2003 NCHADS continued to be involved in the development of plans to implement a collaborative HIV intervention research program with NCHECR and the Thai Red Cross. Funding proposals were developed for prevention and therapeutic studies and submitted to the United States National Institutes of Health under the CIPRA program.

Indonesia

During 2003 NCHECR continued to contribute to the consortium that is implementing the Indonesian HIV/AIDS Prevention and Care Project Phase II, with support from AusAID. Nurlan Silitonga, working on behalf of NCHECR, assisted the project in several areas, with a primary focus on biomedical aspects of HIV control and prevention. John Kaldor continued his role as Chair of the Technical Advisory Team for the project, which again had to defer its planned meeting Jakarta due to security considerations.
NCHECR is involved in a wide range of teaching and training activities (see page 55) During 2003, six Masters candidates whose research had been supervised by NCHECR staff were awarded their degrees. NCHECR staff also supervised another 41 postgraduate students, including 20 doctoral candidates.

Academic staff at NCHECR continued to be responsible for three courses offered as part of the Master of Public Health degree at the University of New South Wales. Some 120 students passed through the core epidemiology course taught by NCHECR staff in 2003, and a further 40 undertook the specialised electives in epidemiology and HIV/AIDS. Over the years, students who have encountered the work of NCHECR through these courses have gone on to join the research staff at the Centre, and some now act as tutors for current students.

Forty NCHECR study coordinators from around Australia and New Zealand attended the Therapeutic and Vaccine Research Program coordinators’ training day in Cairns. Coordinators were provided with an update on the current research areas of NCHECR.

Training provided by NCHECR included field supervision of students placed from long term programs run by other institutions. NCHECR also contributed lectures to a variety of other postgraduate courses during the year.
During 2003 NCHECR staff continued to participate in a range of advisory bodies, working groups and committees relevant to HIV, hepatitis C and related areas (see page 52). These activities operate at a range of levels from local to international and ensure that NCHECR’s researchers stay closely in touch with the real life applications of their work.

Of particular note were David Cooper’s roles as International Co-Chair of the Scientific Program Committee of the XV International AIDS Conference, as a member of the amfAR Treat Asia Steering Committee, and as a representative for the ESPRIT group on the networks recompetition advisory group to the Division of AIDS of the National Institute of Allergy and Infectious Diseases, United States National Institutes of Health; John Kaldor’s continuing membership of the NHMRC Project Grants Committee, the ANCAHRD Indigenous Australians’ Sexual Health Committee, and as the Asian regional representative of the International AIDS Society Governing Council; Andrew Grulich’s ongoing role as President of the Australasian Society for HIV Medicine and membership of the ANCAHRD HIV Committee, and Greg Dore’s role as Convenor of the 4th Australasian Conference on Hepatitis C. Andrew Grulich was also appointed as Chair of the NSW Health Department Health Promotion Committee in 2003, and Tony Kelleher served on the Johnson and Johnson, and St Vincent’s Hospital, Sydney, Institutional Bio-Safety Committees.

NCHECR worked with the Australasian Society for HIV Medicine to put together a successful bid to host the 4th International AIDS Society Conference on Pathogenesis and Treatment of HIV Infection to be held in Sydney in 2007.
This list includes both full time and part time staff. Contributions listed in this report relate only to individuals whose primary employment is with NCHECR.

**Director’s office**

**Director and Professor of Medicine**
David A Cooper AO, BSc(Med), MB BS, DSc, MD, FRACP, FRCPA, FRCP

**Executive Assistant**
Janette Button

**Deputy Director’s office**

**Deputy Director and Professor of Epidemiology**
John M Kaldor PhD

**Epidemiology Group Coordinator***
Jennifer Kemp

**Administrative Assistants***
Courtney Bendall DipBus (from February)
Adrienne Broe BA (to July)
Carol Harris (from July)
Susan Lewis MA
Mark Thompson BBus

**Surveillance Program**

The Surveillance Program is headed by the Deputy Director and is made up of staff from the HIV Epidemiology and Prevention, Viral Hepatitis, Primary HIV Infection Research and Biostatistics and Databases Programs.

**Therapeutic and Vaccine Research Program**

**Head and Associate Professor**
Andrew Grulich MB BS, MSc, PhD, DRACOG, FAFPHM

**Associate Professor**
Jennifer Hoy MB BS, GradDipEpiBio, FRACP

**Lecturers**
Dianne Carey BPharm, MPH
Kate Clezy MB BS, FRACP
Fraser Drummond MB ChB, MRCA, DA (UK)
Gillian Hales RN, BSc(Hons), PhD,
GradCert(Higher Ed)
Paddy Mallon BSc(Hons), MB, BCh, BAO

Sarah Pett BSc(Hons), MB BS(Hons), DTM&H,
MRCP(UK), FRACP
Rebekah Puls BSc(Hons), PhD

**Clinical Project Coordinators**
Cate Carey RN, BA, MAAppSc (Research)
Brooke Cordwell BSc(Biomed) (from September)
David Courtney-Rodgers (from February)
Jaimie Cox BSc(Hons), PhD, MAPS
Allison Martin BSc, MSc(Med)
Susan Phipps RN, RM, GradCert(Ortho)
Claudette Satchell BSc(Hons) (from November)

**Data Managers**
David Courtney-Rodgers (to February)
Kymme Courtney-Vega
Wendy Lee
Robyn Munro

**Administrative Assistants**
Brooke Cordwell BSc(Biomed) (to September)
Leeanne Thompson

**HIV Epidemiology and Prevention Program**

**Head and Associate Professor**
Jonathon Anderson MB ChB, MSc(MedSci), Dip Ven,
DRCOG, MRCGP, FRACGP (to October)
Jan Guerin BSc(Hons) PhD (to September)
Iona Millwood BA(Hons), PhD (from April)
Mary Poynten MB BS, Dip Child Health, MPH(Hons)
(f from February)

**Post Doctoral Research Fellow**
Claire Vajdic BOptom, PhD

**Senior Research Associate**
Garrett Prestage BA(Hons), PhD

**Senior Research Officer**
Ann McDonald BSc, MPH
Daniel Madeddu (from April)

**Research Assistants**
Jeff Jin BMed, MPH (to April)
Melanie Middleton BMedSc, MPH
Wei Zheng BS, MPH (to June)

*Staff working in the office of the Deputy Director and the Surveillance, HIV Epidemiology and Prevention, Viral Hepatitis, Primary HIV Infection Research and Biostatistics and Databases Programs
Clinical Project Coordinator
Harry Smith MA

Project Officers
Brian Acraman
Wayne Bleakley GradCert(Management), AHRI
John Bradley (from December)
Paul Kelly
Patrick McGrath BA, DipEd (from December)
Hedimo Santana BA(Hons)

Back row: Yvette Toole, Penelope Lister, Ian Brodie
Front row: Janette Button, Annie Tung

Viral Hepatitis Program
Head and Senior Lecturer
Greg Dore MB BS, BSc, PhD, FRACP, MPH

Senior Lecturer
Margaret MacDonald RN, BSocSci, GradDipEpi, PhD (from August to September)*

Lecturers
Anthony Freeman MB ChB, BMedSc (to January)
Gail Matthews MBChB, MRCP(UK)

Research Fellow
Margaret MacDonald RN, BSocSci, GradDipEpi, PhD (to August)

Research Assistants
Megan Buddle RN (to July)
Anna Doab RN, MPH (from November)
Rosie Thein MB BS, MPH
Jialun Zhou BMed, MPH (to August)

Primary HIV Infection Research Program
Head and Senior Lecturer
Don Smith MB ChB, MD

Clinical Project Coordinator
Patricia Grey RN, BA, DipEd, GradDipAppSci, DipCounselling

Senior Data Manager
Tim Ramacciotti BA(Hons), MD (from December)

* Deceased

Data Administrator
Amanda Dunn BSc(Hons) (to June)
Ansari Shaik BA, MBA (from December)

Biostatistics and Databases Program
Head and Senior Lecturer
Matthew Law MA, MSc, PhD

Lecturer
Handan Wand MA, MSc, PhD

Senior Research Assistants
Janaki Amin BSc(Hons), MPH(Hons)
Kathy Petoumenos BSc, MA, MPH(Hons)

Research Assistant
Jialun Zhou MB, MPH (from September)

Computer Systems Officers
Noorul Absar BTech, GradDipInfSc
Terry Sharkey BSc (to August)

Laboratory Support Program
Head and Senior Lecturer
Tony Kelleher BSc(Hons), MB BS(Hons), PhD, FRACP, FRCPA

Research Assistants
Susanna Ip BSc (from September)
Ciara McGinley Cert/AppBio (from September)
Mee-Ling Munier BSc, GradDipEpi, MSc
Sarah Sasson BA, BSc(Hons) (to December)
David van Bockel BBiotec (Hons)

Administrative Assistant
Kylie Butson (from September)

US National Institutes of Health, HIV Vaccine Design and Development Contract
Chief Operations Officer
Mark Sullivan BSc (from March)

Internationally-based staff
Senior Lecturers
Chris Duncombe MB BS (HIV-NAT, Thailand)
Sarah Huffam MB BS, FRACP, FACSHP, MPH (NCHADS, Cambodia) (from August)

Lecturers
Mark Boyd BA, MB BS, FRACP, DTM&H (HIV-NAT, Thailand)
Julian Elliott MB BS, FRACP (NCHADS, Cambodia)

Project Manager
Jennifer Roberts M International Management (NCHADS, Cambodia) (from August)
Finance and Administration

Manager
Bronwen Turner BA

Business Manager
Annie Tung MPA

Librarian
Coralie Kronenberg BA, DiplMLib, AALIA

Human Resources Consultant
Penelope Lister BA, GradDiplap, MAHRI (from February)

Computer Systems Officers
Lisa Howard DipIT
Charles Tran BCompSc

Administrative Assistants
Ian Brodie BEc, GradDipEd, AssDipHlthSc
Jo Groves BA (to January)
Yvette Toole
Philippa Wong BEc, MCom (to October)

Receptionists
Lara Cassar
John Redmond
Researchers affiliated to NCHECR during 2003

**Honorary Visiting Fellows**

Bruce Brew MB BS, MD, FRACP  
Professor of Medicine  
St Vincent’s Hospital, Sydney

Nick Crofts MB BS, MPH, FAFPHM  
Deputy Director  
Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

Cathy Pell MB BS, MM  
Research Coordinator  
Sydney Sexual Health Centre, Sydney

Alex Wodak MB BS, MRACP, FRACP, MRCP, FAFPHM  
Senior Staff Specialist and Director  
Alcohol and Drug Service  
St Vincent’s Hospital, Sydney

**Honorary Visiting Lecturers**

Mark Bloch MB BS, MMed  
General Practitioner  
Holdsworth House General Practice, Sydney

Robert Finlayson MB BS, Dip Ven, FACSHP  
Sexual Health Physician  
Taylor Square Private Clinic, Sydney

Robert Macfarlane MB BS, FRACGP  
General Practitioner  
407 Doctors, Sydney

Nicholas Medland MB BS, BA (Hons), Dip Ven  
General Practitioner  
Centre Clinic, Melbourne

Norman Roth MB BS, Dip Ven  
General Practitioner  
Prahran Market Clinic, Melbourne

Cassy Workman MB BS  
Director  
AIDS Research Initiative, Sydney

**Short term consultant**

Nurlan Silitonga MD  
Indonesia HIV/AIDS Prevention and Care Project
Training or postgraduate degree placements at NCHECR

Bachelor of Science (Honours) student
Guilia Zanetti (Padua University, Italy) (from March to December)

Doctor of Philosophy students
Palanee Ammaranond B Medtech, M Biotech
Jeff Jin BMed, MPH (from April)
Joanne Micallef BMedSc(Hons)
Fatemeh Nakhaee BSc, MSc (from July)
Preeyaporn Srasuebkal BSc, MSc (from October)

Master of Applied Epidemiology Fellow
Chris Lawrence (from March)
Monica Robotin MB BS, FRACS (to March)

Master of Public Health student
Adeeba Kamarulzaman MB BS, FRACP (to June)

NSW Health Department Trainee Biostatisticians
Claire Ringland BSc, GradDipClinEpi (from April to August)
Katy Emmet (from September to November)

Visiting Fellow
Patrick Unemori BA Pysch, MA Psych (University of California, San Francisco, Fullbright Scholarship)

Visiting Research Associate
Tianxin Chu MMed (Beijing Centre for Disease Prevention and Control, Beijing) (from December)

Tianxin Chu, Chris Lawrence, Joanne Micallef, Fatemeh Nakhaee
Collaborating organisations

**National**

Australasian Society for HIV Medicine, Sydney
Australia and New Zealand Transplant Registry (ANZDATA), Sydney
Australian Agency for International Development (AusAID), Canberra
Australian Defence Force, Canberra
Australian Federation of AIDS Organisations, Sydney
Australian Government Department of Health and Ageing, Canberra
Australian Hepatitis Council, Canberra
Australian Injecting and Illicit Drug Users League, Canberra
Australian Institute of Health and Welfare, Canberra
Australian Liver Association, Sydney
Australian National Council on AIDS, Hepatitis C and Related Diseases, Canberra
Australian Paediatric Surveillance Unit, and its contributors, Sydney
Australian Red Cross Blood Service, Sydney
Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne
Communicable Diseases Network Australia, Canberra
Intergovernmental Committee on AIDS, Hepatitis C and Related Diseases, Canberra
National Association of People Living with HIV/AIDS, Sydney
National Centre in HIV Social Research, Sydney
National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases, Sydney
National Centre in HIV Virology Research, Melbourne
National Drug and Alcohol Research Centre, Sydney
National Serology Reference Laboratory, Australia, Melbourne
Royal Australian College of General Practitioners, Sydney

**New South Wales**

407 Doctors, Sydney
AIDS Council of NSW (ACON), Sydney
Albion Street Centre, Sydney
Albury Base Hospital, Albury, NSW
Albury Community Health Centre, Albury, NSW
Area Public Health Units, NSW Health Department, Sydney
Auburn Community Health Centre, Sydney
Bigge Park Medical Centre, Sydney
Blacktown Community Health Centre, Sydney
Bligh Street Clinic, Tamworth, NSW
Blue Mountains Sexual Health Clinic, Katoomba, NSW
Bureau of Crime Statistics and Research, Sydney
Cabramatta Drug Intervention Services, Sydney
Cabramatta Street Youth Program (ICON), Sydney
Canterbury Resource and Education Program for Injecting Drug Users (REP IDU), Sydney
Communicable Diseases Branch, NSW Health Department, Sydney
Concord Hospital, Sydney
Corrections Health Service, Sydney
Darlinghurst X-Ray, Sydney
Drug Intervention Service Cabramatta (DISC), Sydney
First Step Program, Port Kembla, NSW
Garvan Institute of Medical Research, Sydney
General Medical Practice, Burwood, Sydney
Gosford Sexual Health Clinic, Gosford, NSW
Greater Murray Area Health Needle and Syringe Program, Albury, NSW
Ground Zero Medical Centre, Sydney
HIV/AIDS Prevention Unit, Sydney
Holdsworth House General Practice, Sydney
Illawarra Sexual Health, Port Kembla, NSW
Immunology and Microbiology Department, The University of Newcastle, Newcastle, NSW
Indo-Chinese Outreach Network, Sydney
John Hunter Hospital, Newcastle, NSW
K2 Health Service, Sydney
Kirketon Road Centre, Sydney
Kogarah Needle and Syringe Program, Sydney
Liverpool Hospital, Sydney
Livingstone Road Sexual Health Centre, Sydney
Macquarie Sexual Health Centre, Sydney

**Australian Capital Territory**

ACT Corrective Services, Canberra
AIDS Action Committee of the ACT, Canberra
Assisting Drug Dependents Inc, Canberra
Australian National University, Canberra
Brindabella Imaging, Canberra Imaging Group (CIG), Canberra
Canberra Sexual Health Clinic, Canberra
Communicable Disease Control Program, ACT
Department of Health and Community Care, Canberra
Directions ACT Programs, Canberra
Drug Referral Information Centre, Canberra
Interchange General Practice, Canberra
John Curtin School of Medical Research, Canberra
The Canberra Hospital, Canberra
Medically Supervised Injecting Centre, Sydney
Mount Druitt West Area Adolescent Team, Sydney
Multicultural HIV/AIDS Service, Sydney
Nepean Hospital, Penrith, NSW
Nepean Sexual Health and HIV Clinic, Penrith, NSW
Northern Rivers Health Service, Lismore, NSW
NSW Health Department, Sydney
People Living with HIV/AIDS (PLWHA), Sydney
Port Kembla Hospital, Port Kembla, NSW
Prince of Wales Hospital, Sydney
Resource and Education Program for Injecting Drug Users, Sydney
Responsive User Services in Health (RUSH), Sydney
Royal Hospital for Women, Sydney
Royal Newcastle Hospital, Newcastle, NSW
Royal North Shore Hospital, Sydney
Royal Prince Alfred Hospital, Sydney
School of Public Health and Community Medicine, UNSW, Sydney
Sexual Health and Infectious Diseases Service (SHAIDS), Lismore, NSW
South West Sydney Area Health Service, Sydney
St George AIDS Prevention Unit, Sydney
St George Hospital, Sydney
St George Needle and Syringe Program, Sydney
St Leonards Medical Centre, Sydney
St Vincent's Hospital, Sydney
St Vincent's Medical Imaging, Sydney
Sydney Children's Hospital, Sydney
Sydney Sexual Health Centre, Sydney
SydPath, Sydney
Taylor Square Private Clinic, Sydney
The Cancer Council NSW, Sydney
The Medical and Vein Centre, Coffs Harbour, NSW
Wentworth HIV and Sexual Health Service, Penrith, NSW
Western Area Adolescent Team, Mount Druitt, NSW
Western Sydney AIDS Prevention and Outreach Service, Sydney
Western Sydney HIV/Hepatitis C Prevention Service, Sydney
Westmead Hospital, Sydney
Westmead Millennium Institute for Medical Research, Sydney

Northern Territory
AIDS Council of Central Australia, Alice Springs, NT
Alice Springs Life Choices Inc, Alice Springs, NT
Department of Correctional Services, Darwin
Northern Territory AIDS Council, Darwin
Royal Darwin Hospital, Darwin

Queensland
AIDS Medical Unit, Queensland Health, Brisbane
Biala Alcohol and Drug Services, Brisbane
Biala Needle and Syringe Program, Brisbane
Blackall Terrace Specialist Centre, Nambour, Qld
Bodyline Needle and Syringe Program, Brisbane
Brisbane Sexual Health Clinic, Brisbane
Brunswick Street Medical Centre, Brisbane
Cairns Base Hospital, Cairns, Qld
Cairns Youthlink, Cairns, Qld
Centre for Immunology and Cancer Research, Princess Alexandra Hospital, Brisbane
Drug Users Network Education and Support (DUNES) Needle and Syringe Program, Miami, Qld
Gladstone Road Medical Centre, Brisbane
Gold Coast Hospital, Southport, Qld
Gold Coast Sexual Health Clinic, Miami, Qld
GRM International Pty Ltd, Brisbane
Logan Youth Health Service, Brisbane
Mackay Sexual Health Services, Mackay, Qld
Nambour General Hospital, Nambour, Qld
Prince Charles Hospital, Brisbane
Princess Alexandra Hospital, Brisbane
Queensland AIDS Council (QAC), Brisbane
Queensland Corrective Services Commission, Brisbane
Queensland Health, Brisbane
Queensland Intravenous AIDS Association (QUIVAA), Brisbane
Queensland Medical Laboratory (QML), Brisbane
Queensland Needle and Syringe Program, Queensland Health, Brisbane
Queensland Positive People, Brisbane
Royal Brisbane Hospital, Brisbane
Sexual Health Service, Cairns Base Hospital, Cairns, Qld
Southcoast Radiology, Pindara Hospital, Benowa, Qld
Special Health Services, Cairns, Qld
Sunshine Coast Intravenous AIDS Association (SCIVAA), Maroochydore, Qld
Toowoomba Needle and Syringe Program, Toowoomba, Qld
Toowoomba Sexual Health Services, Toowoomba, Qld
West Moreton Sexual Health Service, Brisbane
Youth and Family Service (Logan City) Inc, Brisbane

South Australia
AIDS Council of South Australia, Adelaide
Clinic 275, Adelaide
Clovelly Park Needle and Syringe Program, Adelaide
Drug and Alcohol Services Council, Adelaide
Flinders Clinical Trials Pharmacy, Adelaide
Flinders Medical Centre, Adelaide
Hindmarsh Centre, Adelaide
Infectious Diseases Laboratories, Institute of Medical and Veterinary Science, Adelaide
Lyell McEwin Needle and Syringe Program, Adelaide
Noarlunga Community Health Service, Noarlunga, SA
Northern Metropolitan Community Health Service (CHS) and Shopfront, Salisbury, SA
O’Brien Street Practice, Adelaide
Parks Community Health Centre, Adelaide
Perrett Medical Imaging, Adelaide
Port Adelaide Community Health Service, Port Adelaide, SA
Royal Adelaide Hospital, Adelaide
South Australian Voice for Intravenous Education (SAVIVE), AIDS Council South Australia, Adelaide
The Care and Prevention Program, Adelaide
University, Adelaide
Warinilla Clinic, Norwood, SA

Tasmania
Devonport Community Health Service Centre, Devonport, Tas
Glenorchy Nufit, Glenorchy, Tas
Nufit Alcohol and Other Drug Services, Glenorchy, Tas
Launceston Sexual Health, Launceston, Tas
Michael Welch General Practice, Hobart
Prison Health Services Tasmania, Hobart
Public and Environmental Health, Department of Community and Health Services, Hobart
Sexual Health Branch, Launceston, Tas
Tasmanian Council on AIDS, Hepatitis and Related Diseases (TasCAHRD), Hobart
The Link Youth Health Service, Hobart
User’s Health Support League, Hobart

Victoria
Austin Repatriation Medical Centre, Melbourne
Ballarat Community Health Service, Ballarat, Vic
Cogstate Ltd, Melbourne
CSIRO Animal Health Laboratory, Geelong, Vic
Geelong Community Health Service, Geelong, Vic
Health Information Exchange, Melbourne
Immunology and Microbiology Department, The University of Melbourne, Melbourne
Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne
Melbourne Inner City AIDS Prevention Centre (MINE), Melbourne
Melbourne Inner Needle Exchange, Melbourne
Melbourne Sexual Health Centre, Melbourne
Middle Park Clinic, Melbourne
Monash Medical Centre, Melbourne
Northcote Clinic, Melbourne
People Living with HIV/AIDS (PLWHA), Melbourne
Positive Living Centre, Melbourne
Prahran Market Clinic, Melbourne
Royal Melbourne Hospital, Melbourne
South East Alcohol and Drug Services, Outreach and Prevention Program, Melbourne
Southern Hepatitis/HIV/AIDS Resource and Prevention Service (SHARPS), Melbourne
St Kilda Needle and Syringe Program, Melbourne
The Alfred Hospital, Melbourne
The Carlton Clinic, Melbourne
The Centre Clinic, Melbourne
Victorian AIDS Council/Gay Men’s Health Centre (GMHC), Melbourne
Victorian Cytology Service, Melbourne
Victorian Infectious Diseases Reference Laboratory, Melbourne
Western Region AIDS/Hepatitis Prevention Program (WRAP), Melbourne

Western Australia
Bunbury Western Australia User’s Association (WASUA), Bunbury, WA
Centre for Clinical Immunology & Biomedical Statistics, Perth
Communicable Disease Control Directorate, Department of Health, Perth
Fremantle Hospital, Perth
Maylands Western Australia User’s Association (WASUA), Perth
Ministry of Justice, Strategic and Specialist Services Division, Perth
Princess Margaret Hospital for Children, Perth
Royal Perth Hospital, Perth
Western Australian AIDS Council, Perth
Western Australian Substance Users Association, Perth and Bunbury, WA
Western Region AIDS and Hepatitis Prevention, Perth

International
Academic Medical Centre, University of Amsterdam, Amsterdam, The Netherlands
Agence Nationale pour la Recherche de SIDA (ANRS), Paris, France
AIDS Clinical Centre, International Medical Centre of Japan, Tokyo, Japan
AIDS Malignancy Consortium, Alabama, USA
American Foundation for AIDS Research, New York, USA
Asia Regional office, Family Health International (FHI), Bangkok, Thailand
Auckland Hospital, Auckland, New Zealand
Auckland Sexual Health Clinic, Auckland, New Zealand
Beijing Ditan Hospital, Beijing, China
Buddhachinnaraj Hospital, Phitsanulok, Thailand
Bumrungrad Hospital, Bangkok, Thailand
Canadian Trials Network (CTN), Vancouver, Canada
Center for AIDS Prevention Studies, University of California, San Francisco, USA
Centers for Disease Control and Prevention, Atlanta, USA
Centre Regional D’Essais Clinique VIH, Montreal, Canada
Centro de Asistencia e Investigacion Clinica de Inmunocomprometidos (CAICI), Rosario, Argentina
Chelsea and Westminster Hospital, London, UK
Chiang Rai Regional Hospital, Chiang Rai, Thailand
Chiba University, Chiba, Japan
Chonburi Regional Hospital, Chonburi, Thailand
Chulalongkorn Hospital, Bangkok, Thailand
Columbia University, New York, USA
Community Research Initiative of New England, Boston, USA
Denver Infectious Disease Consultants, Denver, USA
Department of HIV/GUM Research, Brighton, UK
Division of Statistics, School of Public Health, University of Minnesota, Minneapolis, USA
European Centre for the Epidemiological Monitoring of AIDS, Saint Maurice, France
Family Health Institute, Family Health International (FHI), North Carolina, USA
Fundacion Centro de Estudios Infectologicos (FUNCEI) – Clinica La Sagrada Familia, Buenos Aires, Argentina
Gemeinschafts Praxis, Dusseldorf, Germany
Geneva Hospital, Geneva, Switzerland
Harlem Hospital Centre, New York, USA
Harvard University, Massachusetts, USA
HIV Netherlands, Australia, Thailand Research Collaboration (HIV-NAT), Bangkok, Thailand
HIV Project, Ruby Hall Clinic, Pune, India
Hospital Cantonal Universitaire, Geneva, Switzerland
Hospital Central, Mendoza, Argentina
Hospital Clinic Provincial de Barcelona, Barcelona, Spain
Hospital de Enfermedades Infecciosas FJ Muniz, Buenos Aires, Argentina
Hospital General de Agudos JM Ramos Mejia, Buenos Aires, Argentina
Hospital General de Agudos Juan A Fernandez, Buenos Aires, Argentina
Hospital Gui de Chauliac, Montpellier, France
Hospital Haut-Leveque, Bordeaux, France
Hospital Interzonal de Agudos San Juan de Dios, La Plata, Argentina
Hospital Interzonal General de Agudos Oscar Alende, Mar del Plata, Argentina
Hospital Italiano de Buenos Aires, Buenos Aires, Argentina
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Hospital Rothschild, Paris, France
Hospital Universitario Clementino, Rio de Janeiro, Brazil
Hvidovre Hospital, Copenhagen, Denmark
Infectologia Hospital, Alejandro Posadas, Haedo, Argentina
International AIDS Society, Stockholm, Sweden
International AIDS Therapy Evaluation Centre, Amsterdam, The Netherlands
Istituto Superiore di Sanita, Rome, Italy
Kaplan Medical Centre, Rehovot, Israel
Kings College Hospital, London, UK
Massachusetts General Hospital, Boston, USA
Medical Research Council Clinical Trials Unit, London, UK
Ministry of Health, Kuala Lumpur, Malaysia
Ministry of Public Health, Bangkok, Thailand
Montreal General Hospital, Montreal, Canada
National Cancer Institute, Bethesda, USA
National Center for HIV/AIDS, Dermatology and STD (NCHADS), Phnom Penh, Cambodia
National Heart, Lung and Blood Institute, Bethesda, USA
National Institute of Allergy and Infectious Diseases, Bethesda, USA
Northwestern University Medical School, Chicago, USA
Osaka National Hospital, Osaka, Japan
Population Council, Bangkok, Thailand
Queen Elizabeth Hospital, Hong Kong, China
Ramathibodi Hospital, Mahidol University, Bangkok, Thailand
Rambam Medical Centre, Haifa, Israel
Research Institute for Tropical Medicine, Manila, Philippines
Royal Free Hospital, London, UK
Royal Sussex County Hospital, Brighton, UK
San Francisco General Hospital, San Francisco, USA
Sanpatong Hospital, Chiang Mai, Thailand
Siriraj Hospital, Bangkok, Thailand
Srinagarind Hospital, Khon Kaen, Thailand
St Paul’s Hospital, Vancouver, Canada
Swiss HIV Cohort Study, Geneva, Switzerland
Taipei Veterans General Hospital and AIDS Prevention and Research Centre, National Yang-Ming University, Taipei, Taiwan
Tan Tock Seng Hospital, Singapore
Tel Aviv Sourasky Medical Centre, Tel Aviv, Israel
Terry Beirn Community Programs for Clinical Research in AIDS (CPCRA), Washington, USA
Thai Red Cross Society, Chulalongkorn University Hospital, Bangkok, Thailand
The Chaim Sheba Medical Centre, Ramat Gan, Israel
The Government Pharmaceutical Organisation, Bangkok, Thailand
UNAIDS, Geneva, Switzerland
University Malaya, Kuala Lumpur, Malaysia
University of Minnesota, Minneapolis, USA
University of Munich, Munich, Germany
University of Oxford, Oxford, UK
University of Tokyo Institute of Medical Science, Tokyo, Japan
University of Toronto, Toronto, Canada
Vajira Hospital, Bangkok, Thailand
Waikato Hospital, Hamilton, New Zealand
Washington University School of Medicine, St Louis, USA
Wellington Hospital, Wellington, New Zealand
Wetherall Institute of Molecular Medicine, Oxford, UK
World Health Organisation South East Asia Regional Office, Delhi, India
World Health Organisation Western Pacific Regional Office, Manila, Philippines
Yang-Ming University, Taipei, Taiwan
YRG Centre for AIDS Research and Education, Chennai, India

Pharmaceutical and biomedical industry
Abbott Australasia Pty Ltd, Sydney
Agouron Pharmaceuticals Inc, California, USA
Becton Dickinson Pty Ltd, Sydney
Boehringer Ingelheim Pty Ltd, Sydney
Bristol-Myers Squibb Pharmaceuticals, Melbourne
Chiron Therapeutics, Emeryville, USA
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Gilead Sciences, Melbourne
GlaxoSmithKline Australia, Melbourne
IDT Australia Ltd, Melbourne
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Merck Sharp and Dohme, Sydney
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Roche Products Pty Ltd, Sydney
TIBOTEC, Mechelen, Belgium
Virax Immunotherapeutics, Melbourne
Advisory committees

Surveillance Committees

Annual Surveillance Report Advisory Committee

Jeremy McAnulty MB BS, MPH (Chair)
Director, Communicable Diseases Branch, NSW Health Department, Sydney

Greg Dore BSc, MB BS, FRACP, MPH, PhD
NCHECR

Andrew Grulich MB BS, MSc, PhD, DRACOG, FAFPHM
NCHECR

Paul Jelfs PhD
Head, Population Health Unit, Australian Institute of Health and Welfare, Canberra

John Kaldor PhD
NCHECR

Steve Liebke
Publications and Resource Development Officer, Australian Hepatitis Council, Canberra

Ann McDonald BSc, MPH
NCHECR

Kirsty Machon BAComm(Hons), MA, Grad Dip Arts
HIV Health Policy Officer, National Association of People Living with HIV/AIDS, Sydney

Tadhg McMahon
Manager, Multicultural HIV/AIDS and Hepatitis C Service, Sydney

Anne Mijch MB BS(Hons), FRACP, OAM
Head, Victorian HIV Service, Infectious Diseases Unit, The Alfred Hospital, Melbourne

Dermot Ryan
Manager, AFAO and NAPWA Education Team and AFAO Indigenous Projects, Australian Federation of AIDS Organisations, Sydney

Jan Savage MB BS, Dip Ven, MPH
Head, Northern Territory AIDS/STD Program, Department of Health, Darwin

Cindy Shannon BA, GradDipEd(Tert), MBA
Associate Professor and Director, Indigenous Health, Population Health Unit, University of Queensland, Brisbane

Jenean Spencer PhD, MAE
Director, Surveillance and Epidemiology Section, Communicable Diseases Branch, Population Health Division, Australian Government Department of Health and Ageing, Canberra

Graham Tallis MB BS, MPH, FAFPHM
Manager, Communicable Diseases Section, Department of Human Services, Melbourne

Paul Van de Ven PhD
Associate, National Centre in HIV Social Research, UNSW, Sydney

Russell Waddell MB BS, BSc, FACSHP
Clinic Manager, STD Services, Royal Adelaide Hospital, Adelaide

Melanie Middleton BMedSc, MPH (Secretary)
NCHECR

National HIV Surveillance Committee*

Jan Savage MB BS, Dip Ven, MPH (Chair)
Head, Northern Territory AIDS/STD Program, Department of Health, Darwin

Mark Bartlett BSc, DipEd, RGN, MPH, GradDipAppEpi
Senior Surveillance Officer, Communicable Diseases Branch, NSW Health Department, Sydney

Louise Carter RN, GradDipHealthPromPubHealth (to July)
Director, Communicable Disease Surveillance and Management, ACT Department of Health, Housing and Community Care, Canberra

David Coleman BSc(Hons), DipAppSc(EnvHlth)
Scientific Officer, Communicable Diseases Surveillance, Department of Health and Human Services, Hobart

Tess Davey RN, GradDip(HealthCoun)
Manager, Surveillance Unit, STD Services, South Australian Health Commission, Adelaide

Carolien Giele RN, RM, BSc(Hons)
Senior Project Officer, Communicable Disease Control Directorate, Department of Health, Perth

Rebecca Guy BAappSc(MedlabSc), MAE
Research Officer, Epidemiology and Social Research Office, Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

* Subcommittee of the Communicable Diseases Network Australia through the Intergovernmental Committee on HIV/AIDS, Hepatitis C and Related Diseases
John M Kaldor PhD
NCHECR

Riemke Kampen (from July)
Manager, Disease Surveillance and Immunisation, Communicable Disease Control Section, ACT Department of Health, Housing and Community Care, Canberra

Melanie Middleton BMedSc, MPH
NCHECR

Hugo Ree MB, FRCP, FACHPH
Senior Medical Officer and Consultant Physician, AIDS Medical Unit, Queensland Health, Brisbane

Ann McDonald BSc, MPH (Secretary)
NCHECR

National Viral Hepatitis Surveillance Committee*

Graham Tallis MB BS, MPH, FAFPHM (Chair)
Manager, Communicable Diseases Section, Department of Human Services, Melbourne

Luke Atkin
Surveillance Manager, Blood-Borne Viruses/Sexually Transmissible Infections Program, Communicable Diseases Section, Department of Human Services, Melbourne

Mark Bartlett BSc, DipEd, RGN, MPH, GradDipAppEpi (from June)
Surveillance Manager, Centre for Health Protection, NSW Health Department, Sydney

Louise Carter RN, GradDipHealthPromPubHealth (to March)
Director, Communicable Disease Surveillance and Management, ACT Department of Health, Housing and Community Care, Canberra

David Coleman BSc(Hons), DipAppSc(EnvHlth)
Scientific Officer, Communicable Diseases Surveillance, Department of Health and Human Services, Hobart

Joy Copland, MSc, GradDipPubHealth
Senior Project Officer, STD Services, Royal Adelaide Hospital, Adelaide

Greg Dore BSc, MB BS, FRACP, MPH, PhD
NCHECR

Dominic Dwyer BSc(Med), MB BS, MD, FRACP, FRCPA
Medical Virologist, Centre for Infectious Diseases and Microbiology Laboratory Services, The Institute of Clinical Pathology and Medical Research, Westmead Hospital, Sydney

Carolien Giele RN, RM, BSc(Hons)
Senior Project Officer, Communicable Disease Control Directorate, Department of Health, Perth

Jeffrey Hanna MB BS, MPH (to June)
Public Health Physician, Tropical Public Health Unit, Queensland Health, Cairns, Qld

Margaret Hellard MB BS, FRACP, PhD, FAFPHM
Head, Epidemiology and Social Research Unit, Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

John Kaldor PhD
NCHECR

Riemke Kampen (from March)
Manager, Disease Surveillance and Immunisation, Communicable Disease Control Section, ACT Department of Health, Housing and Community Care, Canberra

Annie Madden
Executive Officer, Australian Injecting and Illicit Drug Users League, Canberra

Emma Miller BAppSci, MPH
Epidemiologist, South Australian Department of Human Services, Adelaide

Robyn Pugh BAppSci(MedTech), PGDipPubHlth, MSc, PhD (to September)
Senior Epidemiologist, Communicable Diseases Unit, Queensland Health, Brisbane

Jan Savage MB BS, Dip Ven, MPH (to December)
Head, Northern Territory AIDS/STD Program, Department of Health, Darwin

Jenean Spencer PhD, MSc
Director, Surveillance and Epidemiology Section, Communicable Diseases Branch, Population Health Division, Australian Government Department of Health and Ageing, Canberra

Jack Wallace
Executive Officer, Australian Hepatitis Council, Canberra

Margaret Young, FAFPHM (from October)
Acting Manager, Communicable Diseases Unit, Queensland Health, Brisbane

* Subcommittee of the Communicable Diseases Network Australia through the Intergovernmental Committee on HIV/AIDS, Hepatitis C and Related Diseases
Monica Robotin MB BS, FRACS (to February)
(Secretary)
NCHECR

Melanie Middleton BmedSc, MPH (from March)
(Secretary)
NCHECR

Sexually Transmissible Infections Surveillance Committee*

Russell Waddell MB BS, BSc, FACSHP (Chair)
Clinic Manager, STD Services, Royal Adelaide Hospital, Adelaide

Jenny Atthowe MSc(Research)
Senior Research Officer, Sexual Health and Blood-Borne Virus Program, Communicable Disease Control Directorate, Department of Health, Perth

Mark Bartlett BSc, DipEd, RGN, MPH, GradDipAppEpi (from June)
Surveillance Manager, Centre for Health Protection, NSW Health Department, Sydney

Louise Carter RN, GradDipHealthPromPubHealth (to March)
Director, Communicable Disease Surveillance and Management, ACT Department of Health, Housing and Community Care, Canberra

Tess Davey RN, GradDipHealthPromPubHealth (to March)
Manager, Surveillance Section, STD Services, Royal Adelaide Hospital, Adelaide

Patricia Fagan MB BS, FAFPHM, DCH, DRCOG, MPH
Senior Medical Advisor, Office for Aboriginal and Torres Strait Islander Health, Australian Government Department of Health and Ageing, Canberra

Christopher Fairley MB BS, FRACP, FACSHP, FAFPHM, PhD
Professor and Director, Melbourne Sexual Health Centre, Melbourne

Bruce Forrest RN
Clinical Nurse Consultant, Aboriginal Sexual Health, Greater Murray Area Health Service, Albury, NSW

John M Kaldor PhD
NCHECR

Riemke Kampen (from March)
Manager, Disease Surveillance and Immunisation, Communicable Disease Control Section, ACT Department of Health, Housing and Community Care, Canberra

Gary Lum AM, BMedSc, MAS, MB BS, FRCPA, FACTM, MRACMA
Director of Pathology, Royal Darwin Hospital, Darwin; Supervising Pathologist, Department of Health, Darwin

Melanie Middleton BMedSc, MPH
NCHECR

Melissa Morgan MB BS, DipRACOG, MPH
Medical Adviser, Blood-Borne Viruses/Sexually Transmissible Infections Program, Communicable Diseases Section, Department of Human Services, Melbourne

Maree O’Sullivan MB BS
Director, Sexual Health Service, Department of Health and Human Services, Hobart

David Plummer MB BS, PhD, FRCPA, FACSHP, MASM, AM (to October)
Associate Professor in Public Health and Community Health, University of New England, Armidale, NSW

Robyn Pugh BAppSci(Med Tech), PGDipPubHlth, MAE, PhD (to September)
Senior Epidemiologist, Communicable Diseases Unit, Queensland Health, Brisbane

Jan Savage MB BS, DipVen, MPH (to December)
Head, Northern Territory AIDS/STD Program, Department of Health, Darwin

Jenean Spencer PhD, MAE
Director, Surveillance and Epidemiology Section, Communicable Diseases Branch, Population Health Division, Australian Government Department of Health and Ageing, Canberra

Margaret Young FAFPHM (from October)
Acting Manager, Communicable Diseases Unit, Queensland Health, Brisbane

Claire Vajdic BOptom(Hons), PhD (Secretary)
NCHECR

HIV Subtyping Committee

Dominic Dwyer BSc(Med), MB BS, MD, FRACP, FRCPA (Chair)
Staff Specialist, Medical Virology, Centre for Infectious Diseases and Microbiology Laboratory Services, Westmead Hospital, Sydney

Chris Birch BSc, MSc, PhD
Senior Medical Scientist, Victorian Infectious Diseases Reference Laboratory, Melbourne

Mike Catton BSc (Hons), MBChB, FRCPA
Director, Victorian Infectious Diseases Reference Laboratory, Melbourne

* Subcommittee of the Communicable Diseases Network Australia through the Intergovernmental Committee on HIV/AIDS, Hepatitis C and Related Diseases
Martyn French MB ChB, FRACP, MD, FRCPa, FRCP
Clinical Immunologist and Head, Department of
Clinical Immunology and Biochemical Genetics,
Royal Perth Hospital, Perth

Geoff Higgins MBBS, FRACP, FRCPA, PhD
Deputy Head (Virology), Infectious Diseases
Laboratories, Institute of Medical and Veterinary
Science, Adelaide

John Kaldor PhD
NCHECR

Tony Kelleher BSc(Hons), MB BS(Hons), PhD,
FRACP, FRCPA
NCHECR

Ann McDonald BSc, MPH
NCHECR

Simon Mallal BMedSci(Hons), MB BS, FRACP, FRCPa
Professor and Executive Director, Centre for Clinical
Immunology and Biomedical Statistics, Royal Perth
Hospital, Perth

Robert Oelrichs MBBS, BMedSci, MD, PhD
Senior Research Fellow, AIDS Molecular Biology
Unit, Macfarlane Burnett Institute for Medical
Research and Public Health, Melbourne

Mary Poynten MBBS, Dip Child Health, MPH(Hons)
NCHECR

Melanie Middleton BMedSc, MPH (Secretary)
NCHECR

The Australian HIV Observational
Database Steering Committee

Anne Mijch MB BS (Hons), FRACP, OAM (Chair)
Head, Victorian HIV Service, Infectious Diseases
Unit, The Alfred Hospital, Melbourne

Jonathan Anderson MB ChB, MRCGP, DRCOG,
DipVen, MSc(Med Sci)
General Practitioner, The Carlton Clinic, Melbourne

David Baker MB ChB, DCH, DipMed(Sexual Health)
General Practitioner, 407 Doctors, Sydney

John Chuah BSc(Med)Hons, MB BS, FACSHP
Director, Gold Coast Sexual Health Clinic, Miami, Qld

John Daye OAM
Treatments Spokesperson, National Association of
People Living with HIV/AIDS, Melbourne

Simon Mallal BMedSci(Hons), MB BS, FRACP, FRCPa
Professor and Executive Director, Centre for Clinical
Immunology and Biomedical Statistics, Royal Perth
Hospital, Perth

Brian Mulhall MA, MPH, FRCP, FACSHP, DTM&H
Clinical Senior Lecturer, School of Public Health, The
University of Sydney, Sydney

Patrick Rawstorne BA (Hons)
Research Fellow, National Centre in HIV Social
Research, UNSW, Sydney

Norman Roth MB BS, DipAtMed, DipVen, FACSHP
General Practitioner, Prahran Market Clinic,
Melbourne

Kathy Petoumenos BSc, MA, MPH (Hons) (Convenor)
NCHECR

HIV Vaccine Design and
Development Team

Program Management Committee

Peter McDonald AM, MB BS, FRCPA, MRACP,
FRACP, FASM (Chair)
Professor of Microbiology and Infectious Diseases,
Flinders University, Adelaide;
Chair, ANCAHRD Clinical Trials and Research
Committee

David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP
NCHECR

Ron MacDonald, BSc, PhD, FAIP
Deputy-Vice-Chancellor (Research), University of
Newcastle, Newcastle, NSW

Elspeth McLachlan DSc, FAA
Pro-Vice-Chancellor (Research), UNSW, Sydney

Jack Malecki BSc(Hons), PhD, MAICD
Commercial Manager, CSIRO Livestock Industries,
Geelong, Vic

Chris Parish, BAgSc, PhD
Professorial Fellow and Head, Division of Immunology
and Genetics, John Curtin School of Medical Research,
Australian National University, Canberra

Praphan Phanuphak MD, PhD
Professor of Medicine and Microbiology, Department
of Medicine, Chulalongkorn University, Bangkok,
Thailand;
Director, The Thai Red Cross AIDS Research Centre,
Bangkok, Thailand;
Co-Director, The HIV Netherlands, Australia,
Thailand, Research Collaboration (HIV-NAT),
Bangkok, Thailand

Roy Robins-Browne MB BS, PhD, DTM&H, FRCPa,
FRCPA, FASM
Professor and Head, Department of Microbiology and
Immunology, The University of Melbourne, Melbourne

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Bill Whittaker
National President, Australian Federation of AIDS Organisations, Sydney

Deborah Sullivan (Secretary)
Operations Manager, ANCAHRD Clinical Trials and Research Committee

Ex officio
Mark Sullivan
NCHECR

Intellectual Property Committee
Jack Malecki BSc(Hons), PhD, MAICD (Chair)
Commercial Manager, CSIRO Livestock Industries, Geelong, Vic

Richard Fiora BA, LLB
Partner, Banki Haddock Fiora, Sydney

Stephen Kent MB BS, FRACP, MD
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Elspeth McLachlan DSc, FAA
Pro-Vice-Chancellor (Research), UNSW, Sydney

Theo Magouas BA, LLB, Grad Dip Legal Studies, LLM
Contracts Adviser, Research Office, UNSW, Sydney

Mark Sullivan
NCHECR

Deborah Sullivan (Convenor)
Operations Manager, ANCAHRD Clinical Trials and Research Committee

Program Executive Committee
David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP (Program Director and Chair)
NCHECR

Don Baxter BA, Dip Lib
Executive Director, Australian Federation of AIDS Organisations, Sydney

David Beames BSc(Hons)
Chief Executive Officer, Virax Holdings Limited, Melbourne

Mark Bebbington
Policy and International Manager, Australian Federation of AIDS Organisations, Sydney

David Boyle BSc, MSc, PhD
Senior Principal Scientist, CSIRO Animal Health Laboratory, Geelong, Vic

Sean Emery BSc(Hons), PhD
NCHECR

Tony Kelleher BSc(Hons), MB BS(Hons), PhD, FRACP, FRCPA
NCHECR

Stephen Kent MB BS, FRACP, MD
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Susan Kippax BA(Hons), PhD
Professor and Director, National Centre in HIV Social Research, UNSW, Sydney

Alistair Ramsay PhD
Professor of Medicine, Tulane Gene Therapy Consortium, Louisiana State University, New Orleans, USA

Ian Ramshaw MSc, PhD
Professor of Cell Biology, John Curtin School of Medical Research, Australian National University, Canberra

Kiat Ruxrungtham MD
Director, AIDS Research Centre, Chulalongkorn University Hospital, Bangkok, Thailand

Ex officio
Gordon Ada AO, DSc, FAA
Professor of Cell Biology, John Curtin School of Medical Research, Australian National University, Canberra

Antony Basten AO, FAA, FTSE, MB BS, DPhil, FACP, FRACP, FRCPA
Executive Director, Centenary Institute, Royal Prince Alfred Hospital, Sydney

Annie Tung MPA
NCHECR

Roberta Withnall BSc (Convenor)
Consultant to NCHECR

Clinical Program Committee
Sean Emery BSc(Hons), PhD (Chair)
NCHECR

Mark Bebbington
Policy and International Manager, Australian Federation of AIDS Organisations, Sydney

David Boyle BSc, MSc, PhD
Senior Principal Scientist, CSIRO Animal Health Laboratory, Geelong, Vic

David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP
NCHECR

Rosemary Ffrench BSc(Hons), PhD
Conjoint Senior Lecturer and Senior Scientist, Westfield Research Laboratories, Sydney Children’s Hospital, UNSW, Sydney
Andrew Grulich MB BS, MSc, PhD, DRACOG, FAFPHM
NCHECR

John Kaldor PhD
NCHECR

Tony Kelleher BSc(Hons), MB BS(Hons), PhD, FRACP, FRCPA
NCHECR

Stephen Kent MB BS, FRACP, MD
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Liz Keoshkerian MSc
Senior Research Officer, Westfield Research Laboratories, Sydney Children's Hospital, UNSW, Sydney

Kirsty Machon BAComm, MA
HIV Health Policy Officer, National Association of People Living with HIV/AIDS, Sydney

Paul McQueen BSc, GradDipBiotech, PhD, MASM
Community Representative, National Association of People Living with HIV/AIDS, Sydney

Rebekah Puls BSc(Hons), PhD
NCHECR

Andy Quan MA
International Policy Officer, Australian Federation of AIDS Organisations, Sydney

Kiat Ruxrungtham MD
Director, AIDS Research Centre, Chulalongkorn University Hospital, Bangkok, Thailand

Paul van de Ven PhD
Deputy Director, National Centre in HIV Social Research, UNSW, Sydney

Thai Project Clinical Development Committee

Mark Bebbington
Policy and International Manager, Australian Federation of AIDS Organisations, Sydney

David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP
NCHECR

Susan Kippax BA(Hons), PhD
Professor and Director, National Centre in HIV Social Research, UNSW, Sydney

Praphan Phanuphak MD, PhD
Professor of Medicine and Microbiology, Department of Medicine, Chulalongkorn University, Bangkok, Thailand; Director, The Thai Red Cross AIDS Research Centre, Bangkok, Thailand; Co-Director, The HIV Netherlands, Australia, Thailand, Research Collaboration (HIV-NAT), Bangkok, Thailand

Laboratory Subcommittee

Rosemary Ffrench BSc(Hons), PhD (Chair/Convenor)
Conjoint Senior Lecturer and Senior Scientist, Westfield Research Laboratories, Sydney Children's Hospital, UNSW, Sydney

Sean Emery BSc(Hons), PhD
NCHECR

Bill Jaramillo BSc(Hons)
Senior Research Officer, Westfield Research Laboratories, Sydney Children's Hospital, UNSW, Sydney

Tony Kelleher BSc(Hons), MB BS(Hons), PhD, FRACP, FRCPA
NCHECR

Stephen Kent MB BS, FRACP, MD
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Liz Keoshkerian MSc
Senior Research Officer, Westfield Research Laboratories, Sydney Children's Hospital, UNSW, Sydney

Rebekah Puls BSc(Hons), PhD
NCHECR

Kiat Ruxrungtham MD
Director, AIDS Research Centre, Chulalongkorn University Hospital, Bangkok, Thailand

Claudette Satchell BSc(Hons)
Hospital Scientist, Immunovirology Research Laboratory, St Vincent's Hospital, Sydney

Thai Project Clinical Development Committee

Mark Bebbington
Policy and International Manager, Australian Federation of AIDS Organisations, Sydney

David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP
NCHECR

Tony Kelleher BSc(Hons), MB BS(Hons), PhD, FRACP, FRCPA
NCHECR

Stephen Kent MB BS, FRACP, MD
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Susan Kippax BA(Hons), PhD
Professor and Director, National Centre in HIV Social Research, UNSW, Sydney

Prapchan Phanuphak MD, PhD
Professor of Medicine and Microbiology, Department of Medicine, Chulalongkorn University, Bangkok, Thailand; Director, The Thai Red Cross AIDS Research Centre, Bangkok, Thailand; Co-Director, The HIV Netherlands, Australia, Thailand, Research Collaboration (HIV-NAT), Bangkok, Thailand

Kiat Ruxrungtham MD
Director, AIDS Research Centre, Chulalongkorn University Hospital, Bangkok, Thailand

Mark Sullivan
NCHECR
Vaccine Vector Working Group

David Boyle BSc, MSc, PhD
Senior Principal Scientist, CSIRO Animal Health Laboratory, Geelong, Vic

David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP
NCHECR

Rosemary Ffrench BSc(Hons), PhD
Conjoint Senior Lecturer and Senior Scientist, Westfield Research Laboratories, Sydney Children’s Hospital, UNSW, Sydney

Stephen Kent MB BS, FRACP, MD
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Damian Purcell PhD
Lecturer, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Alistair Ramsay PhD
Professor of Medicine, Tulane Gene Therapy Consortium, Louisiana State University, New Orleans, USA

Ian Ramshaw MSc, PhD
Professor of Cell Biology, John Curtin School of Medical Research, Australian National University, Canberra

Scott Thomson BSc, PhD
Research Fellow, Vaccine Immunology Group, John Curtin School of Medical Research, Australian National University, Canberra

Sumith Nawaratne PhD AAICD FAIPM (Convenor)
Project Manager, Consultant to NCHECR

Ex officio

Mark Sullivan
NCHECR

Program Advisory Committee

Gordon Ada AO, DSc, FAA
Professor of Cell Biology, John Curtin School of Medical Research, Australian National University, Canberra

Dennis Altman MA
Professor of Politics, La Trobe University, Melbourne

Antony Basten AO, FAA, FTSE, MB BS, DPhil, FACP, FRACP, FRCPA
Executive Director, Centenary Institute, Royal Prince Alfred Hospital, Sydney

Anthony Cunningham MB BS, BMedSci(Hons), MD, FRACP, FRCPA, FASM
Director, Westmead Millennium Institute for Medical Research and Centre for Virus Research, Sydney

Usa Duongsa BA, MS, PhD
Lecturer, Faculty of Education, Chiang Mai University, Chiang Mai, Thailand

M Juliana McElrath MD, PhD
Professor and Director, Fred Hutchinson Cancer Research Centre, HIV-1 Vaccine Evaluation Unit, University of Washington, USA

NCHECR Working Groups

Chairs of Combined NCHECR Working Groups

Jonathan Anderson MB ChB, MRCGP, DRCOG, DipVen, MSc(Med Sci)
General Practitioner, The Carlton Clinic, Melbourne

Jennifer Hoy MB BS, FRACP
Associate Professor and Head, Clinical Research Section, Infectious Diseases Unit, The Alfred Hospital, Melbourne

The Antiretroviral Working Group

Gary Rogers MB BS, MGPPsych, FACPsychMed (Chair)
Clinical Lecturer and Program Director, The Care and Prevention Program, Department of General Practice, University of Adelaide, Adelaide

Janaki Amin BSc(Hons), MHP(Hons)
NCHECR

Suzanne Crowe MB BS, FRACP, MD
Professor and Head, AIDS Pathogenesis and Clinical Research Program, Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

John Cumming Grad Dip Public Sector Management
Executive Officer, People Living With HIV/AIDS (NSW), Sydney

Nicholas Deacon BSc(Hons), PhD
Associate Professor, School of Applied Sciences, Monash University, Gippsland Campus, Churchill, Vic

Dominic Dwyer BSc(Med), MB BS, FRACP, FRCPA
Staff Specialist, Medical Virology and Clinical Microbiology, Centre for Infectious Diseases and Microbiology Laboratory Services, Institute for Clinical Pathology and Medical Research, Westmead Hospital, Sydney

John Dyer MB BS, FRACP
Senior Consultant, Department of Microbiology and Infectious Diseases, Flinders Medical Centre, Adelaide

Martyn French MB ChB, FRACP, MD, FRCPath, FRC
Clinical Immunologist and Head, Department of Clinical Immunology and Biochemical Genetics, Royal Perth Hospital, Perth
Tony Maynard FACBS  
Information Project Officer, AIDS Treatment Project Australia, Sydney;  
Enhanced Care Project Officer, AIDS Council of New South Wales, Sydney

Graham Mills MB ChB, MTH, FRACP  
Infectious Disease Physician, Respiratory and Infectious Diseases, Waikato Hospital, Hamilton, New Zealand

Richard Moore MB BS, Dip RACOG, FRACGP, DipVen  
General Practitioner, Carlton Clinic, Melbourne;  
Sessional HIV Specialist, Melbourne Sexual Health Centre, Melbourne;  
Clinical Assistant, Infectious Diseases Unit, The Alfred Hospital, Melbourne

Robert Oelrichs MD, PhD  
Senior Research Fellow, AIDS Molecular Biology Unit, Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

David Orth MBBS, DipObGyn, DipVen  
Director, Brunswick Street Medical Practice, Brisbane

Anna Pierce MB BS, FRACP  
Clinical Research Fellow, Department of Infectious Diseases, The Alfred Hospital, Melbourne

John Quin MB BS(Hons), PhD, FRACP, FRCPA  
Director of Clinical Immunology, HIV Medicine and Sexual Health, Liverpool Hospital, Sydney

Cassy Workman MB BS  
Director, AIDS Research Initiative, Sydney

Fraser Drummond MB ChB, MRCA, DA(UK)  
(Convenor)  
NCHECR

Primary HIV Infection Working Group

Robert Finlayson MB BS, DipVen, FACVen (Chair)  
General Practitioner, Taylor Square Private Clinic, Sydney

Chris Birch BSc, MSc, PhD  
Senior Scientist, Victorian Infectious Diseases Reference Laboratory, Melbourne

Sharyn Casey  
Editor, HIV Australia and HIV Educator, Positive Education, Australian Federation of AIDS Organisations, Sydney

Philip Cunningham BAppSc(Med)  
Senior Scientist and Operations Manager, NSW State Reference Laboratory for HIV/AIDS, Centre for Immunology, St Vincent’s Hospital, Sydney

Stephen Delaney BSc, PhD, MASM  
Community Representative, National Association of People Living with HIV/AIDS, Sydney

Nicholas Doong MB BS, DipObs, MPh, FRACGP  
General Practitioner, Dr Doong’s Surgery, Sydney

Henrike Korner PhD (from November)  
Research Fellow, National Centre in HIV Social Research, UNSW, Sydney

Dale McPhee PhD  
Research Coordinator, National Serology Reference Laboratory, St Vincent’s Institute of Medical Research, Melbourne

Nicholas Medland BA(Hons), MB BS, DipVen  
Clinical Director, The Centre Clinic, Victorian AIDS Council/Gay Men’s Health Centre, Melbourne

Cathy Pell MBBS, MM  
Specialist General Practitioner, Taylor Square Private Clinic, Sydney

Kathy Petoumenos BSc, MA, MPH(Hons)  
NCHECR

Norman Roth MB BS, DipAvMed, DipVen, FACSHP  
General Practitioner, Prahran Market Clinic, Melbourne

Don Smith MB ChB, MD  
NCHECR

Patricia Grey BA, Post Grad Dip AppSc, CNS, Dip(Counselling) (Convenor)  
NCHECR

Toxicology/Pharmacology Working Group

Andrew Carr MD, FRACP, FRCPA (Chair)  
Associate Professor and Staff Specialist, Department of Immunology and HIV Medicine, St Vincent’s Hospital, Sydney

Anthony Allworth MB BS, FRACP, FRCPA, FACTM, MASM  
Director, Infectious Diseases Unit, Royal Brisbane Hospital, Brisbane

Mark Bloch MB BS  
General Practitioner, Holdsworth House General Practice, Sydney

Alan Brotherton BA  
Manager, Information Services and Gay Men's Health, AIDS Council of New South Wales, Sydney

Jennifer Hoy MB BS, FRACP  
Associate Professor and Head, Clinical Research Section, Infectious Diseases Unit, The Alfred Hospital, Melbourne
Debbie Marriott BSc(Med), FRACP, FRCPA
Senior Staff Specialist, Clinical Microbiology and Infectious Diseases, St Vincent’s Hospital, Sydney

David Menadue BA, BEd
Care and Support Spokesperson, National Association of People Living with HIV/AIDS, Melbourne

Anne Mijch MB BS(Hons), FRACP, OAM
Head, Victorian HIV Service, Infectious Diseases Unit, The Alfred Hospital, Melbourne

Asha Persson BA(Hons), PhD
Research Officer, National Centre in HIV Social Research, UNSW, Sydney

Peter Piggott MB BS, FRACP
Head, HIV Medicine, Department of Thoracic Medicine and Respiratory Investigation, Royal North Shore Hospital, Sydney

Tim Read MB BS
Sexual Health Physician, Melbourne Sexual Health Clinic, Melbourne

David Shaw MB BS, FRACP
Director, Infectious Diseases and Infection Prevention Units, Royal Adelaide Hospital, Adelaide

David Sowden MB BS, BS DIP, RACOG, FRACP, FRCPA
Infectious Diseases Physician, Nambour General Hospital, Nambour, Qld

Handan Wand MA, MS, PhD
NCHECR

Oncology Working Group

David Goldstein MB BS, MRCP(UK), FRACP (Chair)
Associate Professor and Senior Staff Specialist, Department of Medical Oncology, Prince of Wales Hospital, Sydney

Jonathan Anderson MB ChB, FRACGP, DRCOG, DipVen, MSc(MedSci)
General Practitioner, The Carlton Clinic, Melbourne

Trish Bullen RN, RITN
Manager, Sexual Health Program, Macquarie Area Health Service, Dubbo, NSW

Mitchell Chipman MB BS, FRACP
Medical Oncologist, The Alfred Hospital, Melbourne

John Daye OAM
Treatments Spokesperson, National Association of People Living with HIV/AIDS, Melbourne

Andrew Grulich MB BS, MSc, DRACOG, FAFPHM, PhD
NCHECR

Richard Hillman BSc(Hons), MD, FRCP, FACSHP
Senior Lecturer and Senior Staff Specialist, STI Research Centre, Westmead Hospital, Sydney

Sam Milliken MB BS, FRACP, FRCPA
Senior Lecturer and Senior Staff Specialist, Department of Haematology, St Vincent’s Hospital, Sydney

Adrian Mindel MB Ch, MSc(CTM), MD, FRCP, FRACP, FACSHP
Professor of Sexual Health Medicine, The University of Sydney, Sydney;
Director, Sexually Transmitted Infections Research Centre, Westmead Hospital, Sydney

Handan Wand MA, MS, PhD
NCHECR

Kate Clezy MB BS, FRACP (Convenor)
NCHECR

Immune-Based Therapies Working Group

Sharon Lewin MB BS(Hons), FRACP, PhD (Chair)
Professor and Director, Infectious Diseases Unit, The Alfred Hospital, Melbourne

Michael Boyle BMedSci, MB BS, MD, FRACP, FRCPA
Staff Specialist, Immunology and Infectious Diseases, John Hunter Hospital, Newcastle, NSW

John Chuah BSc(Med)Hons, MB BS, FACSHP
Director, Gold Coast Sexual Health, Miami, Qld

Roger Garsia MB BS(Hons), PhD, FRACP, FRCPE
Director of Clinical AIDS Services and Staff Specialist in Immunology, Department of Clinical Immunology, Royal Prince Alfred Hospital, Sydney

Tony Kelleher BSc(Hons), MB BS(Hons), PhD, FRACP, FRCPA
NCHECR

Mark Kelly MB BS(Hons)
Director of Research, Albion Street Centre, Sydney

Stephen Kent MB BS, FRACP, MD (Deputy Chair)
Associate Professor, Department of Microbiology and Immunology, The University of Melbourne, Melbourne

Matthew Law MA, MSc, PhD
NCHECR

Kirsty Machon BAComm, MA, GradDipArts
HIV Health Policy Officer, National Association of People Living with HIV/AIDS, Sydney

Paul McQueen BSc, GradDipBiotech, PhD Biotech, MASM
Community Representative, National Association of People Living with HIV/AIDS, Sydney
Simon Mallal BMedSci(Hons), MB BS, FRACP, FRCPA
Professor and Executive Director, Centre for Clinical Immunology and Biomedical Statistics, Royal Perth Hospital, Perth

Graeme Stewart BSc(Med), MB BS, PhD, FRACP, FRCPA
Associate Professor and Director of Clinical Immunology, Department of Clinical Immunology and Allergy, Westmead Hospital, Sydney

John Sullivan PhD, MPH
Principal Scientist, Australian Red Cross Blood Service, Sydney

John Zaunders BSc (Hons)
Senior Scientist, Centre for Immunology, St Vincent’s Hospital, Sydney

Sarah Pett BSc(Hons), MB BS(Hons), DTM&H, MRCP (UK), FRACP (Convenor)
NCHECR

Neurology Working Group
Bruce Brew MB BS(Hons), MD, FRACP (Chair)
Professor and Head, Department of Neurosciences and Neurology, St Vincent’s Hospital, Sydney

Margaret Bain BSc(Psych), M ClinPsych, M ClinNeuropsych
Neuropsychologist, HIV Neuropsychology Service, St Vincent’s Hospital, Sydney

Catherine Cherry MB BS, FRACP
Infectious Diseases Physician, The Alfred Hospital, Melbourne

Steve Ellen MB BS, MM Ed(Psych), FRANZCP
Head, Consultation – Liaison Psychiatry, The Alfred Hospital, Melbourne

Paul Gorry PhD
Head, HIV Molecular Pathogenesis Laboratory, Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

Barrie Harrison BSc(Hons), PhD
Treatments and HIV Health Promotion Officer, AIDS Council of New South Wales, Lismore, NSW

Brian Kelly BMed, PhD, FRANZCP, FRACHPM
Director, Mental Health Service, St Vincent’s Hospital, Sydney

Matthew Law MA, MSc, PhD
NCHECR

Patrick Li MB BS, FHKCP, FHKAM (Medicine), FRCP (London), FRCP (Edinburgh)
Chief of Service, Department of Medicine, Queen Elizabeth Hospital, Hong Kong

Catriona McLean BSc, MB BS, FRCPA, MD
Consultant Pathologist, The Alfred Hospital, Melbourne

Patricia Price PhD
Senior Lecturer, School of Surgery and Pathology, The University of Western Australia, Perth

Nitin Saksena BSc, MSc, PhD
Head, Retroviral Genetics Division, Centre for Virus Research, Westmead Millennium Institute for Medical Research, Sydney

Jo Watson
Executive Officer, National Association of People Living with HIV/AIDS, Sydney

Steve Wesselingh MB BS, FRACP, PhD
Director, Macfarlane Burnet Institute for Medical Research and Public Health, Melbourne

Edwina Wright MB BS, FRACP
Infectious Diseases Specialist, The Alfred Hospital, Melbourne

Jaimie Cox BSc(Hons), PhD, MAPS (Convenor)
(to November)
NCHECR

Viral Hepatitis Working Group
William Sievert MD, FRACP (Chair)
Head of Hepatology, Monash Medical Centre, Melbourne

Janaki Amin BSc(Hons), MHP(Hons)
NCHECR

David Baker MB ChB
General Practitioner, 407 Doctors, Sydney

Robert Batey MSc(Med)(Hons1), MB BS(Hons2), MD, FRACP, FRCP
Clinical Chair, Division of Medicine, John Hunter Hospital, Newcastle, NSW; Area Director, Drug and Alcohol Clinical Services, Hunter Area Health Service, Newcastle, NSW

Chris Burrell BSc(Med), MB BS, PhD, FRCPath, FRCPA
Professor of Virology, University of Adelaide, Adelaide

David A Cooper AO, Dsc, MD, FRACP, FRCPA, FRCP
NCHECR

Darrell Crawford MD, FRACP
Associate Professor of Medicine, Princess Alexandra Hospital, Brisbane

Greg Dore BSc, MB BS, FRACP, MPH, PhD
NCHECR

Geoff Farrell MD, FRACP
Robert W Storr Professor of Hepatic Medicine, Westmead Millennium Institute for Medical Research, Sydney
Margaret Hellard MB BS, FRACP, PhD, FAFPHM
Head, Epidemiology and Social Research Program,
Macfarlane Burnet Institute for Medical Research and
Public Health, Melbourne

John M Kaldor PhD
NCHECR

Susan Kippax BA(Hons), PhD
Professor and Director, National Centre in HIV Social
Research, UNSW, Sydney

Andrew Lloyd MB BS, MD, FRACP
Associate Professor and Consultant Infectious
Diseases Physician, Department of Infectious
Diseases, Prince of Wales Hospital, Sydney

Stephen Locarnini MB BS, BSc(Hons), PhD, FRCPH
Divisional Head, Research and Molecular
Development, Victorian Infectious Diseases Reference
Laboratory, Melbourne

Geoff McCaughan MB BS, FRACP, PhD
Professor of Medicine and Director, AW Morrow GE
and Liver Centre, The University of Sydney and Royal
Prince The Alfred Hospital, Sydney;
Head, Liver Immunobiology Group, Centenary
Institute of Cancer Medicine and Cell Biology, Sydney

Joe Sasadeusz MB BS, FRACP, PhD
Infectious Diseases Physician, Royal Melbourne
Hospital and The Alfred Hospital, Melbourne

Ingrid van Beek MB BS, MBA, FAFPHM
Director, Kirketon Road Centre, Sydney

Jack Wallace
Executive Officer, Australian Hepatitis Council,
Canberra

Gail Matthews MB ChB, MRCP (Convenor)
NCHECR

Kathy Petoumenos BSc, MA, MPH(Hons)
NCHECR

Jenny Skett RN
Study Nurse, Royal Perth Hospital, Perth

Alan Walker BA, GradDipAppSci, MPH
Nurse Practice Coordinator, Nambour General
Hospital, Nambour, Qld

Helen Wood RN
Clinical Research Coordinator, The Centre Clinic,
Melbourne

Janelle Zillman RN
Clinical Nurse, Infectious Diseases, Day Therapy Unit,
Royal Brisbane Hospital, Brisbane

Cate Carey RN BA MApplSc (Convenor)
NCHECR

NCHECR Working Groups ex officio
David A Cooper AO, DSc, MD, FRACP, FRCPA, FRCP
NCHECR

Sean Emery BSc(Hons), PhD
NCHECR

John M Kaldor PhD
NCHECR

Matthew Law MA, MSc, PhD
NCHECR

Peter McDonald AM, MB BS, FRCPA, MRACP,
FRACP, FASM (till November)
Professor of Microbiology and Infectious Diseases,
Flinders University, Adelaide;
Chair, ANCAHRD Clinical Trials and Research
Committee

Research Coordinator Working Group

Claire McCormack BNG, GradDipAdvNurse,
GradDipClinEpi (Chair)
Clinical Research Coordinator, The Alfred Hospital,
Melbourne

Kate Fisher BA, BNurs
NSW GP Enhanced Care Project Officer, AIDS
Council of New South Wales, Sydney

Helen Fraser RN, BN, MPH, HIVCert
Coordinator, HIV Clinical Trials Unit, St Vincent’s
Hospital, Sydney

Jeff Hudson RN
Clinical Research Manager, Dr Doong’s Surgery, Sydney

Sheena McLeod RN (till September)
Clinical Trials Nurse, Immunology and Infectious
Diseases, St Vincent’s Hospital, Sydney
4th Australasian Conference on Hepatitis C
Conference Committee
(Greg Dore, Convener)

5th International Workshop on Adverse Drug
Reactions and Lipodystrophy in HIV Organising
Committee
(David Cooper)

6th Bangkok Symposium on HIV Medicine
Organising Committee
(David Cooper)

8th World STI/AIDS Congress International Scientific
Committee
(John Kaldor)

14th International Conference on the Reduction of
Drug Related Harm, International Advisory Panel
(Margaret MacDonald)

15th Annual Conference of the Australasian Society for
HIV Medicine, Epidemiology Organising Committee
(Margaret MacDonald)

Acute Infection and Early Disease Research Program,
Data Base Working Group
(John Kaldor)

Acute Infection and Early Disease Research Program,
Pathogenesis Working Group
(Tony Kelleher)

Acute Infection and Early Disease Research Program,
PHAEDRA Steering Committee
(Tony Kelleher)

Acute Infection and Early Disease Research Program,
Structured Treatment Interruptions Trial Steering
Committee
(Tony Kelleher)

AIDS Council of New South Wales Board
(Garrett Prestage)

AIDS Council of New South Wales Increase in
Infections Working Group
(Garrett Prestage)

AIDS Editorial Board
(David Cooper, Andrew Grulich)

amfAR TREAT Asia Steering Committee
(David Cooper, Greg Dore)

ANCHARD HIV Committee
(Andrew Grulich)

ANCHARD Clinical Trials and Treatments Advisory
Committee
(David Cooper, Ex-officio)

ANCHARD Indigenous Australians’ Sexual Health
Committee
(John Kaldor)

Australasian Society for HIV Medicine HIV Journal
Club, Editorial Board
(Andrew Grulich)

Australasian Society for HIV Medicine
(Andrew Grulich, President)

Australasian Society for HIV Medicine, NSW
Hepatitis C Prescriber Trial Clinical Subcommittee
(Greg Dore)

Australasian Society for HIV Medicine, Standing
Committee on Hepatitis C
(Greg Dore, Chair)

Australasian Society for HIV Medicine, Treatment
Subcommittee
(Fraser Drummond, Don Smith)

Australian Federation of AIDS Organisations, HIV
Vaccine Policy Reference Group
(Andrew Grulich)

Bann Gerda Orphanage for Children Living with HIV
(Mark Boyd, Management Consultant)

Cambodian National Continuum of Care, Sub-
working Group on Health Facility-Based Care
(Julian Elliott)

Cambodian National Continuum of Care, Sub-
working Group on Home and Community-Based Care
(Julian Elliott)

Cambodian National Continuum of Care, Sub-
working Group on Voluntary Confidential
Counselling and Testing
(Julian Elliott)

Cambodian National Continuum of Care, Technical
Working Group
(Julian Elliott)

Cambodian National Protection of Maternal to Child
Transmission Committee
(Julian Elliott)

Cambodian National Steering Committee on HIV
Care Training for Clinicians
(Julian Elliott)

Cambodian National Sub-working Group on HIV
Care Guidelines
(Julian Elliott)
Cambodian National Sub-working Group on HIV Care Monitoring and Reporting
(Julian Elliott)

Cambodian National Technical Working Group on HIV Care Training for Clinicians
(Julian Elliott, Sarah Huffam)

Cambodian National Tuberculosis/HIV Working Group
(Julian Elliott)

Central Australian Disease Control Coordinating Committee, STD/HIV Subcommittee
(John Kaldor)

Cochrane Collaborative Review Group on HIV infection and AIDS, Biomedical Interventions
(John Kaldor, Reviews Editor)

Commonwealth Department of Veteran Affairs Expert Committee to Review Special Air Services Health Issues
(John Kaldor)

Communicable Diseases Intelligence Editorial Board
(John Kaldor)

Communicable Diseases Network Australia Steering Committee on Best Practice Management of Health Care Workers Infected with a Blood Borne Virus
(John Kaldor)

Communicable Diseases Network Australia
(John Kaldor)

ESPRIT Toxicity Committee
(Sarah Pett)

The Thai Red Cross Society Advisory Board on Expansion of Voluntary Counselling and Testing in Thailand
(Chris Duncombe)

Gastroenterological Society of Australia
(John Kaldor)

Greater Western Sydney Gay and Other Homosexually Active Men’s Education Team
(Daniel Madeddu)

Greater Western Sydney HIV Infections Increase Roundtable
(Daniel Madeddu)

Hepatitis C Council of NSW Medical Research Advisory Panel
(Greg Dore, John Kaldor)

HIV CONNECT Immunology Group
(Tony Kelleher, Australian Representative)

HIV Netherlands, Australia, Thailand (HIV-NAT)
(David Cooper, Co-Director)

INITIO Immunology Sub Study Steering Committee
(Tony Kelleher)

International AIDS Society
(John Kaldor, Governing Council Member)

International AIDS Society, Governing Council Governance Subcommittee
(John Kaldor)

Journal of Acquired Immune Deficiency Syndromes Editorial Board
(David Cooper)

Journal of Epidemiology and Biostatistics Editorial Board
(John Kaldor)

Journal of HIV Medicine Editorial Board
(Andrew Grulich)

National Centre for Immunisation Research and Surveillance of Vaccine Preventable Disease, Scientific Advisory Committee
(John Kaldor)

National Centre in HIV Social Research, Scientific Advisory Committee
(John Kaldor)

National Donovanosis Eradication Advisory Committee
(John Kaldor)

National Incident Hepatitis C Case Register Advisory Committee
(John Kaldor)

National Radiological Protection Board Epidemiology Study of Participants in Nuclear Weapons Tests Advisory Group
(John Kaldor)

NHMRC Project Grants Committee
(John Kaldor)

NHMRC Special Expert Committee on Transmissible Spongiform Encephalopathies
(John Kaldor)

NSW Department of Corrective Services Ethics Committee
(John Kaldor)

NSW Department of Corrective Services AIDS Strategy Post-Exposure Prophylaxis Subcommittee
(Don Smith)

NSW Health Department, Committee on AIDS
(Andrew Grulich, Chair)

NSW Health Department, HIV Health Promotion Committee
(John Kaldor)

NSW Health Department, Medically Supervised Injecting Centre Evaluation Committee
(John Kaldor)

NSW Health Department, NSW Health Ethics Committee
(Andrew Grulich)
NSW Health Department, Sexual Health Advisory Committee
(John Kaldor)

NSW Ministerial Advisory Committee on Hepatitis
(Greg Dore)

NSW Users and AIDS Association Heroin Overdose Information and Education Initiative, Expert Advisory Group
(Margaret MacDonald)

Office for Aboriginal and Torres Strait Islander Health, National Indigenous Australians’ Sexual Health Strategy Health Check Evaluation Advisory Committee
(John Kaldor)

Repatiation Medical Authority
(John Kaldor)

Royal Australian College of General Practitioners, Training Program HIV/AIDS Special Skills Management Committee
(Don Smith, Executive Member)

Sexual Health Editorial Board
(Andrew Grulich, John Kaldor)

Sexually Transmitted Infections Editorial Board
(David Cooper)

SILCAAT Toxicity Committee
(Sarah Pett)

SMART Anal Dysplasia Substudy Team
(Fraser Drummond)

SMART Body Composition Substudy Team
(Fraser Drummond)

SMART Executive Committee
(Fraser Drummond)

SMART Neurology Substudy Team
(Fraser Drummond)

SMART Protocol Team
(Fraser Drummond)

South Eastern Sydney Area Health Service, HIV/Hepatitis C Sexual Health Minimum Data Set Implementation Committee
(Paddy Mallon)

St Vincent’s Hospital Campus Institutional Biosafety Committee
(Tony Kelleher)

St Vincent’s Hospital, Human Research Ethics Committee
(Paddy Mallon)

STALWART Protocol Steering Committee
(Allison Martin)

Steering Group for the Commonwealth Chief Medical Officer Report on Communicable Disease
(John Kaldor)

The Thai Red Cross Society and Columbia University Advisory Board on the treatment of HIV infected mothers and their families, Mother-to-Child Transmission-Plus Program
(Chris Duncombe)

UNSW School of Public Health and Community Medicine, Post Graduate Research Degree Committee
(Andrew Grulich)

World Health Organisation, Consultation on antiretroviral therapy
(Mark Boyd, Chris Duncombe)

World Health Organisation, Consultation on behavioural surveillance in populations at high risk of HIV infection
(Margaret MacDonald)

World Health Organisation, Regional Task Force on HIV/AIDS Care and Treatment
(Greg Dore)
Students supervised by NCHECR staff
Supervisor(s) in brackets

**Bachelor of Medical Biotechnologies (Honours) candidate**
**Giulia Zanetti (University of Padova, Italy)**
Studies of IL-7 and IL-7 receptor systems in vitro and ex vivo
(Tony Kelleher)

**Bachelor of Science (Medicine) candidate**
**Phillip Law**
Prevalence of human immunodeficiency virus/hepatitis B and/or C virus coinfection and the impact of antiretroviral therapy on hepatitis outcomes
(David Cooper)

**Doctor of Medical Biology candidate**
**Julia Teerling (Vrije University, The Netherlands)**
The impact of medical care on people living with HIV/AIDS enrolled in clinical trials at HIV-NAT
(Chris Duncombe)

**Doctor of Medicine candidate**
**Ficke Cox (University of Amsterdam, The Netherlands)**
Monitoring of clinical trials at HIV-NAT
(Chris Duncombe)

**Patrick Unemori (University of California San Francisco, USA)**
The metabolic effects of nucleoside reverse transcriptase inhibitors on monocytes from HIV negative patients
(Paddy Mallon, Tony Kelleher)

**Pomme van Warmerdan (University of Amsterdam, The Netherlands)**
Monitoring of clinical trials at HIV-NAT
(Chris Duncombe)

**Doctor of Philosophy candidates**
**Janaki Amin**
Natural history of hepatitis C disease
(Greg Dore, Matthew Law)

**Palanee Ammaranond**
Evolution of HIV in response to therapeutic and immune mediated pressures
(David Cooper, Tony Kelleher)

**Jonathan Anderson**
Clinical aspects of anal intraepithelial neoplasia
(Andrew Grulich)

**Mark Boyd**
Clinical trials of antiretroviral therapy in Thailand
(David Cooper)

**Oliver Distler**
Molecular and cellular mechanisms for HIV protease inhibitor associated hyperlipidaemia
(David Cooper)

**Toshihiko Fukamachi (Chiba University, Japan)**
Modulation of HIV infection in vitro with RNA constructs
(Tony Kelleher)

**Jeff Jin**
Epidemiology of sexually transmissible infections in gay men in Sydney
(Andrew Grulich, John Kaldor)

**Azar Kariminia**
Mortality among full time prisoners in New South Wales
(Matthew Law)

**Paddy Mallon**
Molecular aspects of HIV-associated lipodystrophy
(David Cooper, Tony Kelleher)

**Joanne Micallef**
Natural history of newly acquired hepatitis C infection
(Greg Dore, John Kaldor)

**Ann Mijch (Monash University)**
Measuring and managing HIV virological failure
(John Kaldor)

**John Miller**
Lipodystrophy in patients with HIV disease
(John Kaldor)

**Kathy Petoumenos**
The Australian HIV Observational Database
(John Kaldor, Matthew Law)

**Rosie Thein**
Quality of life and hepatitis C
(Greg Dore, John Kaldor)

**John Zaunders**
Effects of primary HIV infection on subsets of CD4 and CD8 T lymphocytes
(David Cooper, Tony Kelleher)
Master of Applied Epidemiology (Disease Control) awarded
Monica Robotin (Australian National University, Canberra)
Communicable disease epidemiology and surveillance (Greg Dore, Andrew Grulich)

Master of Applied Epidemiology (Indigenous Health) candidate
Chris Lawrence (Australian National University)
Communicable disease epidemiology and surveillance (Andrew Grulich, John Kaldor)

Master of Arts in Clinical Drug Dependence Studies awarded
Mark Denoe (Macquarie University)
Injecting behaviour of injecting drug users at needle and syringe programs and pharmacies in South Eastern Sydney (Margaret MacDonald)

Master of Biomedical Science candidate
Sandra Klijn (Vrije University, Amsterdam, The Netherlands)
The impact of medical care on people living with HIV/AIDS enrolled in clinical trials at HIV-NAT (Chris Duncombe)

Master of Medicine (Sexually Transmitted Disease/HIV) treatise candidate
Nurlan Silitonga (The University of Sydney)
Trends in the prevalence of gonorrhea and the condom use pattern among female sex workers first attending an STD clinic in the mining town, Timika, West Papua, Indonesia 1997-2002 (John Kaldor)

Master of Public Health by research awarded
Alison King (Griffith University)
An investigation of the goals of patients and staff at Gorman House non-medical residential detoxification unit (Margaret MacDonald)

Master of Public Health by research candidate
Juliet Babirye
The role of infant feeding counselling in prevention of mother-to-child transmission of HIV in Uganda (Andrew Grulich)

Michael Burke
Factors influencing participation in prevention of mother to child transmission of HIV programs in Tanzania, East Africa (John Kaldor)

Adeeba Kamarulzaman
Natural history of HIV/AIDS in Malaysia (Greg Dore, John Kaldor)

Fatemeh Nakhaee
Modelling survival following AIDS (Matthew Law)

Suzanne Polis
Vertical transmission of hepatitis C virus to infants born to mothers who are infected with hepatitis C virus (John Kaldor)

Master of Public Health major project awarded
Leng Boonwaat
Factors associated with risk taking behaviours for hepatitis C transmission among NSW prison inmates (Margaret MacDonald)

Jennie Musto
Estimating the effect to which donor deferral protects the blood supply (John Kaldor)

Tim Ramacciotti
The role of antiretroviral treatment in primary HIV infection (John Kaldor)

Master of Public Health major project candidate
Robert Baldwin
A hepatitis C survey: Mid-north coast of New South Wales (Greg Dore)

Anna Doab
Hepatitis C treatment knowledge, attitudes and barriers among current injecting drug users (Greg Dore)

Marianne Jauncey
Retrospective cohort of newly acquired hepatitis C infection at Kirketon Road Centre (Greg Dore)

Ehsan Mowla
Critical appraisal of HIV surveillance system in Bangladesh with a focus on high risk groups: injecting drug users (IDU) and female sex workers (FSW). (Margaret MacDonald, Ann McDonald)

Mohammed Habibur Rahman
HIV and hepatitis C infection and related risk behaviour among injecting drug users at Barisal Southern Divisional City of Bangladesh (Margaret MacDonald)
Cao Wen
Improving needle and syringe program access in South East Sydney
(Margaret MacDonald)

Shellee Williams
Incidence of hepatitis C in a cohort of HIV+ patients of an inner-city practice and rate of uptake of hepatitis A and B vaccination within the same cohort
(John Kaldor)

Year 5 elective term Bachelor of Medicine candidates
Jason Chan
The incidence and predictors of nevirapine association hypersensitivity in a Thai HIV infected population
(Chris Duncombe)

Mark Dalgleish (University of Aberdeen, Scotland, UK)
Sexual behaviour of young gay men in the Health in Men Study
(Andrew Grulich)

Zewlan Moor
The incidence and predictors of nevirapine association hypersensitivity in a Thai HIV infected population
(Chris Duncombe)

Course coordination
6th Bangkok Symposium on HIV Medicine, Bangkok, Thailand
(Mark Boyd, Chris Duncombe)

Case studies in epidemiology, Master of Public Health, UNSW, Sydney
(Andrew Grulich)

Epidemiology for public health, Master of Public Health, UNSW, Sydney
(Andrew Grulich, John Kaldor)

(Greg Dore, Andrew Grulich, John Kaldor, Tony Kelleher)

International health, Year 4 Medicine, UNSW, Sydney
(Andrew Grulich)

Teaching
Advanced HIV Nursing Course, Albion Street Centre, Sydney
(Don Smith)

An epidemiological approach to the critical appraisal of clinical evidence, short courses to the pharmaceutical industry, Sydney/Melbourne
(Andrew Grulich, John Kaldor)

ASEAN Regional Conference on HIV/AIDS Care, International Medical Center of Japan, Tokyo, Japan
(Chris Duncombe)

Case studies in epidemiology, Master of Public Health, UNSW, Sydney
(Andrew Grulich, John Kaldor, Margaret MacDonald)

Clinical management of HIV infection including antiretrovirals, World Health Organization, Ho Chi Minh, Vietnam
(Chris Duncombe)

Course for Basic Physician Trainees-Part 1, The University of Sydney, Sydney
(Sarah Pett)

Epidemiology for public health, Master of Public Health, UNSW, Sydney
(Janaki Amin, Andrew Grulich, John Kaldor)

Global aspects of AIDS, Master of International Public Health, The University of Sydney, Sydney
(John Kaldor)

HIV Medicine Interactive Session (St Vincent’s Hospital), Year 6 Medicine, UNSW, Sydney
(David Cooper)

(Greg Dore, Andrew Grulich, John Kaldor, Tony Kelleher)

Immunology of HIV Infection/HIV, Master of Medicine (Sexually Transmitted Diseases/HIV), The University of Sydney, Sydney
(Tony Kelleher)

Mother-to-child HIV transmission in resource-poor settings, Master of International Public Health, The University of Sydney, Sydney
(Greg Dore)

Post Registration Nursing Course in Epidemiology and Evidence Based Practice in Infection Control, Sydney Hospital and Sydney Eye Hospital, Sydney
(John Kaldor, Margaret MacDonald)
Post Registration Nursing Course in Global and National Epidemiology of HIV/AIDS, Sydney Hospital and Sydney Eye Hospital, Sydney
(Andrew Grulich)
Post Registration Nursing Course in Hepatitis C, Sydney Hospital and Sydney Eye Hospital, Sydney
(Greg Dore)
Post Registration Nursing Course in Sexual Health and Venereology, Sydney Hospital and Sydney Eye Hospital, Sydney
(Janaki Amin, Greg Dore)
Professional Development Program for Teachers of Higher School Certificate Biology, UNSW, Sydney
(Greg Dore)
Public Health Aspects of HIV/AIDS, Master of Medicine (Sexually Transmitted Diseases/HIV), The University of Sydney, Sydney
(Andrew Grulich)
Public Health Aspects of HIV/AIDS, Master of Public Health, The University of Sydney, Sydney
(Greg Dore)
Research skills for public health, Master of Public Health, UNSW, Sydney
(Janaki Amin, Pat Grey, Ann McDonald, Allison Martin)
Sexual Health 1, Master of Medicine (Sexually Transmitted Diseases/HIV), The University of Sydney, Sydney
(Greg Dore)
Sexual Health Counselling Course, Sydney Hospital, Sydney
(Andrew Grulich)
Sexual Health Training Day, Westmead Hospital, Sydney
(Paddy Mallon)
Short Course in HIV for Treatment Officers and Community Workers, Australasian Society for HIV Medicine, Sydney
(Gail Matthews)
Short course in HIV/hepatitis C virus infection for prescribers, Australasian Society for HIV Medicine, Sydney/Perth
(Greg Dore)
Short Course in HIV Medicine, Australasian Society for HIV Medicine, Sydney
(Tony Kelleher, Don Smith)
Short Course in HIV Medicine and Day Program in Hepatitis C, Australasian Society for HIV Medicine, Sydney
(Paddy Mallon)

Short course in HIV Medicine for medical practitioners working with Aboriginal and Torres Strait Islander clients, Australasian Society for HIV Medicine, Sydney
(John Kaldor)
Undergraduate teaching, School of Sociology, UNSW, Sydney
(Garrett Prestage)
UNICEF Regional Meeting on Prevention of Mother-to-Child Transmission, Bangkok, Thailand
(Chris Duncombe)
Update on hepatitis C, Coppleson Committee for Continuing Medical Education, The University of Sydney, Sydney
(Greg Dore)
Visualising the Science of Genomics: online advisor to an international science research project, UNSW, Sydney
(John Kaldor)

Tutoring

Epidemiology for public health, Master of Public Health, UNSW, Sydney
(Janaki Amin, Kathy Petoumenos)
Statistics for public health, Master of Public Health, UNSW, Sydney
(Kathy Petoumenos)
Clinical Medicine (St Vincent’s Hospital), Year 2 Medicine, UNSW, Sydney
(Paddy Mallon)
Clinical Medicine (St Vincent’s Hospital), Year 4 Medicine, UNSW, Sydney
(Tony Kelleher)
Clinical Medicine (St Vincent’s Hospital), Year 3 Medicine, UNSW, Sydney
(Greg Dore)
Funding for 2003

All amounts listed are in Australian dollars.
Names of organisations are as specified at the time the funding agreement commenced.

Australian Government Department of Health and Ageing core grants

The Australian Government Department of Health and Ageing provided an allocation in 2003 to fund the activities and administration of NCHECR. It also provided funding for the Clinical Trials and Research Committee (CTARC). For administrative purposes, these funds are allocated into the following categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core allocation</td>
<td>3,160,842</td>
</tr>
<tr>
<td>Clinical Trials and Research Advisory Committee</td>
<td>175,553</td>
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</table>

Other Australian Government Department of Health and Ageing grants

<table>
<thead>
<tr>
<th>Grant Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development of Hepatitis C Strategy</td>
<td>3,000</td>
</tr>
<tr>
<td>Hepatitis C surveillance and research activities</td>
<td>247,429</td>
</tr>
<tr>
<td>The health and treatment study</td>
<td>14,923</td>
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</table>

Other grants and contracts from public sources

<table>
<thead>
<tr>
<th>Grant Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Foundation for AIDS Research: TREAT Asia HIV Observational Database</td>
<td>274,434</td>
</tr>
<tr>
<td>Australian Research Council: Testing Methodological alternatives in a minority population</td>
<td>81,892</td>
</tr>
<tr>
<td>European Medicines Evaluation Agency: Data Collection on Adverse Events of Anti-HIV Drugs Study</td>
<td>1,535</td>
</tr>
<tr>
<td>Family Health International: Tenofovir Phase 2 clinical trial</td>
<td>77,483</td>
</tr>
<tr>
<td>Japan Health Science Foundation: Clinical trial for developing immune therapy</td>
<td>85,361</td>
</tr>
<tr>
<td>Massachusetts General Hospital (US National Institutes of Health subcontract): AIEDRP/PHAEDRA Studies</td>
<td>796,318</td>
</tr>
<tr>
<td>NHMRC Causes of mortality following imprisonment in NSW</td>
<td>68,500</td>
</tr>
<tr>
<td>Neural transplantation of human bone marrow stromal cells</td>
<td>83,250</td>
</tr>
<tr>
<td>Public Health (Australia) Fellowship for Dr Claire Vajdic</td>
<td>36,569</td>
</tr>
<tr>
<td>*The kynurenine pathway chemokines</td>
<td>80,660</td>
</tr>
<tr>
<td>NSW Health Department Evaluation of NSW Health Chlamydia Education</td>
<td>31,818</td>
</tr>
<tr>
<td>Expert services in HIV/AIDS, viral hepatitis and sexually transmissible diseases</td>
<td>100,000</td>
</tr>
<tr>
<td>Health in Men Study</td>
<td>129,791</td>
</tr>
<tr>
<td>Hepatitis C testing in the Health in Men cohort</td>
<td>31,400</td>
</tr>
<tr>
<td>Research and development infrastructure grant program</td>
<td>232,423</td>
</tr>
<tr>
<td>Social and Scientific Systems: SMART Study</td>
<td>333,717</td>
</tr>
<tr>
<td>South Eastern Area Health Service: Research collaboration with Kirketon Road Centre</td>
<td>20,000</td>
</tr>
<tr>
<td>The Cancer Council of NSW: Cancer in dialysis patients and kidney transplant recipients</td>
<td>36,200</td>
</tr>
<tr>
<td>UK Medical Research Council: INITIO Study</td>
<td>583,926</td>
</tr>
<tr>
<td>*University of California: CSF consortium for the study of HIV brain disease</td>
<td>41,108</td>
</tr>
</tbody>
</table>

(continued next page)
### Other grants and contracts from public sources (continued)

<table>
<thead>
<tr>
<th>Organization</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Minnesota</td>
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</tr>
<tr>
<td>ESPRIT Study</td>
<td>968,813</td>
</tr>
<tr>
<td>SILCAAT Study</td>
<td>497,000</td>
</tr>
<tr>
<td>US National Institutes of Health</td>
<td></td>
</tr>
<tr>
<td>HIV Vaccine Design and Development Team contract</td>
<td>3,333,539</td>
</tr>
<tr>
<td>Longitudinal cohort of newly acquired hepatitis C infection</td>
<td>322,068</td>
</tr>
<tr>
<td>Protease Inhibitor Related Artherosclerosis in HIV</td>
<td>302,338</td>
</tr>
</tbody>
</table>

### Pharmaceutical industry funding

<table>
<thead>
<tr>
<th>Company</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abbott Australia Pty Ltd</td>
<td>10,000</td>
</tr>
<tr>
<td>Boehringer-Ingelheim Pty Ltd</td>
<td>99,175</td>
</tr>
<tr>
<td>Bristol-Myers Squibb Pharmaceuticals (Australia)</td>
<td>763,314</td>
</tr>
<tr>
<td>Chiron Corporation</td>
<td>154,065</td>
</tr>
<tr>
<td>CSL Research and Development</td>
<td>18,000</td>
</tr>
<tr>
<td>Cytran Inc</td>
<td>5,944</td>
</tr>
<tr>
<td>DuPont Pharmaceutical Company</td>
<td>18,719</td>
</tr>
<tr>
<td>Gilead Sciences Inc</td>
<td>43,066</td>
</tr>
<tr>
<td>Johnson &amp; Johnson Research Pty Ltd</td>
<td>1,818</td>
</tr>
<tr>
<td>Roche Pharmaceutical (Switzerland)</td>
<td>945,882</td>
</tr>
<tr>
<td>Roche Products Pty Ltd (Australia)</td>
<td>449,243</td>
</tr>
<tr>
<td>Schering-Plough Research Institute</td>
<td>2,209</td>
</tr>
<tr>
<td>Virax Immunotherapeutic Pty Ltd</td>
<td>198,250</td>
</tr>
</tbody>
</table>

* Grants administered by NCHECR with Professor Bruce Brew as Principal Investigator

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*Annie Tung, Bronwen Turner*
Disclosure of financial and other relationships with industry

As noted under Funding for 2003 (see page 59), NCHECR receives financial support for a number of its projects from pharmaceutical companies. In relation to the companies indicated, staff members listed below either served on advisory boards; received individual travel grants, consultancy payments or honoraria; or were the first degree relative of an employee during 2003.

No staff member owned shares, was a personal recipient of a tied or untied grant or had ownership in intellectual property related to any company that funded NCHECR’s research program during 2003.

Abbreviated forms of the company names have been used for ease of recognition.

Mark Boyd
Roche

David Cooper
Abbott
Boehringer-Ingelheim
Bristol-Myers Squibb
Roche
Gilead
GlaxoSmithKline
Johnson & Johnson
Merck Sharpe and Dohme
Pfizer
Schering-Plough

Greg Dore
Gilead
Roche

Chris Duncombe
Roche
Tibotec

Sean Emery
Merck Sharp and Dohme
Roche

Tony Kelleher
Johnson & Johnson

Matthew Law
GlaxoSmithKline
Johnson & Johnson

Paddy Mallon
Abbott
Bristol-Myers Squibb
Merck Sharpe and Dohme

Don Smith
Abbott
Boehringer Ingelheim
Bristol-Myers Squibb
Gilead
GlaxoSmithKline
Merck Sharp and Dohme
Novartis
Roche
Presentations at conferences and meetings

Conference presentations


Cooper DA. Bosentan treatment in patients with pulmonary arterial hypertension associated with HIV infection. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.

Cooper DA. Enfuvirtide TORO studies: 48 week results confirm 24 week findings. The 2nd IAS Conference on HIV Pathogenesis and Treatment. Paris, France.

Cooper DA. HIV treatment update. NSW Chapter of the Australasian College of Sexual Health Physicians Annual Scientific Meeting 2003. Sydney.

Cooper DA. Immune control of primary HIV infection. International Symposium on Immune Reconstitution and Control of HIV. Stresa, Italy.


Cooper DA. Lipodystrophy, where are we now? 9th Annual Conference of the British HIV Association. Manchester, UK.

Cooper DA. New drugs and new strategies. 9th Annual Conference of the British HIV Association. Manchester, UK.

Cooper DA. Treatment interruption. 43rd Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC). Chicago, USA.

Cooper DA. Delivering antiretrovirals to the world – the way forward: 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Dore GJ. Improving access to hepatitis C antiviral therapy for people who currently inject drugs. 3rd Community Conference on Hepatitis C. Melbourne.

Dore GJ. Reducing the burden of hepatitis C liver disease in the community. 3rd Community Conference on Hepatitis C. Melbourne.

Dore GJ. Hepatitis C epidemiology and treatment. 2nd Australasian Haemophilia Conference. Gold Coast, Qld.

Dore GJ. HIV/hepatitis C coinfection. 2nd Australasian Haemophilia Conference. Gold Coast, Qld.

Dore GJ. Infections in chronic liver disease. Australian Gastroenterology Week. Cairns, Qld.


Dore GJ. Reducing the burden of hepatitis C liver disease in the community. 2003 Indian Ocean Conference on Viral Hepatitis. Perth.

Dore GJ. The public health implications of the hepatitis C epidemic in Australia. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.
Dore GJ. Viral Hepatitis: Infectious disease or liver disease. Australian Gastroenterology Week. Cairns, Qld.


Duncombe C. A prospective randomized trial of structured treatment interruption (STI) in patients with chronic HIV infection. HIV-NAT 001.4. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Duncombe C. Indinavir/ritonavir 800/100mg BID and efavirenz 600mg QD provides durable salvage for patients with combination nucleoside analogue failure. HIV-NAT 009 72 week follow up. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Kaldor JM. HIV research and affected countries. 9th NAPWA Biennial Conference. Cairns, Qld.


Kaldor JM. Tracking the HIV epidemic. How much can we know? How much do we need to know? Medical Society of Papua New Guinea 39th Annual Medical Symposium. Mount Hagen, Papua New Guinea.


Lawrence CG, Prestage GP, Grulich AE, Guthrie J, Van De Ven P, Kippax S. Gay Community Periodic Surveys: Comparisons amongst Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander homosexual men. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.

MacDonald MA, Cunningham PH, Kelleher AD, Kaldor JM. Monitoring HIV transmission using a detuned HIV antibody testing strategy. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


McDonald AM, Cunningham PH, Kelleher AD, Kaldor JM. Monitoring HIV transmission using a detuned HIV antibody testing strategy. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Micallef JM, Kaldor JM, Dore GJ. Estimation of progression to chronic hepatitis C: A systematic review of longitudinal studies. *15th Annual Conference of the Australasian Society for HIV Medicine*. Cairns, Qld.


Prestage GP. Update on Health in Men Cohort. *9th Scientific Meeting of the New South Wales Chapter of the Australasian College of Sexual Health Physicians*. Sydney.


Wand H. Buffalo Hump seen in HIV-associated lipodystrophy is associated with high serum insulin concentrations but not dislipidemia. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Zhou J, Dore GJ, Wodak a, Kaldor JM, MacDonald MA and the Collaboration of Australian Needle and Syringe Programs. HIV, hepatitis C and related risk behaviours among injecting drug users reporting recent imprisonment. 2nd Public Health Association of Australia Incarceration Conference. Brisbane.

Zhou J, Dore GJ, Wodak AD, Kaldor JM, MacDonald MA and the Collaboration of Australian Needle and Syringe Programs. HIV and hepatitis C incidence among injecting drug users with repeat participation in needle and syringe program surveys. 11th International Symposium on Viral Hepatitis and Liver Disease. Sydney.

Other presentations

Cooper DA. Rational use of protease inhibitors. HIV/Immunology/Infectious Diseases Unit Journal Club. Sydney.


Dore GJ. Epidemiology of HIV, hepatitis B and hepatitis C. St Vincent’s Hospital Introductory Program on HIV and Viral Hepatitis. Sydney.


Dore GJ. Estimation of chronic hepatitis B infection in Australia. NSW Ministerial Advisory Committee on Hepatitis. Sydney.


Dore GJ. Hepatitis C epidemiology and the challenges of reducing liver disease burden. South Australia/Northern Territory Hepatitis C Symposium. Adelaide.


Dore GJ. HIV, hepatitis B and C coinfection. NSW Chapter of the Australasian College of Sexual Health Physicians, Annual Scientific Meeting. Sydney.
Dore GJ. Mother-to-child HIV and hepatitis C transmission. St George Hospital Obstetrics Unit. Sydney.

Dore GJ. Treatment and care for people with hepatitis C. Tasmanian Southern Division of General Practice Forum. Hobart.

Dore GJ. Update on hepatitis C treatments. South Eastern Sydney Area Inter-agencies Hepatitis C Meeting. Sydney.


Dore GJ. Treatment for current injecting drug users: The Australian experience. NIH/NIDA/NIDDK/NIAID Workshop on Hepatitis C Infection and Substance Abuse: Medical management and developing models of integrated care. Washington, USA.

Drummond FM. Update on HIV Treatments. Fun and Esteem Facilitator’s Training. AIDS Council of New South Wales, Sydney.

Grulich AE. Feedback on NHMRC grant review panel process. Centre for General Practice Integration Studies, UNSW. Sydney.


Grulich AE. HIV and sexually transmitted infection risk behaviour. Australian Research Centre for Sex, Health and Society, Latrobe University. Melbourne


Grulich AE. Overview of sexually transmitted infections, HIV and their epidemiological synergy. Livingstone Road Clinic Retreat, Royal Prince Alfred Hospital. Sydney.


Kaldor JM. Cambodia Tenofovir Prevention Study. Tenofovir Trial Stakeholder Information Meeting. Phnom Penh, Cambodia.

Kaldor JM. NHMRC Project Grants. University of Wollongong. NHMRC Grant Information Seminar. Wollongong, NSW.


Kaldor JM. Surveillance approaches with particular reference to developing countries. Presentation to delegation from Xinjiang, China. Sydney.


Kelleher AD. HVDDT-N01-05395 – A randomised, placebo controlled, double-blind, phase I/IIa clinical trial to evaluate the safety and immunogenicity of a candidate prophylactic DNA prime rFPV boost HIV vaccination strategy. Clinical Meeting for Eastern Suburb GPs Continuing Education on Immunotherapy in HIV-I: IL2 and HIV Vaccines. Sydney.

Law MG. Ten things we should be doing in randomized clinical trials, and ten things we are doing but probably shouldn’t be. NHMRC Clinical Trials Centre Statistics Seminar. Sydney.


MacDonald MA. Collaborative research on injecting drug use. Kirketon Road Centre. Sydney.

Madeddu D. Discussion of the issues surrounding a sampling gay and other homosexually active men. Greater Western Sydney gay and other homosexually active Men’s Education Team. Sydney.

Mallon PWG, Wand H, Law MG, Miller J, Cooper DA, Carr A. Strong association between Buffalo Hump and high serum insulin concentrations in HIV-infected individuals. 5th International Workshop on Adverse Drug Reactions and Lipodystrophy in HIV. Paris, France.

Mallon PWG. HIV-associated lipodystrophy molecular research. Diabetes and Metabolism Group, Garvan Institute of Medical Research. Sydney.


Matthews GV. Update in HIV/hepatitis B coinfection. HIV/Immunology/Infectious Diseases Club, St Vincent’s Hospital. Sydney.


McDonald AM. Sentinel HIV surveillance and special populations. NSW Health HIV Surveillance Forum. Sydney.


Prestage GP. HIV social research as a community development tool. Osaka MASH Community Forum. Osaka, Japan

Prestage GP. HIV social research as a community development tool. Kyoto Gay Community Forum. Tokyo, Japan.


Prestage GP. Social research findings and the increase in HIV infections. AIDS Council of NSW Board Seminar. Sydney.

Prestage GP. Social research findings and the increase in HIV infections. AIDS Council of NSW Hunter Area Forum. Newcastle, NSW.

Prestage GP. Social research findings and the increase in HIV infections. AIDS Council of NSW Illawarra Area Forum. Wollongong, NSW.

Prestage GP. Social research findings and the increase in HIV infections. AIDS Council of NSW Northern Rivers Area Forum. Lismore, NSW.

Prestage GP. Social research findings and the increase in HIV infections. Queensland AIDS Council Cairns Community Forum. Cairns, Qld.

Prestage GP. Social research findings and the increase in HIV infections. AIDS Council of NSW Young Gay Men’s Workshop. Sydney.


Poster presentations


Edmonds JH, Kelleher AD, Piller SC. Effects of the fusion inhibitor FuzeonTM (T-20) on the replication of a novel HIV-1 isolate containing a large truncation in the GP41 cytoplasmic tail. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.
Micalef JM, Kaldor JM, Dore GJ. Estimation of progression to chronic hepatitis C: A meta-analysis of longitudinal studies. 11th International Symposium on Viral Hepatitis and Liver Disease. Sydney.


Petoumenos K on behalf of the Australian HIV Observational Database. Mortality in the Australian HIV Observational Database. 7th International Workshop on HIV Observational Databases. Fiuggi, Italy.

Petoumenos K on behalf of the Australian HIV Observational Database. Characteristics of patients on their third or more combination antiretroviral therapy in the Australian HIV Observational Database (AHOD). 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Phipps S, Drummond FM, Mullin C on behalf of the SMART Body Composition Substudy Team and Investigators for the Terry Beirn Community Programs for Clinical Research on AIDS. Australian overview of radiology in the body composition substudy over the first twelve months of the SMART Study. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Suzuki K, Suter S, Ward R, Cooper DA, Kelleher AD. Silencing gene expression by short interfering RNA targeting NF-kB binding site within 5' LTR. *10th Conference on Retroviruses and Opportunistic Infections*. Boston, USA.


Unemori P, Mallon PWG, Kelleher AD, Cooper DA, Carr A. A reliable and reproducible real-time quantitative polymerase chain reaction assay to measure SREBP-1 mRNA. *15th Annual Conference of the Australasian Society for HIV Medicine*. Cairns, Qld.


Zaunders JJ, Munier MLC, Cunningham PH, Smith DE, Grey P, Quan D, McFarlane R, Kelleher AD, Cooper DA. T-cell subsets perturbations during the first interruption phase of subjects treated during primary HIV infection: Activation and CCR5 expression correlate with viral loads. *10th Conference on Retroviruses and Opportunistic Infections*. Boston, USA.


Hoy JF, Gahan ME, Carr A, Lewin SR, Smith DE, Cooper DA, Wesselingh SL. Changes in mitochondrial DNA in PBMCs from patients with lipodystrophy randomized to switch to abacavir or continue thymidine analogue-containing ARV regimens. 10th Conference on Retroviruses and Opportunistic Infections. Boston, USA.


Martin A, Carr A, Clements MS, Law MG, Mallal SA, Chuah JC, Hoy JF, Cooper DA, Smith DE. Progression of lipodystrophy with long-term thymidine analogue usage despite stopping protease inhibitors. 10th Conference on Retroviruses and Opportunistic Infections. Boston, USA.


McGhie KM, Satchell CS, Munier MLC, Piperias M, Cunningham GB, Kelleher AD. Optimisation of peripheral blood mononuclear cell (PBMC) cryopreservation techniques for HIV clinical trials: "Mr Frosty" versus Programmable Controlled Rate Freezing Unit, St Vincent's Hospital. 15th Annual Conference of the Australasian Society for HIV Medicine. Cairns, Qld.


Publications

Peer reviewed


Fisher D, Huffam S. Chronic hepatitis B virus infection in remote living Aboriginal and Torres Strait Islanders; Guidelines for primary health care providers. Med J Aust 2003;178:82-85.


Jones ML, Young JM, Huang QR, Puls RL, Webber CA, Benson EM. Interleukin 12-augmented T cell proliferation of peripheral blood mononuclear cells from HIV-seropositive individuals is associated with interleukin 12 receptor ß2 upregulation. *AIDS Res Hum Retroviruses* 2003;19:283-292.


* invited publication

**Non-peer reviewed**


Coralie Kronenberg


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