

ANZMTG 2009 Annual General Meeting
Friday 30 October 2009
5.30-6.30pm

Conference Room, Melanoma Institute Australia (MIA)
North Sydney NSW, Australia

Annual General Meeting Minutes

1. Welcome

The Chair of the ANZMTG, Professor John Thompson welcomed the 12 members present at the AGM: Sandie Grierson, Julie Winstanley, Julie Howle, William McCarthy, Marianne Byrne, Eshwini Tadiyal, Libby Paton, Michael Henderson, Benjamin Brady, Rachael Morton and Nicola Groves.

All members were provided with the Agenda and the following documents:

- A. ANZMTG 2008 Annual General Meeting Minutes
- B. ANZMTG 2009 Clinical Trials Update
- C. ANZMTG Strategic Plan Summary 2009-2010
- D. ANZMTG 2008-2009 Audit Report
- E. ANZMTG 2009 Membership Report

2. Apologies

The Chair noted that the apologies had been received from 39 members: John Kelly, Campbell Rose, Bryan Burmeister, Andrew Haydon, Richard Scolyer, Colin Bull, Graham Sivya, Michael Brown, Richard Kefford, Gerald Fogarty, Nicholas Hayward, Ian Davies, Helen Cox, Jacqui McBurnie, Robinia Schiphuis, Kari Jacobsen, Carol Johnson, Nikolas Haass, Grant McArthur, Warren Hargreaves, Valerie Jakrot, Sharon Clark, Ehtesham Abdi, Mark Zonta, Philip Crowe, Richard Martin, Peter Hersey, Lisa McFadyen, Nicholas Crampton, Lorraine Neave, Margaret Lett, Jo Dalton, Andrew Hui, Madeleine King, Julie Teraci, David Speakman, Sally Blandford, Florence Ko, Warren Meanwell and Michael Hughes.

3. Minutes of 2008 Annual General Meeting, 19 November 2008

The Minutes of the previous Meeting held on 19 November 2008 was adopted as a true record.

4. Chairman's report and annual report

4.1 The last 12 months

4.1.1 Achievements

Professor Thompson gave an overview on the achievement of the ANZMTG including:

A. Membership update

Professor Thompson stated that the ANZMTG membership has increased substantially this year and stressed that ANZMTG would benefit more from membership of researchers from distinguished melanoma groups.

Action

ANZMTG to build strategy to enhance membership/collaboration of researchers from leading melanoma research institutes.

B. Biostatistical and Clinical Trial support

Professor Thompson mentioned that this year, ANZMTG has received considerable support from the Biostatistical team at Melanoma Institute Australia (MIA), headed by Associate Professor Julie Winstanley and also at the Peter MacCallum Cancer Institute. The Clinical Trials Unit at MIA was also congratulated for their continued support. Professor Thompson encouraged in-house partnership with these organisations.

Action

ANZMTG to continue building a relationship with these organisations and utilising their services as required.

C. Clinical trials update

i. *ANZMTG 1-02 - A randomised clinical trial of surgery versus surgery plus adjuvant radiotherapy for regional control in patients with completely resected macroscopic nodal metastatic melanoma*

Professor Thompson stated that the interim report for this study has been presented at the American Society of Clinical Oncology 2009 Annual Meeting and that final analysis is pending.

Associate Professor Michael Henderson, one of the Trial Chairpersons for this study mentioned that Richard Fisher, Senior Biostatistician from Peter MacCallum Cancer Centre has provided him with a statistical report for use in publication but that this had required changes, and will be forwarded to Professor Thompson following revision.

Associate Professor Henderson reaffirmed that the final analysis on morbidity and survival data is due late 2010.

Action

Associate Professor Henderson to provide draft statistical report to ANZMTG Chair for review.

ii. *ANZMTG 01.07 - Whole Brain Radiotherapy (WBRT) following local treatment of intracranial metastases of melanoma – a randomised phase III trial*

Professor Thompson provided trial update and commented on a similar study undertaken at the MD Anderson Cancer Centre in the USA by Eric Chang and colleagues. Professor Thompson stated that the results of this study could potentially impact the WBRT trial and that the publication needs to be evaluated further before reaching any conclusion. Associate Professor Henderson mentioned that the Ethics and/or Data Safety Monitoring Committee should be provided with the publication to provide their expert opinion on the continuation of the WBRT study. Libby Paton, ANZMTG Senior Project Officer, confirmed that the paper will be discussed by the Trial Management Committee (TMC) soon. It was mutually agreed that Dr Gerald Fogarty, Chief Investigator for WBRT study should lead activities and provide adequate feedback to the lead and site ethics committees engaged in the WBRT protocol.

Action

Dr Fogarty to lead activities to evaluate the results of the publication appropriately.

4.1.2 Challenges

Professor Thompson reported that the major challenge for ANZMTG at present is future funding, declaring the cessation of contractual funding support from Cancer Australia in June 2010 [refer to 4.3.1].

4.2 Plans and priorities for 2010

Future trials

A. Professor Thompson stated that melanoma research in Medical Oncology is looking promising with two major trials exhibiting excellent results:

- i. *GSK Protocol BRF 112680 - Phase I study of BRAF inhibitor, GSK 2118436 in chemo-refractory, BRAF V600E-positive metastatic melanoma (protocol extends to all solid tumours)*

ii. *Roche-Plexxicon NP22657 - Phase II study of BRAF inhibitor PLX4032 in chemo-refractory, BRAF V600E-positive metastatic melanoma*

Dr Brady suggested the possibility of collaborative clinical trial opportunities. Both, Professor Thompson and Dr Brady agreed if the proposed studies were of good clinical merit, these would be suitable collaboration opportunities for ANZMTG. Nicola Groves, ANZMTG Acting Executive Officer discussed the protocol synopsis review process and confirmed that in order to proceed with this, the intended researcher(s) for protocol would need to submit a synopsis to the ANZMTG Executive Committee.

Action

None

(Any prospective researcher is required to submit a protocol synopsis for review by the ANZMTG Executive Committee).

- B. Professor Thompson stated that in view of the success in the field Medical Oncology, a new proposed study, *Surgery plus Bacillus Calmette-Guérin (BCG) versus Best Medical Therapy* could potentially benefit from this in terms of the newly available best medical therapy in the treatment of melanoma. This study will be headed by Dr Don Morton at the John Wayne Cancer Institute in the USA.

Action

ANZMTG Executive Committee to review protocol.

- C. Professor Thompson also highlighted the proposal by Dr Brendon Coventry, *A Randomised controlled trial of 1cm vs 2 cm excision margins for 1-4 mm thickness primary invasive cutaneous melanoma* and agreed that this was a reasonable study to undertake considering that presently no research data exists on the 1cm vs 2cm excision margins. It was noted however, that this may be an expensive undertaking and would require a large number of patients. Professor Thompson mentioned that the UK is very keen on this protocol and that Dr Marc Moncrieff has already applied for funding for this study.

Action

ANZMTG Executive Committee to review protocol.

4.3 Organisational requirements

4.3.1 Funding for 2010 and ongoing

Professor Thompson confirmed that funding support from Cancer Australia will end in June 2010. For ANZMTG to continue operating, grant money would need to be sought for 2010 and beyond.

Rachael Morton enquired if ANZMTG as one of the 13 Co-operative Trial Group will have to individually apply for funding support and whether the Clinical Oncological Society of Australia (COSA) has access for the NHMRC Enabling Grant. Nicola Groves confirmed that ANZMTG will need to apply for funding from Cancer Australia pending Commonwealth approval for the opening of the grant. Furthermore, Nicola Groves reported that at present ANZMTG is unaware of any funding application to NHMRC by COSA.

Professor Thompson enquired if ANZMTG was eligible to apply for the NHMRC Project grants. Nicola Groves stated that ANZMTG seeks Cancer Australia grant because it is majorly infrastructure support. Dr Brady Benjamin Brady questioned the likelihood of obtaining financial support from Industries. Professor Thompson stated that whilst seeking Industry support is not proscribed, at present ANZMTG has no Industry support aside from the Provectus Fellowship grant received in 2008.

Action

ANZMTG to apply for Cancer Australia funding should funding rounds open in November 2009.
ANZMTG to possibly consider applying for other grant including Industry support.

4.3.2 Membership support and initiatives

Associate Professor Winstanley congratulated ANZMTG for its support towards the MEL-QOL Research Study. This study had received seed funding from the University of Sydney and additional support (\$60 000) had been provided by ANZMTG. Professor Winstanley stated that with this level of support, the study is in very stable position, anticipating possible NHMRC or European funding in the future. Professor Winstanley reiterated that MEL-QOL is an exceptional example of how ANZMTG supports melanoma researchers.

5. Annual financial report

Nicola Groves provided an update on the annual financial report and whilst the grant ends 30 June 2010, the remaining funds are committed.

6. Any other business

Professor William McCarthy enquired if *PV-10 Phase 1 Safety and Tolerability of PV-10 Chemoablation of Subcutaneous Melanoma of the Limb in Patients who are Candidates for Isolated Limb Infusion* was an ANZMTG trial. Professor Thompson confirmed ANZMTG has no affiliation with this study.

7. Closure of meeting

The Meeting closed at 6.30pm.