

Prince of Wales  
Hospital  
Foundation

POWHF

# Saving Lives

#23 AUTUMN 2022

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## A message from the General Manager

Over the past two years, I have been exceptionally proud of all our hospital staff who have shown their ongoing commitment to excellence in patient care through courage, resilience, and dedication. The Foundation and the many in-kind donations from the Foundation's corporate friends made a real difference for our staff during this difficult time and I cannot thank them enough. From the lovely chocolates to the Kombucha drinks – all the donations were incredibly meaningful to our staff and provided an opportunity to show our gratitude for our staff's hard work and dedication. I look forward to the ongoing support from the Foundation and I thank each and every donor and partner of the Foundation for their generosity.



## Patient Story

Like most ovarian cancer patients, Associate Professor Siobhan O'Sullivan had no symptoms and was seemingly the picture of health. When she finally started to feel 'out of sorts', a blood test and a CT scan revealed the grim diagnosis.

**“Ovarian cancer was the last thing on my mind and at the time I did not completely understand the seriousness of my diagnosis.**

To this day, it is still difficult for friends and family to really appreciate that I have a disease that cannot be comprehensively treated. I often wonder how

long it will be until I am no longer healthy enough to live independently. I also wonder about my death. Will it be quick? Will I suffer? My life is very much framed around ovarian cancer.”

Even though Siobhan's cancer is terminal, she is trying to make the most out of her time.

“I am raising awareness about ovarian cancer, connecting with people and I still have a sense of humour. I have also set up an award for scholars undertaking research in the field of Animal Studies, one of my fields of research. So, my life has changed profoundly. Ovarian cancer is a horrible disease. We are urgently in need of ways of detecting and treating the disease. Ovarian cancer has fallen behind many other cancers in terms of



survivability, and we need to turn that around. Solutions require research and research requires funds. We need the community to be dismayed that women still face such a deadly cancer and we need to turn that dismay into action. Research is the only way we can improve outcomes for women with ovarian cancer. As an academic at UNSW Sydney I have dedicated my life to research. I believe in the power of research to solve problems and make the world a better place.”

**It's been almost 18 months since Siobhan's diagnosis, but she says that "in some ways it feels like I was diagnosed just yesterday. But in other ways it seems like my entire life has been about cancer."**

“It is hard to remember a time when I was cancer free. But I am grateful for the time I have. That time affords me the ability to do things that are important to me, and that includes raising awareness about ovarian cancer, educating others about the disease, and advocating for funds and research so other women will not have to go through what I have been through.

“Raising awareness about ovarian cancer and the urgent need for funds, research, and solutions, brings great meaning to my life and energises me to keep going. I know that it is too late for me. But it is not too late for future generations. Feeling as though I am doing something to make things better for other women, in the future, helps me cope.”

**To read the full story, please visit [powhf.org.au](http://powhf.org.au)**

## Clinician in the Spotlight

**Dr Praveen Indraratna is a general cardiologist who sub-specialises in cardiac imaging**

What do you do outside of work? Do you have a hobby or another passion?

I spent 12 months in Canada recently, and while I was there I got into photography. I'm not an expert in it by any means, but I just like taking nice photos with my basic camera or smartphone, particularly if I'm travelling.

I also got into snowboarding while I was there, but I'm not sure how much I'll get to do that in Australia!

How do you unwind after a long day at work?

Usually by catching up with friends and family, but the pandemic has put a lot of those plans on hold. For exercise I like to go cycling, particularly after work on these long summer days.

What is your favourite restaurant in Sydney?

You might expect me to name a classy fine dining establishment, but honestly, it's El-Jannah, I'm a big fan of Lebanese food!

What is the best part of your day?

Telling patients who were admitted to hospital when they were very unwell or unstable, that they are now well enough to go home.

What is your favourite patient moment?

The first time I was involved in a resuscitation (CPR). I was a very junior doctor

and all I knew how to do was chest compressions to the beat of “Staying Alive” by the Bee Gees.

But CPR in the hospital often takes many people - junior and senior doctors, nurses and orderlies, all working together and it's amazing when a patient is successfully resuscitated after their heart has stopped.

And after we resuscitated this patient, the first thing he said to me was “sorry doc, were you saying something? I think I just dozed off for a second...”

What is your biggest challenge at work?

In general, cardiology is full of life and death decisions. Many of our patients have life threatening conditions, but even the medications we use to treat cardiac conditions can be dangerous.

**“So, you have to trust yourself, your knowledge and your instincts.”**

Funniest faux pas?

A few years ago, I was at the mall, and my wife called and asked me to buy her a particular style of belt. I went into the first shop I saw and complained to the staff that all the belts they had seemed to be too big. They politely informed me that I had wandered into a “plus-size” store.



# Antimicrobial resistance

## Research into the biggest threats to human health

We recently caught up with Prince of Wales Hospital Infectious Disease Specialist Dr Kristen Overton and spoke to her about her research into antimicrobial resistance (AMR) which threatens the effective prevention and treatment of an ever-increasing range of infections.

How did you choose the topic of AMR for your research? Was there a personal experience or just general interest with the topic?

My motivation for my research has been a longstanding interest in AMR and global health, initially triggered by my experiences working in a refugee camp on the Thai-Myanmar border. I was completing my medical elective at the Mae Sot clinic in early 2010 where I sadly witnessed children and adults dying from preventable or treatable infectious diseases. This strengthened my interest in the social determinates of health and in particular the impact of social inequality on the outcomes of patients with these preventable and treatable infectious diseases. These patients were dealing

with a lack of access to quality healthcare to be able to treat these diseases. Sadly patients often die because of the limited treatment options available. In order to examine these issues, I chose to focus on India, where the emergence and spread of AMR is a growing public-health challenge.

**AMR is considered one of the biggest threats to human health by the WHO. What is being done to address this?**

In May 2010, the 68th World Health Assembly adopted the Global action plan on antimicrobial resistance (GAP), mandating that each member state develop an AMR national action plan by May 2017. The GAP sets out five strategic objectives to address AMR centred around surveillance (of resistance and



antimicrobial use), stewardship (to optimise antimicrobial use), education, public awareness, infection prevention overseen by national governance structures, and development of new antimicrobials, vaccines and diagnostics. Global action to counteract AMR gained further momentum in September 2016 when, for the first time, the United Nations (UN) member states unanimously committed to a collaborative approach to tackle AMR and support the GAP mandate. However, there is concern that the current COVID-19 crisis will decrease the momentum that was building.

**What are your hopes for the future around AMR or AMR research?**

The greatest impact on AMR will be achieved by introducing policies that address social inequality, access for all to appropriate treatment with the right antimicrobials, and adequate healthcare and sanitation...

To read the full interview, please visit [powhf.org.au](http://powhf.org.au)





## Emerging NUM Program

The Emerging NUM Program is a 12-month long program preparing nursing staff with leadership skills for roles in management. The Prince of Wales Hospital Foundation funds the program to help nursing staff enhance and expand their leadership skills through participating in regular

workshops. Nurses have the opportunity to shadow senior leaders in the organisation by working alongside Nurse Managers or Nurse Unit Managers. Learning objectives include compassionate leadership attributes and behaviours, principles of risk management, quality and culture framework facilitating effective patient flow, collaboration between systems, individuals, departments and more.

## Dry July

Join the Prince of Wales Hospital Foundation Dry July team and forgo alcohol for the month of July to fund projects that support cancer patients during and after treatment at Prince of Wales Hospital.

This year's Dry July donations will fund a Clinical Nurse Consultant for the reproductive clinic addressing infertility - one of the most distressing adverse consequences of successful cancer treatment.

To date, oncofertility care in the survivorship period hasn't been integrated well into standard care

leading to a significant number of cancer patients not having fertility preservation at diagnosis or in survivorship.

The Clinical Nurse Consultant will be providing patients of reproductive age with information about the risk of reproductive harm and the potential options for fertility preservation.

Visit the website below to find out more or to join the Prince of Wales Hospital Foundation Dry July team.

[dryjuly.com/POW](http://dryjuly.com/POW)

**DRY JULY**  
FOUNDATION



# Genetic Research Grant

## Genetics Referral Pathway for Patients with Young-onset Desmoid Tumours

In 2021, the Foundation funded a research project aimed to streamline the genetics referral pathway for patients with young-onset desmoid tumours. Desmoid tumours are rare, noncancerous growths that develop in connective tissues of the abdomen or other parts of the body, which are most commonly diagnosed in young females. Most desmoid tumours are sporadic (an isolated occurrence), but some occur as part of an inherited syndrome called Familial Adenomatous Polyposis (FAP), which is also linked to a high risk of developing bowel polyps and cancer. Due to these other cancer risks, people who develop desmoid tumours at a young age are recommended to undergo genetics assessment to clarify if they need bowel cancer screening. The current process to distinguish a person with an isolated desmoid tumour from



those with FAP is lengthy and expensive because it requires the patient to have additional appointments and undergo extra tests. As most patients are ultimately proven to have a sporadic desmoid and do not need bowel screening, identifying which patients are most likely to benefit from a genetics assessment will ease the burden for both patients and staff. This project is a collaboration between the Hereditary Cancer Centre and Anatomical Pathology staff, led by Tanya Dwarthe, Dr Trent Davidson and Dr Milita Zaheed and aims to

develop a new investigation to identify if a desmoid tumour is likely to be sporadic at the time of diagnosis. They have identified 40 individuals as suitable for genetics assessment, with the majority being referred and invited to participate in the pilot study. The team has also sourced suitable tissue samples and antibodies to optimise and validate the effectiveness of their investigation. The team is expected to deliver a technical paper detailing the investigation and, if successful, this research project will provide the basis for a proposed modification to the genetics referral pathway.

## Our new look

### Introducing the new Prince of Wales Hospital Foundation brand

The Prince of Wales Hospital Foundation has recently launched a new brand to reflect our evolution as an organisation, our shift in organisational priorities and our new values and culture. The new brand helps us to communicate better who we are and what we do so we can extend our reach and raise as much funds as possible for our community's health needs. The Foundation's mission to ensure the community benefits from a thriving scalable healthcare service, supported by world-leading research and innovation remains, because...

**We believe in a better tomorrow, supported by the people of today.**

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