

# Melanoma and Skin Cancer Trials

Limited

ANNUAL REPORT 2023-24



CONQUERING MELANOMA AND SKIN CANCER



## Melanoma and Skin Cancer Trials

*Formerly Australia and New Zealand  
Melanoma Trials Group*

ABN: 70 626 908 512

553 St Kilda Road  
Melbourne VIC 3004  
Australia  
Ph: +61 3 9903 9022  
E: [hello@masc.org.au](mailto:hello@masc.org.au)  
W: [masc.org.au](http://masc.org.au)

## Stay in touch

Subscribe to our eNews: [masc.org.au/e-news](http://masc.org.au/e-news)

## Join the conversation



@Melanoma and Skin Cancer Trials



@Melanoma and Skin Cancer Trials - MASC Trials



@masc\_trials



@MASC\_Trials



@AOMA\_MASC



@AMIGOs\_MASC



@MASCTrials

## Contents

About us	1
Vision, Mission, Values	2
National Impact	3
Our history	4
2023-2024 snapshot	5
2023-24 trial summary	6
Year at a glance	7
Chair and CEO message	8
Patient story	10
Board of Directors	12
Our team	13
Consumer engagement	14
Consumer advisory panel	15
Patient story	16
Melanoma trials	18
Skin cancer trials	21
Merkel cell carcinoma trials	22
Uveal melanoma clinical research	24
Network of experts	25
Discipline-Specific Advisories	26
Current research	27
Publications, conference presentations, podcasts and events	28
Financial statement	31
Acknowledgements	32
Get involved	33
Our donors	34
Donate	35



Melanoma and Skin Cancer Trials acknowledges and pays respect to the Traditional Custodians of the lands across Australia on which our members live and work, and to their Elders, past, present, and future. We pay respect to the Wurundjeri Peoples as the Traditional Custodians of the land on which our office stands. Melanoma and Skin Cancer Trials acknowledges Māori as tangata whenua and Treaty of Waitangi partners in Aotearoa New Zealand.

## About us

**Australia has the highest incidence of melanoma in the world.**

**Two in every three Australians will be diagnosed with skin cancer by the age of 70.**

### Conquering melanoma and skin cancer

Since 1999, Melanoma and Skin Cancer Trials has been committed to working with world-leading researchers to deliver clinical trials that improve melanoma and skin cancer outcomes. We are the only independent, not-for-profit, multi-site, collaborative clinical trials group focused on melanoma and skin cancer in Australia and New Zealand.

Our clinical trials portfolio incorporates projects addressing the prevention, early detection, and treatment of melanoma and skin cancer, including early to late phase clinical trials. Importantly, we also investigate rare forms of skin cancer such as Merkel cell carcinoma and melanoma of the eye.

### International network boosts research

Our 3,019 members throughout Australia and around the world represent the many disciplines critical to our work and strengthen the success of our clinical trials. Together, we work to reduce the burden of melanoma and skin cancer.

From early engagement with consumers and researchers to developing research concepts, through to the publication of results, we work cooperatively to provide a range of clinical trial services. We put patients with lived experience of melanoma and skin cancer at the centre of our research, our collaborative approach ensures their unique perspectives are considered in clinical trial prioritisation, development, and implementation.

Our endorsement of clinical trial and research concepts provides them with a badge of quality, increases their chance of being funded, and has been a key factor in our success.

### Supported by leading institutions and generous donors

Melanoma and Skin Cancer Trials continues to be supported by the Australian Government via Cancer Australia, Monash University, and the generosity of our industry partners and donors.

Our academic affiliation with Monash University and its Melanoma and Skin Cancer Research Centre within the School of Public Health and Preventive Medicine, enhances our research activities. As one of Australia's top universities, Monash University provides access to state-of-the-art facilities, leading academics, and excellent support services.

### Our services

We support our members across all stages of clinical trials, including:

- Providing a research concept development pathway
- Access to expert development support for new trial concepts
- Mentoring and peer review opportunities for researchers via Discipline-Specific Advisories
- Quality educational and networking events
- Support for grant preparation and submission
- Biostatistics, health economics and quality of life modelling
- Facilitating active partnerships with consumer advocates and patients
- Trial budget development and management
- Trial design, protocol development and ethics submission
- Feasibility, site selection and trial implementation
- Access to national and international multicentre trial networks
- Trial and research project management
- Data and safety monitoring and protocol compliance
- Database build and data management
- Site monitoring
- Close-out and archive

**Our research is independent, clinician-led and a testament to our members and their commitment to impactful melanoma and skin cancer clinical trials.**

# Vision, mission & values

## Vision

**Eliminate melanoma and skin cancer**

## Mission

**We work collaboratively with world-leading researchers to deliver clinical trials that improve melanoma and skin cancer outcomes**

## Values

**Collaboration  
Compassion  
Innovation  
Impact**

***Conquering melanoma and skin cancer  
through clinical trials***

## National impact

This year, Melanoma and Skin Cancer Trials coordinated actively recruiting trials at 39 clinical trial sites throughout Australia; 79% in metropolitan cities and towns, and 21% in regional centres.

We aim to incorporate a teletrial component in our clinical trials and strive to open trial sites in regional centres to make sure that Australians are able to access the latest cancer treatments when they need it.

**“We believe all Australians should be able to access clinical trials, which is why we continue to work with our networks to open more teletrial sites for patients in rural and regional communities.”**

Katja Loewe, Research Manager





## Our history



## 2023/24 snapshot



**998**

**Participants Recruited  
in Trials**



**6**

**Recruiting Trials**



**1**

**Trial in Start-Up**



**3**

**Active Trials Closed  
for Recruitment**



**39**

**Australian Trial Sites  
Actively Recruiting**



**168**

**International Trials Sites  
Actively Recruiting**



**12**

**Participating Countries**



**623**

**New Members**



**3019**

**Total Members**



**34**

**Countries with  
Members**



**11**

**Melanoma and Skin  
Cancer Trials Staff**



**1000+**

**Investigators Worldwide**



**14**

**Publications and  
Conference Presentations**



**3**

**Scientific Events**

# 2023-24 trial summary

## Trials in start-up

### Melanoma

#### BETTER

Estimated first participant recruited:  
Q1, 2025

## Recruiting trials

### Melanoma

#### MelMarT-II

Sites: 173  
Participants: 2,183

#### SOCRATES

Sites: 5  
Participants: 12

### Skin cancer

#### SiroSkin

Sites: 5  
Participants: 55

### Merkel cell carcinoma

#### GoTHAM

Sites: 10  
Participants: 16

#### I-MAT

Sites: 20  
Participants: 103

### Uveal melanoma

#### Uveal Melanoma Registry

Sites: 8  
Participants: 302

## Active trials closed for recruitment

### Melanoma

#### IMAGE

Sites: 12  
Participants: 670  
Closed recruitment: April 2023

#### EAGLE FM

Sites: 15  
Participants: 101  
Closed recruitment: March 2020

#### MelMarT Pilot

Sites: 20  
Participants: 400  
Closed recruitment: August 2016

## Trials with completed follow-up

### Melanoma

#### CHARLI

Sites: 10  
Participants: 52  
Closed recruitment: December 2021

#### RTN2

Sites: 23  
Participants: 50  
Closed recruitment: February 2020

#### WBRTMeI

Sites: 39  
Participants: 215  
Closed recruitment: September 2017

### Lentigo maligna

#### RADICAL

Sites: 10  
Participants: 126  
Closed recruitment: December 2021





## Year at a glance

Date	Events
<b>July 2023</b>	<ul style="list-style-type: none"> <li>MASC Trials membership reaches 2,396 members</li> </ul>
<b>August 2023</b>	<ul style="list-style-type: none"> <li>John Mason and Gemene Heffernan-Smith join Consumer Advisory Panel</li> </ul>
<b>September 2023</b>	<ul style="list-style-type: none"> <li>MelMarT-II reaches 50% recruitment target</li> <li>MASC Trials Finance, Risk and Audit Committee convenes first meeting</li> </ul>
<b>October 2023</b>	<ul style="list-style-type: none"> <li>IMAGE trial presented at the European Academy of Dermatology and Venerology Congress, Berlin, Germany</li> <li>Louise Gonzales promoted to Senior Clinical Research Associate</li> </ul>
<b>November 2023</b>	<ul style="list-style-type: none"> <li>EAGLE FM trial results presented at the European Society of Surgical Oncology Conference in Florence, Italy</li> </ul>
<b>December 2023</b>	<ul style="list-style-type: none"> <li>GoTHAM trial opens at Lake Macquarie Private Hospital and Coffs Harbour Health Campus, regional NSW</li> <li>MelMarT-II United Kingdom recruitment meets 50% recruitment target</li> </ul>
<b>January 2024</b>	<ul style="list-style-type: none"> <li>Melanoma and Skin Cancer Trials chosen as the Australian Livestock and Property Agents Association (ALPA) 2024 Charity</li> <li>GoTHAM trial opens at Gosford and Wyong Hospitals, regional NSW</li> </ul>
<b>February 2024</b>	<ul style="list-style-type: none"> <li>SiroSkin trial enrolls 1st participant at Princess Alexandra Hospital, QLD</li> <li>Cancer Trials Ireland joins MelMarT-II trial with six trial sites planned</li> </ul>
<b>March 2024</b>	<ul style="list-style-type: none"> <li>ALPA raise \$61,350 for MASC Trials at National and NSW Young Auctioneers Charity Event, Sydney</li> <li>EAGLE FM trial results published in the Annals of Surgical Oncology</li> <li>I-MAT trial opens at New Zealand's largest teaching hospital, Auckland City Hospital</li> </ul>
<b>April 2024</b>	<ul style="list-style-type: none"> <li>Board welcomes Patrick Baker and Prof James Whisstock</li> <li>MelMarT-II enrolls 2,000th participant</li> <li>Peter MacCallum Cancer Centre and Ipswich Hospital join SOCRATES trial</li> </ul>
<b>May 2024</b>	<ul style="list-style-type: none"> <li>Virtual Concept Development Workshop led by AOMA</li> <li>I-MAT trial enrolls 100th participant</li> <li>SiroSkin Investigator, Prof Kiarash Khosrotehrani awarded 2024 Queensland Health Research Translation Excellence Award for skin cancer prevention and SiroSkin trial</li> </ul>
<b>June 2024</b>	<ul style="list-style-type: none"> <li>Ocular melanoma fundraising appeal launched</li> <li>RTN2 trial results published in Annals of Surgical Oncology</li> <li>RADICAL trial presented at the American Society of Clinical Oncology Annual Meeting, Chicago, USA</li> </ul>



## Message from our Chair and CEO



In 1999, MASC Trials – originally known as the Australia and New Zealand Melanoma Trials Group (ANZMTG) – was established by prominent members of the melanoma clinical and research communities. We rapidly became the only not-for-profit, multi-site, collaborative clinical trials group in Australasia for conducting investigator-initiated clinical trials in melanoma, adding non-melanoma skin cancers to our remit when we incorporated as MASC Trials Ltd in 2018.

Our first trial was co-developed with the Trans-Tasman Radiation Oncology Group (TROG) in 2000, to evaluate the role of adjuvant radiotherapy for patients with high risk melanomas. In 2008, we secured our first core funding within the Cancer Australia Supporting Cancer Clinical Trials Program, and in 2016, as the pace of melanoma and skin cancer research and trials rapidly accelerated, we were awarded our first major NHMRC grant.

Today, 25 years old, we continue to deliver significant scientific outcomes with Cancer Australia's ongoing support, regularly attract project funding, add more and more trials to our portfolio, and remain committed to our mission to work collaboratively with world-leading researchers to deliver clinical trials that improve melanoma and skin cancer outcomes.

Our clinical trial portfolio remained strong in 2024, supported by our academic affiliation with Monash University and collaborations with other leading research organisations nationally and internationally. We recruited close to 1,000 participants across six currently active trials in our portfolio and from 39 Australian and 168 international trial sites. We aim further to boost our engagement with regional patients and collaborators through expanding decentralised trial models and availing resources for teletrials in as many trials in our portfolio as possible.

In terms of impact, 2024 was a great year for MASC Trials, driving new standards of care, advocating for policy change, and ensuring good governance and operational support.

The SiroSkin trial opened to recruitment, exploring whether topical Sirolimus cream can reduce the incidence of squamous cell carcinomas in organ transplant recipients. This trial could dramatically improve skin cancer management, quality of life and life expectancy for these patients. The SiroSkin Study Chair is Prof Kiarash Khosrotehrani, recipient of the 2024 Queensland Health Research Translation Excellence Award and the newly appointed St Baker-Soyer Chair in Dermatology at the University of Queensland Frazer Institute.

In May 2024, the Australian Melanoma & Skin Cancer Alliance (AMSCA) launched its National Targeted Skin Cancer Screening Program Consensus Statement, with MASC Trials one of the leading supporters of and signatories on this important document. Acknowledging the significant burden of skin cancer, we are committed to supporting a program that is equitable and effective in reducing melanoma and skin cancer morbidity and deaths in Australia. To learn more visit: [mscan.org.au/targeted-national-screening-program-consensus/](https://mscan.org.au/targeted-national-screening-program-consensus/)

Our Data and Safety Monitoring Board (DSMB), established in June 2022 and led by Surgical Oncologist Prof Philip Crowe, supported our trials and Investigators by meeting quarterly to review trial conduct, patient safety and the quality of data in our portfolio. At a governance level, we also established a Financial, Risk and Audit Committee (FRAC), welcoming Prof Michael Kimlin as Chair, Sharon Van Buerle, Paul White and Gabrielle Byars as members.

**“Established in 1999, 2024 marks 25 years of progress in melanoma and skin cancer treatments through Melanoma and Skin Cancer Trials in Australasia.”**

**Prof Mark Shackleton**  
Chair, Melanoma and Skin Cancer Trials



Building on our success over the last 25 years, we plan to implement strategies to engage young and new members, staff and partners. To make this possible, we are cementing organisational and governance structures that will support the delivery of our research and operational priorities.

Our work would not be possible without the dedication of our Board, Consumer Advisory Panel, partners, members and staff. Prof Victoria Mar, Mr Richard Martin, Prof Mark Shackleton and Prof Andrew Spillane celebrated ten years as Board Directors. Katja Loewe, our peerless Research Manager, reached a milestone of three years in our clinical trial operations team, and the indefatigable Alison Button-Sloan celebrated seven years on our Consumer Advisory Panel (Chair from Jan 2022).

We welcomed the following staff to our team, reinforcing its strong work ethic, operational integrity, and enthusiasm.

- Louise Gonzales, Senior Clinical Research Associate (formerly Clinical Research Associate)
- Dr Elsa Marquez, Clinical Data Manager
- Madeleine Muller, Clinical Trials Assistant
- Ella Sjodin, Administrative Officer/Clinical Trials Assistant

The Australian Livestock and Property Agents Association (ALPA) chose Melanoma and Skin Cancer Trials as its 2024 charity and raised \$61,350 to support our clinical trials. ALPA CEO Peter Baldwin indicated that the topic of skin cancer “resonated very strongly with our membership and their families”. We welcomed ALPA’s financial support, which will also raise awareness about skin cancer prevention and treatment in regional areas whose inhabitants are overrepresented in terms of skin cancer risks and underrepresented in getting skin checks.

We also acknowledge and thank the individuals, businesses and organisation who generously donated to support our clinical trials over the past year. Their dedication inspires our researchers and keeps our clinical portfolio growing.

**“Melanoma and Skin Cancer Trials is one of the leading research, consumer and clinical organisation signatories on AMSCA’s National Targeted Skin Cancer Screening Program Consensus Statement.”**

**Gabrielle Byars**  
CEO, Melanoma and Skin Cancer Trials

We also look forward to welcoming more members to our Foundation Club 100 next year. To learn more, visit: [masc.org.au/support](https://masc.org.au/support)

We are looking forward to the future, supporting investigators and researchers in clinical trial development and management and enabling vital research in key areas towards improving outcomes for people affected by melanoma and skin cancer.

A handwritten signature in black ink, appearing to read 'Mark Shackleton'.

**Professor Mark Shackleton** MBBS PhD FRACP  
Chair, Melanoma and Skin Cancer Trials  
Director of Oncology, Alfred Health  
Professor of Oncology, Monash University  
Co-Director, Monash Partners Comprehensive Cancer Consortium

A handwritten signature in black ink, appearing to read 'G Byars'.

**Gabrielle Byars** BSc MBioMedSci  
Chief Executive Officer, Melanoma and Skin Cancer Trials  
Head, Melanoma and Skin Cancer Research Centre, Monash University  
Chair-Elect, Cancer Cooperative Trial Groups Executive Officers Network

# Melanoma trial offers hope for beloved stock and station agent

## Given only months to live

In January 2021, John Robson was celebrating his 60th birthday. Looking at the friendly faces around the tables, he reflected on his beautiful family, the strength of his burgeoning business, the most amazing people he had around him and his health. But less than two months later, John would be facing a very different reality after being diagnosed with stage IV melanoma.

John's melanoma story began in 2014 when he had a melanoma removed from his arm. Following his surgery, John was diligent with skin checks and took extra care in the sun. As a stock and station agent, John spent a lot of time outdoors, moving sheep and cattle, inspecting properties, and building relationships with sellers and buyers.

Aside from some additional vigilance, John didn't give his melanoma too much thought as he went about his life. He was busy growing his own stock and station agency. Seven years later, in March 2021, John noticed a huge lump in his armpit that was quickly confirmed as stage IV melanoma, with tumours having spread to his lungs, liver, chest and lymph glands.

"My father was diagnosed with cancer at age 60 and was awaiting the birth of three grandchildren at the time. He passed away from his cancer just four years later, so when I was diagnosed at 60, it felt like history cruelly repeating. My first grandchild was also due but my prognosis was much shorter at only two to six months. Hearing that I had melanoma just took the wind out of me.

## Innovative trial offers chance at survival

After breaking this devastating news, John's doctor presented him with an opportunity that would change not only his prognosis, but his life. John was eligible to participate in the CHARLI trial: an innovative project testing the addition of a new treatment in addition to standard immunotherapies.

"He was very upfront about it, which was quite comforting. He said if this was even a couple years ago, I wouldn't have any real options given the extent of the metastasis. But I now had an opportunity for a chance at a longer life – at survival. And even if it was a slight chance, I knew I had to take it."

## Accessing treatment close to home in regional Victoria

Living in Kyneton, in regional Victoria, John was thrilled to hear there was a clinical trial site in the neighbouring hub of Bendigo where he had previously lived, meaning he wouldn't have to travel to Melbourne for treatment. And given the awful side effects he experienced, that proximity became integral.

"I had every 'itis' under the sun. I was recommended a double treatment, so the side-effects scaled up too. I'd never taken a sick day in 30 years, so I kept working through it when I probably shouldn't have because I didn't know if I would ever be able to work again. Then one winter's night I was pushing cattle into a paddock and my body started giving out. I thought 'John, you've been given another chance here – what good is that if you work yourself to death.' So, I made the call then and there."

As bad as the physical side effects were, the emotional trauma of selling his beloved business was one of the most difficult parts of John's journey.

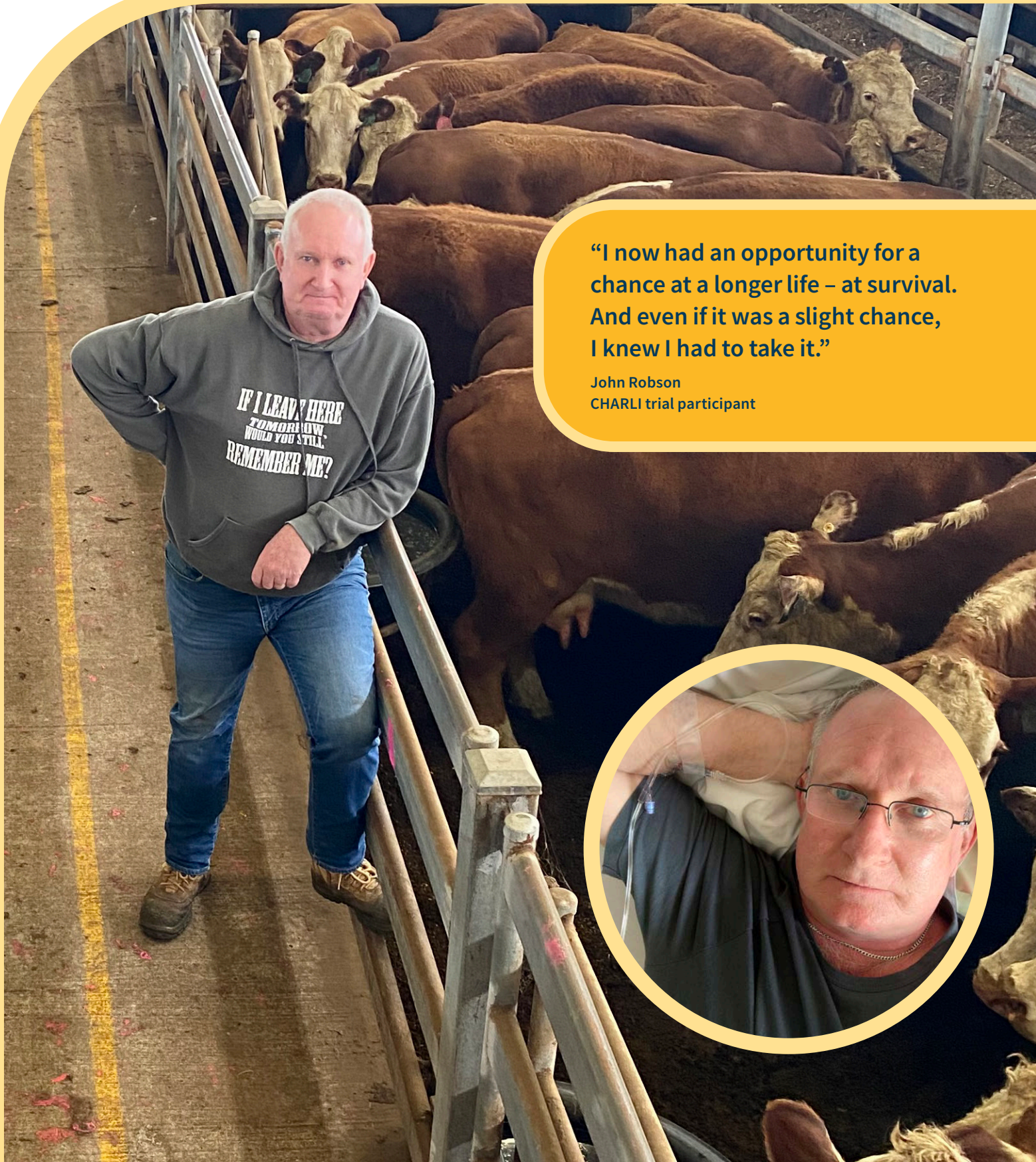
"I was convinced to have a retirement party. It was such a horrible thing to go through that I didn't want to make a song and dance about it, but I eventually relented. In the end over 150 clients, friends and locals turned up to see me off. That was incredibly moving and made me appreciate that there's more to my job than just the work – it's the human connection."

## The battle isn't over, but tests show an improvement

It's been over three years since John was given just months to live, his latest tests have shown a definite improvement.

"It's been a rough time but I'm still here, spending time with my family and making the most of every day. One thing that struck me through it all was the empathy of everyone in our medical system. From the nurse who held my hand while I was having seven huge biopsies in my underarm; the oncologist who called me at 6.30pm on the Friday night of a long weekend just to put my mind at ease with good news before a long weekend; to Dr Sam Harris from Bendigo Health whose honesty and care let me know I'm in the best hands possible. And just as I'm here today because people like my father took part in clinical trials, I hope that this trial can help future generations get more time with their loved ones."





**“I now had an opportunity for a chance at a longer life – at survival. And even if it was a slight chance, I knew I had to take it.”**

**John Robson**  
CHARLI trial participant



# Board of Directors

## Yearly update

The Board of Directors met quarterly during the year and conducted additional meetings to discuss fundraising and corporate partnerships, and future directions of Melanoma and Skin Cancer Trials.

Prof Victoria Mar, Mr Richard Martin, Prof Mark Shackleton and Prof Andrew Spillane celebrated a milestone of ten years on our Board of Directors.

The Board of Directors welcomed two new members in 2024. Patrick Baker, Director of The Alfred Foundation and a Board member with Cancer Council Victoria, brings expertise in strategic and operational direction, including client acquisition, revenue generation and growth strategies. Prof James Whisstock, is a highly regarded research scientist based at Monash University where he is Deputy Dean (Research) in the Faculty of Medicine Nursing and Health Sciences at Monash University.

We thank Prof Sofia Zoungas, who stepped down from the Board of Directors in February, for her contributions over the past two years. Prof Zoungas leads Monash University's School of Public Health and Preventive Medicine and supported the work of our research centre within the university.

The Financial, Risk and Audit Committee (FRAC), led by Prof Michael Kimlin, met three times to ensure that our finances are reported in accordance with Australian Accounting Standards and that our resources are managed in such a way to achieve value for money on costs. We thank members who served on the FRAC during the year for their time and expertise.



**Prof Mark Shackleton**  
MBBS PhD FRACP  
Chair, Medical Oncologist



**Prof Andrew Spillane**  
MD FRACS BMBS BMedSci GAICD  
Deputy Chair, Surgical Oncologist



**Prof Victoria Mar**  
MBBS PhD FACD  
Dermatologist



**Mr Richard Martin**  
MBChB FRACS ChMSurgOnc  
Surgical Oncologist



**Prof Michael Kimlin**  
BSc MSc GradDipEd PhD MAICD  
Cancer Epidemiologist



**Mary Tsouvalakis**  
BA LLBHons MPH  
Lawyer, Patient Advocate



**Prof Sophia Zoungas**  
MBBS FRACP PhD  
Endocrinologist



**Sharon Van Buerle**  
Bec GradDipAppSci  
Policy and Financial Resources  
Management



**Patrick Baker**  
Executive Director



**Prof James Whisstock**  
MA (Cantab) PhD (Cantab)  
Structural Biologist

## Our team (As of 30 June 2024)



**Gabrielle Byars**  
BSc MBioMedSci  
Chief Executive Officer



**Katja Loewe**  
MSc  
Research Manager



**Louise Gonzales**  
BAppSc  
Senior Clinical Research Associate



**Carla Duarte**  
BSc (Hons)  
Clinical Research Associate



**Merrin Morrison**  
BBusComm GradDipBusMgmt  
Marketing and Communications  
Manager



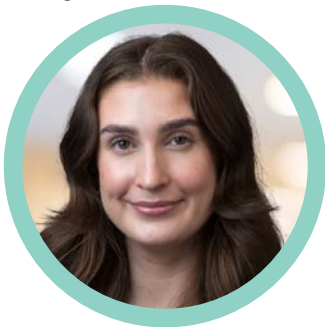
**Dr Sam Hogarth**  
BBiotechMedRes PhD  
Research Development Officer /  
Clinical Research Associate



**Dr Elsa A. Marquez**  
PhD  
Clinical Data Manager



**Daniel Ariza Ospino**  
BDS MPH  
Clinical Data Manager



**Madeleine Muller**  
BBiotech MBiotech  
Clinical Trial Assistant



**Ella Sjodin**  
BNutScScholars  
Administrative Officer /  
Clinical Trial Assistant



**Ally McGill**  
BSc CertIV Bookkeeping DipAcc  
Finance and Administration Officer



**Dr Alan Herschtal**  
PhD  
Biostatistician (Monash University)



**Prof Rory Wolfe**  
PhD  
Biostatistician (Monash University)

## Consumer engagement



### Improving trials through consumer input

Melanoma and Skin Cancer Trials values independent patient feedback to ensure the development of relevant and accessible research meets the needs and objectives of the people most affected by melanoma and skin cancer. Proactive early consumer engagement helps shape clinical trial design ensuring trials are conducted with the patient's best interests in mind.

Formed in 2021, our Consumer Advisory Panel is led by Alison Button-Sloan, a dedicated patient and research advocate. Alison has expertise from a long career in the health system and a wealth of experience working in partnerships with consumers, health professionals, and researchers.

**“Consumers provide unique insights into treatment experiences and improve the quality and relevance of clinical trials with impactful research outcomes.”**

Alison Button-Sloan  
Chair, MASC Trials Consumer Advisory Panel

Our Consumer Advisory Panel includes members from metropolitan and regional towns throughout Australia and a representative from New Zealand. Michelle Taylor was appointed Deputy Chair in January 2024.

During the year, the Consumer Advisory Panel met quarterly. Members also:

- Contributed to the Melanoma and Skin Cancer Trials 2024 Concept Development Workshops and development of 4 new research proposals
- Supported investigators via Melanoma and Skin Cancer Trials-led Trial Management Committee meetings
- Shared lived cancer experiences in podcast series by the Melanoma and Skin Cancer Advocacy Network
- Attended Melanoma and Skin Cancer Trials Discipline-Specific Advisory meetings





## Consumer Advisory Panel (As of 30 June 2024)



**Alison Button-Sloan**  
Chair, VIC  
Melanoma, basal cell carcinoma  
and squamous cell carcinoma



**Michelle Taylor**  
Deputy Chair, NSW  
Uveal melanoma



**Ana Ratapu**  
NSW  
Metastatic melanoma



**Gemene Heffernan-Smith**  
NSW  
Metastatic melanoma



**Deborah Butler**  
QLD  
Metastatic melanoma, basal cell  
carcinoma and squamous cell  
carcinoma



**John Mason**  
QLD  
Merkel cell carcinoma



**Tara Fullston**  
WA  
Metastatic melanoma



**Ron Murray**  
Auckland, NZ  
Metastatic melanoma, basal cell  
carcinoma and squamous cell  
carcinoma



**Trevor Day**  
NSW  
Merkel cell carcinoma

We also thank the many consumers we are in regular contact with, who are always willing to provide their valuable insights and contribute to our work. In particular, we thank Susan Vine for supporting our ocular melanoma clinical research and events.



**Susan Vine**  
2024 AOMA Summit Consumer  
Advisor, NSW  
Founder, OcuMel Australia and New  
Zealand Support Group

# An international journey to save her life fuels Ana's advocacy

## Given only months to live

When Ana Ratapu was diagnosed with melanoma, she had to fight hard to get life-saving treatment. Now, as a member of Melanoma and Skin Cancer Trials Consumer Advisory Panel, Ana is working to remove those barriers and ensure those in need can access the highest standards of care.

In 2020, Ana and her family were caravanning around her second home of Australia. Having lived in Perth for five years, the New Zealanders decided it was time to see all that Australia had to offer. They were four months into their adventures and sightseeing when Ana noticed a less than welcome sight – a red spot on her neck.

Having lost several family members to melanoma, Ana didn't take any chances. She immediately made a detour to have it biopsied, which confirmed that the innocuous looking spot was a melanoma.

"I was so grateful I didn't put it off because it didn't look like a traditional melanoma or because I was on holiday. My story would be a very different one if I didn't trust my gut. I was able to have it surgically removed while still in Australia and, while the doctors were fairly confident they'd got it all, they recommended I have regular scans just to be safe," Ana said.

## With borders closing, it was time to return home

This was all happening against the backdrop of the COVID-19 pandemic and countries had begun closing their borders. So, with her surgery completed, Ana and her family decided to return to New Zealand.

Back home, Ana found herself needing to self-advocate to get the scans recommended for her in Australia. Facing lengthy delays for imaging testing, she consulted a private oncologist who suggested biannual scans.

"I worked as a skin cancer nurse, so I knew a fair bit more than your average person going through it – but even I found it overwhelming and frustrating. Although I went private to get the scans done, they couldn't detect smaller growths. I just knew it was spreading and growing, but essentially, I had to wait until the melanoma was large enough to be picked up on the scan. It was horrifying."

## Leaving her family to join a life-saving clinical trial

18 months after her initial surgery in Australia, Ana received the news she'd been dreading. The melanoma had indeed spread and was now in her lungs. With the clock ticking and limited treatment options available in New Zealand, Ana made the decision that would save her life: Return to Australia and join a clinical trial.

"It all happened so fast – it was a real roller coaster of emotions. From the anger of knowing I wouldn't have had any scans in the New Zealand public system, to relief at finding a suitable trial, to the sadness of leaving my husband and two young kids. I didn't really have time to process it all – I just knew I had to get on that plane and do anything to survive for my family."

Within weeks of arriving, Ana was receiving cutting-edge immunotherapy treatment through a trial. Fortunately, she responded well, and her scans began showing a reduction in tumours. But while the trial was yielding positive results, being away from her family brought its own challenges.

"The trial is for two years, ending May 2024, which is a long time to be away from the people you love. So, when I realised I actually had a good chance of surviving this, we made the call to relocate the family to Australia. That was a huge step, because until then part of me wasn't sure I'd make it. It was an emotional reunion."

## Helping others through advocacy work

With her latest scans showing no sign of the tumours that once riddled her lungs, Ana is hopeful she's in the clear. But she knows others won't be so lucky – particularly if they're unable to readily access regular scans or join a clinical trial.

"I want to make a difference; to share my experience so that others know what to expect and how to fight for the best outcomes possible. So, when the opportunity to join the Melanoma and Skin Cancer Trials Consumer Advisory Panel presented itself, I leapt at it. It sounds clichéd but I feel like this was all meant to happen – that everything I've been through has led me here and now I can't wait to play a part in giving people access to clinical trials like the one that saved my life."

"As a young patient, I want to show others like me that there's always hope – you just need to know where to turn. And in this new role, I intend to make those support pathways as clear and simple as possible for people."





**“It all happened so fast – it was a real roller coaster of emotions. From the anger of knowing I wouldn’t have had any scans in the New Zealand public system, to relief at finding a suitable trial, to the sadness of leaving my husband and two young kids. I didn’t really have time to process it all – I just knew I had to get on that plane and do anything to survive for my family.”**

**Ana Ratapu,  
Consumer Advisory Panel Member**

# Melanoma trials

## Melanoma (skin)



**3rd most commonly  
diagnosed cancer in  
Australia**



**18,000+ Australians  
diagnosed with invasive  
melanoma each year**



**1,300+ Australian deaths  
each year**



**Australia and New  
Zealand have the highest  
incidence of melanoma in  
the world**



**“It is expected that the  
MelMarT-II trial results  
will lead to lower  
morbidity and guide the  
management of patients  
with high-risk primary  
cutaneous melanoma.”**

**Prof Michael Henderson,  
MelMarT-II trial Co-Study Chair**

## 02.18 MelMarT-II

### **Global melanoma trial to determine optimal surgical excision margin**

Primary cutaneous melanoma, where the cancer cells have penetrated deeply into the skin but haven't spread to other parts of the body, is the most common form of melanoma. Surgery to remove the tumour is the primary treatment, however, there is uncertainty as to the optimal excision margin. For high-risk melanoma patients, their doctor's decision to use either a 1 cm or 2 cm excision margin around the melanoma could impact their quality of life and survival.

A larger melanoma excision margin can have a dramatic impact on a patient's quality of life, with potential complex surgical reconstruction, poorer cosmetic appearance, post-operative complications, and impact on function. However, if the excision margin is too small, the melanoma could return and metastasise.

Currently there is no high-quality clinical trial evidence or consensus in the medical community about the optimal melanoma excision margin size for stage II melanoma. The evidence available suggests a 1 cm margin is reasonable. The Melanoma Margins Trial, MelMarT-II, will determine whether a 1 cm or a 2 cm margin is best, provide certainty for melanoma patients and their doctors in deciding the most effective treatment and inform international guidelines.

This phase III randomised controlled surgical trial, coordinated by MASC Trials, will enrol almost 3,000 patients across Australia, the United Kingdom, the USA, Canada, New Zealand, the Netherlands, Sweden, Slovenia, and Ireland. Leading this international trial together are Prof Michael Henderson in Australia and Prof Marc Moncrieff in the United Kingdom.

The MelMarT-II trial was originally awarded \$2,766,610 from the Australian National Health and Medical Research Council. Additional funding for international trial activity has been provided by national funding organisations in other countries, including the Canadian Institutes of Health Research, Canadian Cancer Society, UK National Institute for Health Research Health Technology Assessment, US National Cancer Institute, the Swedish Cancer Society, The Swedish Research Council, the Knut and Alice Wallenberg Foundation, and Cancer Trials Ireland. The trial is sponsored by Melanoma and Skin Cancer Trials. Its collaborative partners are Peter MacCallum Cancer Centre, Norfolk and Norwich University Hospital, Canadian Cancer Trials Group, SWOG Cooperative Group, Zuyderland Medical Center, and Cancer Trials Ireland.



**“Melanoma does not discriminate and can affect the young and old living anywhere in the world, so this trial will give us the high-quality data needed for a consensus in melanoma management to inform the international medical community.”**

Prof Marc Moncrieff,  
MelMarT-II trial Co-Study Chair

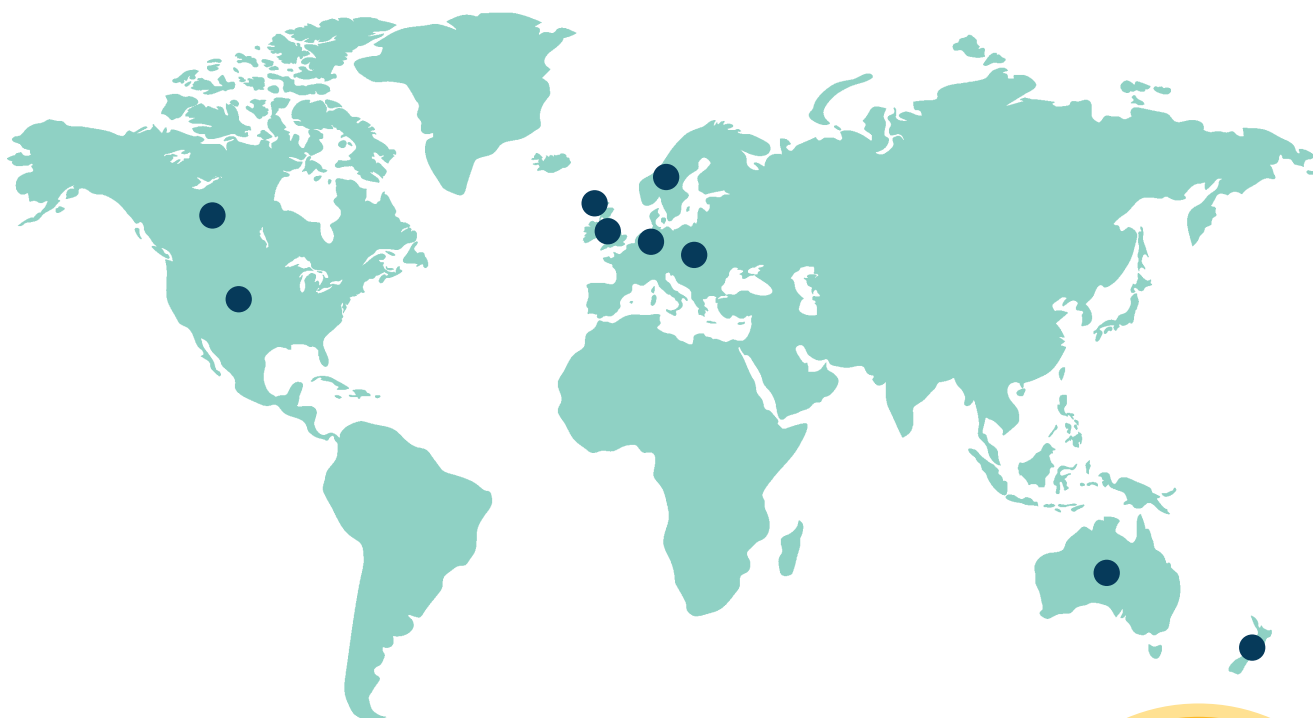
### Yearly update

This year, 37 new sites joined the trial, bringing the total number of sites to 173. We enrolled 840 new participants, bringing the total to 2,183 (including 170 participants from the pilot study) from a target enrolment of 2,998 participants. We now have MelMarT-II trial sites across nine countries. MelMarT-II investigators met in Mar 2024 at the investigator meeting held at the Society of Surgical Oncology Annual Meeting, Georgia, USA.

Boosting this international effort has been the rapid activation of an additional 28 trial sites in the USA through the National Cancer Institute’s National Clinical Trials Network (NCI-NCTN) SWOG Cooperative Group. With SWOG’s support, we have opened 120 sites across the USA.

### More information

[masc.org.au/melmart-ii](https://masc.org.au/melmart-ii)







**“If the trial is a success, doctors will have a way to reduce or even prevent heart disease in patients with melanoma, with a treatment that is cheap, safe and widely available.”**

**Prof Stephen Nicholls,  
SOCRATES trial Study Chair**

## 14.20 SOCRATES

### **Preventative treatment for melanoma patients at risk of heart disease**

Immunotherapy drugs are effective in treating metastatic melanoma but can cause heart-related side-effects such as increased cholesterol deposits in heart arteries which could lead to heart attacks. Although immunotherapy has dramatically improved cancer outcomes, further research is necessary to tackle the heightened risk of heart disease and its effect on patients who are living longer following treatment.

Led by the Director of the Monash Victorian Heart Institute, Prof Stephen Nicholls, the trial which commenced in 2022 is looking to understand the build-up of cholesterol deposits, also referred to as atherosclerosis or plaque in the vessels of the heart, in melanoma patients treated with immunotherapy. If successful, it could determine if statins have a positive effect on long-term outcomes and survival rates for many melanoma patients. As part of this clinical trial, images of the heart will be taken over time using computed tomography (CT) scans of heart arteries.

The SOCRATES trial represents a unique and much needed collaborative effort between oncology, dermatology, and cardiology specialities to address an emerging need in melanoma and long-term cancer survivorship care.

SOCRATES was awarded \$1,592,868 from the Federal Government’s Medical Research Future Fund. The trial is sponsored by Monash University and coordinated by the Monash Victorian Heart Institute, with assistance from Melanoma and Skin Cancer Trials.

### **Yearly update**

The SOCRATES trial opened three additional trial sites across Victoria and Queensland and closed one site, bringing the total number of trial sites to five. We enrolled 11 new participants, bringing the total to 12 from a target enrolment of 130 participants.

### **More information**

[masc.org.au/socrates](https://masc.org.au/socrates)



# Skin cancer trials

## Non-melanoma skin cancers



Estimated to account for more cases diagnosed than all other cancers combined (in 2002)



Two types: Basal cell carcinoma (BCC, about 70% of all NMSCs) and squamous cell carcinoma (SCC, about 30% of all NMSCs). Additional group, keratinocyte dysplasia, includes solar keratosis, Bowenoid keratosis and Bowen's disease.



**“With the SiroSkin trial we are hoping to reduce the burden of skin cancer in organ transplant recipients. Reducing the number of new skin cancers in patients is an essential objective to improve their quality of life and reduce morbidity and mortality post transplantation”**

Prof Kiarash Khosrotehrani,  
SiroSkin trial Study Chair

### 01.21 SiroSkin

#### Topical cream to reduce facial skin cancers in organ transplant recipients

Immunosuppression therapies allow many solid organ transplant recipients to live longer and healthier lives, however, they also significantly increase the risk of skin cancer in these patients. In Australia, the high incidence of basal and squamous cell carcinomas, particularly on the head and neck, can translate into numerous skin cancers for solid organ transplant recipients. These skin cancers often require excision and can lead to hundreds of surgeries in the patient's lifetime. For some patients, these skin cancers metastasise and lead to death.

Currently, patient management does not prevent new or additional skin cancers from occurring. As solid organ transplant patients are considered high risk, effective treatments to stop the onset of new cancers is yet to be implemented.

Led by Prof Kiarash Khosrotehrani, the SiroSkin trial aims to determine whether topical Sirolimus – a drug commonly used to prevent transplant rejection and with demonstrated anti-tumour effects – can reduce the number of facial squamous cell carcinomas in solid organ transplant patients. Participants will be asked to apply a cream containing either sirolimus or placebo to the face and ears once nightly for 24 weeks.

The SiroSkin trial was awarded \$2,486,489 from the Medical Research Future Fund's Rare Cancers, Rare Diseases and Unmet Need Initiative and is sponsored by Monash University.

#### Yearly update

Launched in February 2024, five of the six planned sites for the SiroSkin trial opened across New South Wales, Victoria and Queensland. A total of 55 participants out of 146 have been enrolled in the trial, with the first participant joining at Princess Alexandra Hospital in Queensland.



# Merkel cell carcinoma trials

## Rare, highly aggressive neuroendocrine skin cancer



Australia's deadliest form of skin cancer



300 Australians diagnosed each year



Australia has the world's highest incidence of Merkel cell carcinoma



**“The I-MAT trial is targeted to patients with Merkel cell carcinoma, a rare cancer that disproportionately affects elderly Australians, where outcomes are often devastating, even in early-stage disease. The trial aims to generate the evidence needed to introduce immunotherapy into earlier stages of this rare orphan cancer, with the goal of improving cure rates.”**

Dr Wen Xu,  
I-MAT trial Study Chair  
Australasian Merkel Cell Carcinoma  
Interest Group (AMIGOs) Chair

### 03.18 I-MAT

#### Trial to stop rare, lethal cancer in its tracks

Merkel cell carcinoma – a rare, highly aggressive neuroendocrine skin cancer that metastasises very quickly - is the most lethal form of skin cancer. Even when diagnosed early, Merkel cell carcinoma has a high risk of returning, with up to 50% of patients experiencing recurrence within two years.

Immunotherapy has revolutionised treatments for melanoma, and this approach is now being tested in early-stage Merkel cell carcinoma patients.

The I-MAT trial, led by Dr Wen Xu, is giving patients with stage I-III Merkel cell carcinoma the immunotherapy drug Avelumab after their initial surgery and/or radiotherapy for the cancer to improve their cure rates.

The trial will provide high-quality data to determine if a six-month regimen of Avelumab is well-tolerated and can eliminate residual microscopic cancer cells, thus reducing the risk of the cancer reoccurring and improving cure rates for patients with early-stage Merkel cell carcinoma.

This phase II, prospective, randomised, placebo-controlled, multicentre trial is enrolling participants across Australia. To ensure a true representation of Merkel cell carcinoma patients in the community, the trial is open in most capital cities and the regional towns of Newcastle, Port Macquarie, Wollongong, Southport, Bundaberg, Cairns, Mackay, and Townsville.

The I-MAT trial was originally awarded \$1,632,095 from the Medical Research Future Fund's Rare Cancers Initiative with top-up funding from Merck Healthcare. The trial is sponsored by Melanoma and Skin Cancer Trials.

#### Yearly update

This year, the I-MAT trial opened its first international site at Auckland City Hospital, New Zealand bringing the total number of sites to 20. We enrolled 24 new participants, bringing the total to 103 from a target enrolment of 120.

#### More information

[masc.org.au/i-mat](https://masc.org.au/i-mat)





**“The GoTHAM trial remains important to understand the impact and immunomodulatory role of radiation when administered with immunotherapy in a disease where both are effective and a significant subset of patients progress quickly. There is still a great need to improve long-term disease control and survival.”**

**Prof Sandhu,  
GoTHAM trial Study Chair**

## 10.17 GoTHAM

### **World first trial to test new treatment combination**

Australia has the highest incidence of Merkel cell carcinoma in the world, although it is still considered a rare disease compared to other skin cancers such as melanoma.

In a world first, Prof Shahneen Sandhu is leading a trial that hopes to find a novel treatment combination for patients who have developed metastatic Merkel cell carcinoma. The trial is testing the immunotherapy drug Avelumab in combination with external beam radiotherapy.

The high-quality evidence gathered from this clinical trial will provide assurance to oncology teams that combining Avelumab with radiotherapy for metastatic Merkel cell carcinoma patients will yield the best possible results.

The Australia-wide multicentre, phase Ib/II trial is seeking to enrol up to 19 participants and has ten trial sites open nationally.

The GoTHAM trial was funded via the Medical Research Future Fund's Rare Cancers Initiative with top-up funding from Merck Healthcare.

### **Yearly update**

The GoTHAM trial is now actively recruiting at 10 sites, expanding the recruitment catchment to regional New South Wales in Gosford, Wyong, Newcastle and Coffs Harbour. Four new participants were enrolled, bringing the total to 16. Due to the rarity of metastatic Merkel cell carcinoma, it is challenging to find the number of participants required to produce the evidence necessary for this new treatment option.

### **More information**

[masc.org.au/gotham](https://masc.org.au/gotham)



# Uveal melanoma clinical research

## Rare form of melanoma in the eye



200 Australians diagnosed each year



36 Australians die each year



25% of patients require enucleation (removal of the eye)



**“OMNi – The global Uveal Melanoma registry has been very successful in providing real world data to support patients and regulators in understanding the impact of uveal melanoma on patient care.”**

Prof Anthony Joshua,  
Australian Uveal Melanoma  
Registry Lead Investigator  
Australasian Ocular Melanoma  
Alliance Chair

## 07.17 Uveal Melanoma Registry

### Informing research and new treatments

Uveal melanoma is a rare and aggressive form of ocular melanoma for which there are very few accepted treatments. Uveal melanoma is clinically and biologically different from the more common skin melanoma.

The Ocular Melanoma Natural History Study (OMNi), which commenced in 2020, is a global real-world registry with contributing sites across North America, Europe and Australia. Its aim is to help identify predictive clinical features, document the natural history of uveal melanoma, and collect information about clinical management. The registry was made possible through our collaboration with Pulse Inframe, a real-world evidence generation, health informatics and insights company that supports our ecosystem across patients and researchers. Bristol Myers Squibb has also contributed funding to the Australian registry.

This multicentre Uveal Melanoma Registry will generate clinical and biomarker data that can be used to support drug development and pricing reimbursement. Patients can also provide direct feedback, offering a holistic view of the impact of uveal melanoma and its treatments.

### Yearly update

Established in May 2021, eight Australian sites are contributing to the registry, enrolling 63 participants this year, bringing the total number of participants to 302. Work continues to expand the registry with an additional site planned for Auckland, New Zealand, and continued collaboration with our partners in Canada.

### More information

[masc.org.au/uveal-melanoma-registry-omni](https://masc.org.au/uveal-melanoma-registry-omni)



## Network of experts

### Special interest groups

#### Australasian Ocular Melanoma Alliance

The Australasian Ocular Melanoma Alliance (AOMA) works to improve care and treatment for ocular melanoma patients in Australia and around the world, and to further research into this rare form of melanoma.

Founded in 2017, AOMA members include ophthalmologists, surgeons, medical and radiation oncologists, pathologists, allied health professionals, scientists, researchers, and consumer representatives from across Australia and New Zealand. AOMA is chaired by Prof Anthony Joshua, a medical oncologist from Sydney.

#### Yearly update

AOMA met three times to develop ideas for new ocular melanoma trials, discuss current research, and contributed to a Concept Development Workshop in May 2024 to review grant opportunities.

The 2024 AOMA Virtual Summit was held on 15 June 2024 with 412 registrations from 21 countries. This year's event became the biggest of its kind for ocular melanoma in the southern hemisphere, featuring presentations from world-leading ocular melanoma experts and consumers with lived experience of the cancer. Continuing Professional Development (CPD) hours through Optometry Australia were offered for the first time.

Videos from the meeting are available at:  
[masc.org.au/aoma-summit](https://masc.org.au/aoma-summit)



#### More information

[masc.org.au/aoma-summit](https://masc.org.au/aoma-summit)



#### Australasian Merkel Cell Carcinoma Interest Group

The Australasian Merkel Cell Carcinoma Interest Group (AMIGOs) is a network of specialists across the globe working to advance the treatment and care of patients with Merkel cell carcinoma through clinical trials, basic and translational research.

AMIGOs was formed in 2017 and includes clinicians and researchers representing medical oncology, radiation oncology, surgical oncology, pathology, genetics, imaging and laboratory-based research, and consumer advocates. The group is chaired by Dr Wen Xu, a medical oncologist from Brisbane.

#### Yearly update

During the year, AMIGOs met to develop ideas for new Merkel cell carcinoma trials, review grant opportunities, and report on Merkel cell carcinoma trials in the Melanoma and Skin Cancer Trials portfolio.



## AMIGOs

Australasian Merkel Cell Carcinoma  
Interest Group

#### More information

[amigos.org.au](https://amigos.org.au)



# Discipline-Specific Advisories

Melanoma and Skin Cancer Trials Discipline-Specific Advisories are forums for researchers, clinicians, and patients to share ideas and drive progress to improve how melanoma and skin cancer is prevented, diagnosed, and treated.

Our Discipline-Specific Advisories welcome clinicians and researchers from a range of specialities and disciplines. We aim to boost Australia-wide engagement, representation across disciplines, and to encourage clinical research concepts in priority areas, and engage with our international research partners on opportunities to collaborate. We currently have 268 Discipline-Specific Advisory members.

## Yearly update

During the year, Melanoma and Skin Cancer Trials facilitated 20 Discipline-Specific Advisory meetings. The outcomes of these meetings included:

- Melanoma and Skin Cancer Trials portfolio updates
- Discussion on areas of unmet clinical research needs from a range of disciplines and specialties
- Opportunities to engage early to mid-career researchers in trial concept development and our scientific events
- Peer review and feedback for new research proposals prior to endorsement by Melanoma and Skin Cancer Trials
- Delivery of two Concept Development Workshops with input and support from our Consumer Advisory Panel, Cancer Australia National Technical Services, early to mid-career researchers and staff
- Contribution to Pharmaceutical Benefits Advisory Committee Commentary highlighting medical needs of melanoma and skin cancer patients

## More information

[masc.org.au/discipline-specific-advisories/](https://masc.org.au/discipline-specific-advisories/)



<b>Dermatology</b>	Co-Chair - Prof Pascale Guitera Co-Chair - Prof Nikolas Haass
<b>Medical Oncology</b>	Chair – Dr Wen Xu Deputy Chair – Dr Miles Andrews
<b>Radiation Oncology</b>	Chair – Prof Angela Hong Deputy Chair – A/Prof Tim Wang
<b>Surgical Oncology</b>	Chair – Dr John Spillane
<b>Skin Cancer</b>	Chair – Prof Kiarash Khosrotehrani Deputy Chair – Dr Rahul Ladwa
<b>Nursing, Allied Health, Public Health and Primary Care</b>	Chair – Prof David Whiteman Deputy Chair – Prof Monika Janda





# Current research

## Recruiting trials

Trial No.	Trial Name	Trial Official Title	Principal Investigator	Lead Site	Sponsor / Coordinating Centre	Funding
10.17	GoTHAM	A phase Ib/II study of combination Avelumab with peptide receptor radionuclide therapy or conventional fractionated radiotherapy in patients with metastatic Merkel cell carcinoma	Prof Shahneen Sandhu	Peter MacCallum Cancer Centre, VIC	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Medical Research Future Fund – Low Survival Cancers and Diseases</li> <li>Merck Healthcare</li> </ul>
03.18	I-MAT	A randomised, placebo-controlled, phase II trial of adjuvant Avelumab in patients with stage I-III Merkel cell carcinoma	Dr Wen Xu	Princess Alexandra Hospital, QLD	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Medical Research Future Fund – Rare Cancers, Rare Diseases and Unmet Need</li> <li>Merck Healthcare</li> </ul>
02.18	MelMarT-II	A phase III, multicentre, multinational randomised control trial investigating 1 cm v 2 cm wide excision margins for primary cutaneous melanoma	Prof Michael Henderson (Aus) Prof Marc Moncrieff (UK)	Peter MacCallum Cancer Centre, VIC	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>National Health and Medical Research Council – Project Grant</li> </ul>
07.17	Uveal Melanoma Registry	Uveal Melanoma Registry (A Prospective Natural History Study in Uveal Melanoma)	Prof Anthony Joshua	St Vincent's Hospital, NSW	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Pulse Inframe</li> <li>Bristol Myers Squibb</li> </ul>
14.20	SOCRATES	Statins and progression of Coronary atherosclerosis in melanoma patients Treated with checkpoint inhibitors	Prof Stephen Nicholls	Monash Health, VIC	Monash University, Monash Victorian Heart Institute, and Melanoma and Skin Cancer Research Centre	<ul style="list-style-type: none"> <li>Medical Research Future Fund – Clinical Trials and Cohort Studies</li> </ul>
01.21	SiroSkin	Trial of sirolimus cream in organ transplant recipients to prevent skin cancer	Prof Kiarash Khosrotehrani	Prince Charles Hospital, QLD	Monash University / Melanoma and Skin Cancer Research Centre	<ul style="list-style-type: none"> <li>Medical Research Future Fund – Rare Cancers, Rare Diseases and Unmet Need</li> </ul>

## Trials in start-up

Study No.	Study Name	Study Official Title	Principal Investigator	Lead Site	Sponsor / Coordinating Centre	Funding
05.21	BETTER	Bevacizumab and immune checkpoint inhibitors plus hypofractionated stereotactic radiotherapy for the treatment of symptomatic melanoma brain metastases	Dr Malaka Ameratunga A/Prof Tim Wang	Alfred Hospital, VIC	Monash University / Melanoma and Skin Cancer Research Centre	<ul style="list-style-type: none"> <li>Australian Skin Cancer Foundation</li> </ul>

## Active trials closed for recruitment

Trial No.	Trial Name	Trial Official Title	Principal Investigator	Lead Site	Sponsor	Funding
02.19	IMAGE	Melanoma surveillance photography to improve early detection of melanoma in very-high and high risk patients	A/Prof Victoria Mar	Alfred Hospital, VIC	Monash University / Melanoma and Skin Cancer Research Centre	<ul style="list-style-type: none"> <li>Medical Research Future Fund - Targeted Health System and Community Organisation Research Grant Opportunity</li> </ul>
01.12	EAGLE FM	Evaluation of groin lymphadenectomy extent for metastatic melanoma – A randomised phase III trial to evaluate survival, morbidity, and quality of life	Prof Andrew Spillane	Royal North Shore Hospital, NSW	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Cancer Council NSW</li> <li>Friends of the Mater Foundation</li> </ul>
03.12	MelMarT (Pilot)	A phase III, multicentre, multinational randomised control trial investigating 1 cm v 2 cm excision margins for primary cutaneous melanoma	Prof Michael Henderson (Aus) Prof Marc Moncrieff (UK)	Peter MacCallum Cancer Centre, VIC	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Cancer Council NSW</li> <li>Friends of the Mater Foundation</li> </ul>

## Trials with completed follow-up

Trial No.	Trial Name	Trial Official Title	Principal Investigator	Lead Site	Sponsor	Funding
01.15	CHARLI	A phase Ib/II trial of Ipilimumab-Nivolumab-Denosumab and Nivolumab-Denosumab in patients with unresectable stage III and IV melanoma	Prof Shahneen Sandhu	Peter MacCallum Cancer Centre, VIC	Peter MacCallum Cancer Centre	<ul style="list-style-type: none"> <li>Bristol Myers Squibb</li> <li>Amgen</li> </ul>
02.12	RADICAL	A randomised controlled multicentre trial of imiquimod versus radiotherapy for lentigo maligna when staged surgical excision with 5 mm margins is not possible, is refused, or fails	Prof Pascale Guitera	Melanoma Institute Australia, NSW	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Cancer Australia Priority-driven Collaborative Cancer Research Scheme Project Grant, and philanthropic funding</li> </ul>
01.09	RTN2	A randomised trial of postoperative radiation therapy following wide excision of neurotropic melanoma of the head and neck	A/Prof Matthew Foote	Princess Alexandra Hospital, QLD	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Cancer Australia Priority-driven Collaborative Research Scheme Project Grant</li> </ul>
01.07	WBRTMel	Whole brain radiotherapy following local treatment of intracranial metastases of melanoma – A randomised phase III trial	Prof Gerald Fogarty	St Vincent's Hospital, NSW	Melanoma and Skin Cancer Trials	<ul style="list-style-type: none"> <li>Cancer Australia Priority-driven Collaborative Research Scheme Project Grant</li> </ul>

## Publications

Lee, T., et al. Leg Lymphoedema After Inguinal and Ilio-Inguinal Lymphadenectomy for Melanoma: Results from a Prospective, Randomised Trial. *Annals of Surgical Oncology*. 2024; 31(6); 4061–4070. <https://doi.org/10.1245/s10434-024-15149-4>

Russell, M., et al. Accuracy of PET/CT in the diagnosis of pelvic lymph node metastases in melanoma: A subgroup analysis of the evaluation of groin lymphadenectomy extent for metastatic melanoma (EAGLE-FM) trial. *European Journal of Surgical Oncology*. 2024; 50; 107397. <https://doi.org/10.1016/j.ejso.2023.107397>

Orme, S., Moncrieff, M. A Review of Contemporary Guidelines and Evidence for Wide Local Excision in Primary Cutaneous Melanoma Management. *Cancers*. 2024; 16(5); 895. <https://doi.org/10.3390/cancers16050895>

Pinkham, M., et al. Randomised Trial of Postoperative Radiation Therapy After Wide Excision of Neurotropic Melanoma of the Head and Neck (RTN2 Trial 01.09). *Annals of Surgical Oncology*. 2024; 31; 6088–6096. <https://doi.org/10.1245/s10434-024-15569-2>

Pinkham, M., et al. ASO Author Reflections: The Role of Postoperative Radiation Therapy Following Wide Excision of Neurotropic Melanoma of the Head and Neck: Now and into the Future. *Annals of Surgical Oncology*. 2024; 31; 6118–6119. <https://doi.org/10.1245/s10434-024-15569-3>

Ng, C., et al. What matters most to people with metastatic uveal melanoma? A qualitative study to inform future measurement of health-related quality of life. *Melanoma research*. 2024; 34(3); 248–257. <https://doi.org/10.1097/CMR.0000000000000961>

## Conference presentations and podcasts

Vu, L., et al. 'Recruitment Results from the IMAGE Trial: Estimating the Proportion of Australians Eligible for Melanoma Surveillance Photography'. EADV Congress 2023, Berlin, Germany, 11-14 October 2024 [Poster presentation].

Xu, W., 'MASC 03.18 / TROG 21.01 IMAT: Immunotherapy Merkel Adjuvant Trial'. TROG Cancer Research Annual Scientific Meeting HNS subspecialty session, Newcastle, Australia, 15 March 2024 [Remote Oral Presentation].

Hong, A., 'A randomised, controlled, multicentre trial of imiquimod vs radiotherapy for lentigo maligna', American Society of Clinical Oncology Annual Meeting, Chicago, USA, 1 June 2024 [Oral presentation].

Mamen, J., et al. 'MelMarT-II and MSLT-II Investigator Meeting', Society of Surgical Oncology 2024 International Conference on Surgical Cancer Care, Atlanta, USA, 22 March 2024 [Conference presentation].

Russell, M. 'Accuracy of PET/CT in the diagnosis of pelvic lymph node metastases in melanoma: A subgroup analysis of the evaluation of groin lymphadenectomy extent for metastatic melanoma (EAGLE-FM) trial'. 42nd Congress of the European Society of Surgical Oncology, Florence, Italy, 27 October 2023 [Oral presentation].

Joshua, A., 'Uveal melanoma registries: Seeking to collate, catalogue and curate'. 2024 Australasian Ocular Melanoma Alliance (AOMA) Summit. 15 June 2024. <https://www.youtube.com/watch?v=yaUgoMnEZVQ> [Remote Oral Presentation].

Xu, W., Kok, D., Goh, M. 'Episode 12: Merkel Cell Carcinoma', Spot On Podcast by MSCAN, 24 August 2023. Published on <https://mscan.org.au/learning-hub/podcasts/series-4-less-common-skin-cancer/merkel-cell-carcinoma/> [Podcast].

Mason, J., 'Episode 13: Being diagnosed with Merkel Cell Carcinoma', MSCAN podcast episode, 31 August 2023. Published on <https://mscan.org.au/learning-hub/podcasts/series-4-less-common-skin-cancer/patient-story-mcc/> [Podcast].

## Events

### Concept Development Workshops

This year Melanoma and Skin Cancer Trials held a Concept Development Workshop on 22 March 2024 at the School of Public Health and Preventive Medicine, Monash University where our research centre is located. The Melbourne event was attended by 28 researchers in-person and online, including Board members, DSA members, our Consumer Advisory Panel Chair, Alison Button-Sloan, and other DSA members. Research concepts explored skin cancer prevention strategies and therapeutic options for non-melanoma skin cancers including radiotherapy, immunotherapy and chemotherapy.

Early to mid-career researchers received grant writing tips, an update from NHRMC representatives and feedback on the proposals from Carrie-Anne Ng (CQUEST) and Lutfun Hossain (CREST) from the Cancer Australia National Technical Services. Dr Annie Wong from Wellington presented a snapshot of the clinical trial landscape in New Zealand.

A second Concept Development Workshop with a focus on ocular melanoma was held in May and was attended by 23 healthcare professionals, researchers, our Consumer Advisory Panel Chair and Deputy Chair (Alison Button-Sloan and Michelle

Taylor), patient advocate Susan Vine and consumers. Melanoma and Skin Cancer Trials has plans to progress grant submissions towards improving the management and diagnosis of this rare and aggressive cancer in 2025.



### AOMA Virtual Summit

The Australasian Ocular Melanoma Alliance (AOMA) Virtual Summit has grown considerably since the first event in 2019, becoming the biggest ocular melanoma meeting in the Southern Hemisphere. This year's event, held on 15 June 2024, brought together leading figures in ocular melanoma with 4 international speakers and 15 Australian speakers, to share the latest findings with healthcare professionals, researchers and consumers.



#### Event Highlights

- **412** registrations (two-fold increase from last year)
- **226** attendees on the day
- **123** optometrists obtained Continuing Professional Development hours from Optometry Australia for the first time
- **2,489** page views of the AOMA Summit webpage
- **7** session videos uploaded to YouTube
- Combined YouTube views of over 204,000 for 7 videos within 5 weeks of upload
- Registrations from 21 countries including Australia, USA, UK, Canada, New Zealand, Ireland, the Netherlands, Slovenia, Sweden, Italy and Germany
- 56 social media posts across Twitter, LinkedIn, Facebook and Instagram

#### More information and video recordings

[masc.org.au/aoma-summit/](https://masc.org.au/aoma-summit/)





# Financial statement

Melanoma and Skin Cancer Trials Limited  
ABN 70 626 908 512

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2024

	2024 \$
Revenue	178,825
<b>Total Revenue</b>	<b>178,825</b>
Administration	918
Conferences and papers	-
Information technology, including subscriptions	6,607
Insurance	3,058
Printing	7,283
Promotions	8,052
Sponsorship - ASM	1,750
Event management	5,355
Trial support services - RADICAL	11,000
Travel	2,330
<b>Total Expenses</b>	<b>46,353</b>
<b>ASSETS</b>	
<b>CURRENT ASSETS</b>	
Cash and cash equivalents	486,322
Accounts receivable	5,440
<b>TOTAL CURRENT ASSETS</b>	<b>491,762</b>
<b>TOTAL ASSETS</b>	<b>491,762</b>
<b>LIABILITIES</b>	
<b>Accrued expense</b>	4,256
<b>TOTAL LIABILITIES</b>	<b>4,256</b>
<b>NET ASSETS</b>	<b>487,506</b>
<b>EQUITY</b>	
Retained earnings	487,506
<b>TOTAL EQUITY</b>	<b>487,506</b>

The full Annual Financial Report and Directors Report for the year ending 30 June 2024, audited by Charterpoint, are available at [www.acnc.gov.au/charity](http://www.acnc.gov.au/charity)

# Acknowledgments

Melanoma and Skin Cancer Trials recognises and thanks the many organisations that support our research. Their support has ensured our research continues to improve melanoma and skin cancer outcomes.

## Academic Affiliate



## Australian Funding Agencies and Institutions



## Industry Partners



## Pro Bono Suppliers



Jenny Dawes, Lawyer



## Get involved



### Become a Member

Melanoma and Skin Cancer Trials membership is open to anyone who has an interest in our melanoma and skin cancer clinical trials. Applying is simple and free.

As a Melanoma and Skin Cancer Trials Member, you will join our network of 3,019 healthcare professionals, researchers and consumers who are committed to conquering melanoma and skin cancer through clinical trials. Your membership will also influence our Federal Government support and help us to expand our work that is improving how doctors prevent, diagnose, and treat melanoma and skin cancer.

### Become a Member:

[masc.org.au/membership](https://masc.org.au/membership)



### Become a corporate partner

Corporate support can take many forms. We work to ensure your partnership goals are met and that together, we produce an outcome that has real-world impact. Some ways in which we can work together include:

- Delivering new initiatives to improve the lives of melanoma and skin cancer patients
- Sponsorship of scientific events
- Support for a new or existing clinical trial
- Operational assistance through a pro bono service or product

### Contact us to discuss partnership:

[hello@masc.org.au](mailto:hello@masc.org.au)



### Participate in a clinical trial

Clinical trials are only possible thanks to the patients who agree to take part in research. Trials are essential for discovering new treatments for melanoma and skin cancer and they provide access to breakthrough medical treatments that may benefit patients with these cancers. Eligibility criteria apply.

### Learn more:

[www.masc.org.au/participate](https://www.masc.org.au/participate)



## Our donors



**FOUNDATION  
CLUB 100**

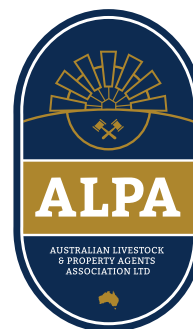
### Celebrating major donors

Foundation Club 100 celebrates our first 100 major supporters who donate \$500 or above. These important donors are helping us to expand our clinical trials so that more Australians can benefit from medical advances in melanoma and skin cancer. We still have memberships available, so please consider joining Foundation Club 100 today.

We sincerely thank the following people who have joined Foundation Club 100:

Aileen Boyd-Squires  
Timothy Buckley  
Gabrielle Byars  
Matthew Cook  
Justin Ganly  
Stephen Kerr  
Stephen Longley  
Prof Victoria Mar  
Mr Richard Martin  
Anton Middendorp  
David Morgan OAM  
Ian Morrison  
Jane Morrison

Prof Mark Shackleton  
Prof Andrew Spillane  
Dr Robert Teunisse  
Mary Tsouvalakis  
Sharon Van Buerle  
Margaret Whelton  
Michelle Taylor  
Fiona Beale  
Heidi Wieland  
Craig and Heather Thomas  
Peter Hartnet  
Noel Henderson  
John and Jackie Robson



### Australian Livestock and Property Agents Association

Melanoma and Skin Cancer Trials was chosen by the Australian Livestock and Property Agents Association (ALPA) as its 2024 charity. ALPA is the national peak industry body for livestock and property agents and represents over 1,200 agency businesses across Australia. Collectively this group plays an important role in livestock, wool, merchandise and rural property sales and marketing. ALPA Members handle more than 97% of rural agency business Australia-wide.

By 30 June 2024, ALPA had already raised \$61,350 for Melanoma and Skin Cancer Trials through a charity auction at its National and NSW Young Auctioneers Dinner in Sydney on 21 March 2024. Two more charity auctions will be held later in the year at ALPA events in Brisbane and Warrnambool.

**“There wouldn’t be a person within our organisation who hasn’t been touched by skin cancer or melanoma - we are all exposed to the sun”**

Peter Baldwin  
ALPA CEO



**Join Foundation Club 100:**  
[masc.org.au/foundation-club-100](https://masc.org.au/foundation-club-100)





## Donate



**Your donation will directly support our clinical trials**

### Help us to conquer melanoma and skin cancer

Every year, over 18,000 Australians are diagnosed with invasive melanoma and around 1,300 Australians will lose their life to this deadly cancer that can affect young and old.

Australian researchers have led the way in developing treatments for melanoma, and the last decade has seen remarkable breakthroughs. Clinical trials have played a critical part in this success.

The first wave of industry-driven innovation in melanoma and skin cancer treatments led by major pharmaceutical companies has receded. Although we now have a range of new therapies, we are still discovering how to optimally use these new treatments for patients and that is why our clinical trials are so important.

### Giving Australians access to clinical trials

Thanks to the work of Melanoma and Skin Cancer Trials over the past 25 years, more than 8,000 patients have accessed clinical trials that may have improved their quality of life, prevented them from undergoing debilitating treatments, and for some, given them more time with loved ones.

### More funding is urgently needed

High-quality clinical trials require significant and sustained financial investment to deliver real-world results. As a not-for-profit organisation, Melanoma and Skin Cancer Trials cannot rely on government funding alone. We need your help to improve the lives of melanoma and skin cancer patients.

### Donate to clinical trials

Your donation will directly support our clinical trials. You will be helping our world-leading researchers to improve melanoma and skin cancer outcomes, and to study innovative combined cancer treatments. Most importantly, you will be making a difference to the lives of melanoma and skin cancer patients across Australia and New Zealand.

#### Donate today at:

[masc.org.au/donate](https://masc.org.au/donate)



### Donate to Ocular Melanoma Research

Ocular melanoma is a rare but often lethal form of melanoma that affects the eye. Melanoma and Skin Cancer Trials commenced fundraising to support its ocular melanoma research and advocacy in late May 2024. Donations will help our world-leading researchers to improve ocular melanoma outcomes, study innovative treatments, and support clinical trials that improve the success of immunotherapy and help patients to retain vision.

#### Donate today at:

[masc.org.au/donate-to-ocular-melanoma-research](https://masc.org.au/donate-to-ocular-melanoma-research)



## Melanoma and Skin Cancer Trials

*Formerly Australia and New Zealand Melanoma Trials Group*

ABN: 70 626 908 512

553 St Kilda Road  
Melbourne VIC 3004  
Australia  
Ph: +61 3 9903 9022  
E: [hello@masc.org.au](mailto:hello@masc.org.au)  
W: [masc.org.au](http://masc.org.au)

## Stay in touch

Subscribe to our eNews: [masc.org.au/e-news](http://masc.org.au/e-news)

## Join the conversation



@Melanoma and Skin Cancer Trials



@Melanoma and Skin Cancer Trials - MASC Trials



@masc\_trials



@MASC\_Trials



@AOMA\_MASC



@AMIGOs\_MASC



@MASCTrials



**Melanoma and Skin Cancer Trials**  
Limited