

HSANZNG

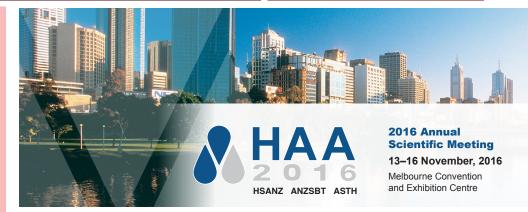
Haematology Society of Australia and New Zealan

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#### International Collaborations:

### THE COMMON LANGUAGE OF SCIENCE AND ONCOLOGY PRACTICE

Sandra Kurtin, PhDc, AOCN, ANP-C

Nurse Practitioner

The University of Arizona Cancer Center Assistant professor of Clinical Medicine Adjunct Clinical Assistant professor of nursing The University of Arizona | Tucson, Arizona

I had the great fortune of being invited as a visiting scholar by the HSANZ to be a part of the annual HAA meeting, held in Melbourne in November, 2017. I see myself as a lifelong consumer of science and innovation, exhausting at times, but so inspiring and rejuvenating at the same time. As a clinician, I truly love the gift of being invited into the day to day journey of a cancer patient, albeit without living that reality myself, a humbling gift. As visiting faculty do, I did my best to summarize my 32 years of clinical experience, scientific progress, and current scholarly thinking for my assigned topics: Clinical Management of Myeloma: A Master Class; Cancer Survivorship and Taking Care of the Caregiver, three areas of expertise and passion for me. Writing lectures is the best way to review current literature. Once reviewed, synthesizing the science and reflecting on my experiences with patients, caregivers and colleagues, then sharing that in a meaningful way is rejuvenating, renewing my passion for my work.

Multiple Myeloma (MM) research provides a model for innovation and scientific progress. The pace of this progress is staggering. Enhanced understanding of the pathobiology of MM, identification of vulnerabilities in the microenvironment and novel targets that can be exploited for therapeutic benefit, together with



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improved supportive care strategies, offer hope for a cure for some patients with newly diagnosed MM.<sup>1</sup> This work has led to new therapeutic agents, including the first monoclonal antibodies indicated for the treatment of MM.<sup>2</sup> A renewed endorsement of hematopoietic stem cell transplant (HSCT) as an important treatment option for eligible patients was discussed at HAA and again at ASH.<sup>3</sup> The challenge for clinicians, is how best to integrate and sequence these new therapies for individual MM patients, particularly when the bulk of treatment is administered in outpatient clinics or in the home. The shift toward continuous therapy in patients with relapsed disease has additional implications for the patient and their caregivers including financial concerns, adherence, and treatment fatigue.<sup>4</sup>

We expect the MM patient and their caregiver(s) to assume most of this care. The availability of a caregiver is pre-requisite to HSCT. Yet, in most cases, there is little formal training for the patient or their caregiver. We cannot do our work without the caregiver. Consider the training we as clinicians received prior to obtaining our license, the requirements to maintain our license,

and the continued exposure to continuing education. We expect a great deal from the patient and their caregiver without access to similar training. Most patients with MM are over the age of 65. The world population over the age of 65 is expected to reach 21% of the overall population in 2050, and will outnumber people age 15 or less for the first time in history. Greater than 40% of cancer survivors age>65 have more than 3 comorbid conditions. This implies that most caregivers will likely be of similar age to the cancer survivor and may have similar health concerns. Innovative strategies for patient and caregiver education and support are needed, including eHealth and mHealth technologies, patient and caregiver support groups, and continued partnering with advocacy groups.

Living after a diagnosis of cancer, being a cancer survivor, is a life changing event characterized by transition points and periods of vulnerability. Tailored approaches to cancer survivorship with consideration of the type of cancer, the age of the patient, the availability of resources, and prognosis is essential. The focus should

be on *LIVING* and maintaining the best possible level of wellness. Diet, exercise, modified screening for cancer, control of other co-morbid conditions, and for patients with active disease, integration of palliative and supportive care, will provide the best option to maintain or improve quality of life.

In addition to the lectures, I had the opportunity to meet with several small groups to discuss nursing practice, advanced practitioner practice, and the care of patients with Myeloma and Myeloproliferative disorders. I found the collegiality and comradery refreshing. The integration of the nursing and physician/scientist meeting into one venue fosters an atmosphere of collaboration and joint learning, something I believe will translate into improved patient care. Each of the nursing sessions were filled

with scholarly work presented by a cadre of nursing professionals and other health care providers such as an exercise physiologist, nutritionist, and social worker, emulating a collaborative approach to practice that most cancer programs employ. I look forward to working with these groups in the future.

To wrap up my trip, I had the pleasure of visiting several clinics and hospitals

including The Peter MacCallum Cancer Centre, The Royal Melbourne Hospital, and The Austin Hospital. Interacting with the staff in each of these facilities emphasizes the similarities we share in taking care of cancer patients. The last stop in my trip was to Sydney to meet with the HSANZ nursing group there and to present a MM Master Class. The enthusiasm in this group is palpable. I visited the Royal Prince Alfred and Lifehouse facilities and meet with staff there as well and then moved on to meet with the Dean of the School of Nursing at Sydney University, Professor Donna Waters, Professor Kate White, and Tracy King (my sponsor on this trip), to discuss my research focus. I am currently finishing up my PhD program. My dissertation is focused on the impact of a mHealth application on technology engagement, communicative health literacy and health self-management. I enjoyed meeting with several of the other PhD students during this visit. Nursing research and scholarly works provide a critical foundation for continued improvement in education and in patient care.





A busy trip filled with great conversation, scholarly thinking, laughter and collaborations. Despite the current political climate in the United States, there is a universal language of science. We are fortunate to share this language, translating this knowledge into meaningful interventions that improve the lives of patients is truly

a gift. I look forward to future collaboration with the HSANZ and with Sydney University School of Nursing. I want to thank the HSANZ and HAA and Tracy King and Sam Soggee and many others that made the trip possible and a great success.



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#### HAA 2016 DELEGATE REPORT

**by Kylie Sih** Royal Hobart Hospital, Tasmania.

### In November 2016 I had the pleasure of attending my first HAA at the Melbourne Convention and Exhibition Centre.

I was the grateful recipient of a travel grant from SANOFI Oncology to attend. Thank you so much to Sarah and the team at SANOFI for making it possible!

If you haven't been to a HAA meeting before, I can highly recommend it. With approximately 1400 delegates and 20 international speakers across multidisciplinary fields, HAA is a great place to network and learn from each other. I loved being able to choose from up to 7 streams of sessions, based on particular interest in the topics discussed.

The Nursing stream had a great line up, and I enjoyed learning more about rare myeloproliferative neoplasms (MPN's), and the experience of other centres treating haematological diseases in pregnancy. Considering how geographically wide spread we are in Australia, with many smaller centres hardly ever seeing unusual conditions, it is essential to share our knowledge and experiences to consistently aim for best practice for our patients.

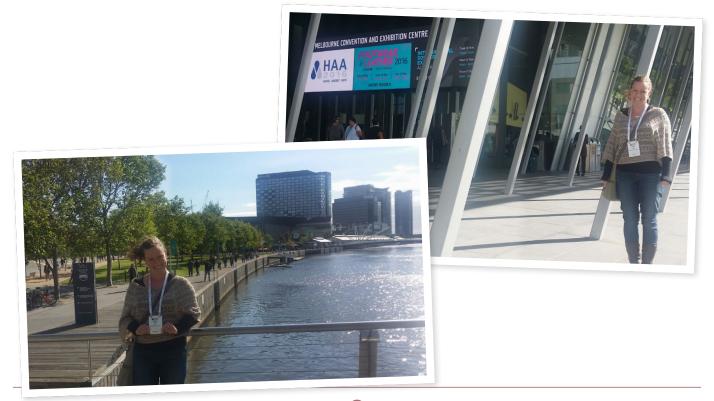
I have a particular interest in apheresis, and at HAA I was pleased to be involved in some initial discussions in forming an Apheresis Special Practice Network. Apheresis operators from all over Australia gathered

over good food, wine and coffee, shared some stories and laughed. Apart from the fun, being gathered all in one place provided a rare opportunity to discuss and plan our hopes for the future of an apheresis group and how we can work together to form a group that will provide support to all Australian apheresis operators.

It was particularly interesting hearing about the Myeloma SPN and the app they have developed for communication and support for nurses with Myeloma patients. It was great to see that we may not in fact have to reinvent the wheel (!) when creating communication and support tools for our interest group.

It was great to be reminded that we are not all alone in our little Haem/Onc unit in Hobart! I can genuinely say that I feel better supported now, better equipped, and more confident in my skills and knowledge. I am hopeful for the future of haematology nurses and apheresis operators feeling a greater sense of being part of a larger team and therefore more inspired and confident in our practice.

#### Thanks HAA!





### BEST ORAL PRESENTATION AND BEST POSTER PRESENTATION WINNERS

#### Rosemary Hoyt

The standard of both oral presentations and posters was very high at the HAA 2016 meeting. Topics were wide ranging, very informative and prompted great discussions. Many people came away thinking about how they could instigate such activities into their own practice setting.

The winner of the oral presentation was Anne Krishna from Mid Central DHB, Palmerston North Hospital, New Zealand. The title of her presentation was, 'Facilitating effective transition from secondary to primary care: Trial of a new nurse-led model for haematology patients post cancer treatment'. Anne profiled the development of a nurse-led model and care plan for haematology patients at the end of their treatment.

The winner of the poster presentation was Mingdi Xie, from the Royal Melbourne Hospital, Melbourne, Australia. The title of his poster was, 'Quality performance indicators for the clinical management of acute leukaemia: a single centre experience.







43<sup>RD</sup> ANNUAL MEETING OF THE EUROPEAN SOCIETY FOR BLOOD AND MARROW TRANSPLANTATION

26-29 March 2017 • Marseille, France

#### SYDNEY NEWS

#### **David Collins**

#### Sydney would like to welcome you to HAA 2017.

The new Sydney conference centre plays host to this year's HAA, with planning underway. The conference runs from Sunday 29 October until Wednesday I November. The call for abstracts will be going out in April, so get thinking about your presentations and abstract now. There will be a session for those nurses who have not presented before but would like to give it a try. If your abstract is accepted, we will link you up with a mentor who will help you to prepare your presentation. Our international nurse speaker this year is Dr Beth Faiman, who works as a Haematology Nurse Practitioner in Cleveland Ohio. Beth works with a broad range of patients with haematological diseases and has won many awards for her work. She is an active author, presenter and educator and will be sharing her knowledge with us. We look forward to her joining us for the conference. Details of other speakers for the nurse's programme will be announced soon. The Special Practice Networks will also be holding group specific meetings during the conference.

Please take the time to visit the website <a href="www.haa2017.com">www.haa2017.com</a> and have a look at the plans; you can also register to receive update emails. We look forward to welcoming you in October.









#### **HSANZNG**

#### A WORD FROM THE PRESIDENT



I would like to start by wishing you a happy new year and welcoming you to this edition of the newsletter. This edition of the newsletter is later than normal due to HAA being in November last year. I would like to congratulate the Victoria team for the excellent programme that they put together; there are many reports in this edition. HAA is our chance to all get-together, learn, interact, present our work, and more importantly socialise with each other. This year we saw more subgroups happen within the conference, with the Myeloma, MPN/MDS, and Apheresis groups all holding meetings, strengthening membership of the groups and linking with colleagues in other parts of the country.

The international speaker for the nurses was Sandy Kirten, who did some extremely informative and thought provoking talks. Some of you would have been lucky enough to have caught up with Sandy when she did a mini tour of Melbourne and Sydney. HSANZ NG was very grateful for all the hard work that Sandy put in.

One disappointing thing that came out of HAA was the lack of nurses who completed the online evaluation of the conference. This evaluation does help us to plan the future conference and try to give our members what they want in the following years. If you have subjects that you would like to see covered at HAA, please contact me nurses@hsanz.org.au with your suggestions.

I recently had the need to sort through some old letters and came across the letter that welcomed me to HSANZ back in 2004, before we even had a nurses group, and the nurses only had a day at the conference. It is great to see how things have developed over the years, and I think our presence at HAA demonstrates how we have grown and will continue to grow. Nurses have a thirst for knowledge so that we can best help our patients, and I urge all our membership to engage with their local groups. Contact your local chair and offer your support in arranging and running HSANZ NG meetings. If you are going to enter an abstract for a conference, it is a good idea to get some practice. Ask your local chair if you can present your paper at a meeting. Not only is it good practice for you, but it is a way of informing other nurses in your area of what you are doing, you never know you may find someone to collaborate with you.

Our treasurer Gill Sheldon-Collins is retiring from her position on the committee. Gill has been a long-term member of the Committee, and I wish to convey my thanks to her on behalf of the group for all her past work. That does leave a space on the committee, so if you are interested in joining us, please contact me on <a href="mailto:nurses@hsanz.org.au">nurses@hsanz.org.au</a> for further details.

I am very keen to get feedback on how we as a group support you, what else do you want HSANZ NG to do, let me know. So with that I will once again wish you all the best for the New Year, please don't forget to send Rosie our newsletter editor articles for publication, remember this is another way of interacting with your peers.

#### **David Collins**

President HSANZ NG david.collins@health.nsw.gov.au



#### REGISTRATION NOW OPEN

#### **WELCOME**

Dear Colleague,

On behalf of the organising committee we would like to invite you to attend the 2017 Annual New Zealand Branch Meeting of the Haematology Society of Australia and New Zealand, which is being held at Waipuna Lodge on the 10th to the 12th of April. We have enjoyed putting the program for this meeting together and are confident that you will enjoy hearing the extremely high calibre international speakers who will be attending. The program kicks off with a morphology workshop on Monday. This is being led by Professor Barbara Bain who has authored many of the textbooks that we routinely turn to in day to day laboratory practice. The focus of the workshop will be interesting and difficult myelodysplasia and lymphoma, and the workshop will be an excellent opportunity to learn from a world renowned authority.

The main program begins on Tuesday. We are delighted to have Dr Wyndham Wilson, Cheif, Hematological Malignancies Therapeutics Section, Metabolism Branch at the National Cancer Institute in the U.S., and Professor Miles Prince, from the Peter MacCallum Cancer Institute in Australia, leading a plenary session on lymphoma, along with a selection of outstanding local speakers. In the nursing stream we have a strong academic programme that focuses on the provision of high quality nursing care to haematology patients. We are very grateful to all of our invited speakers, who will be bringing their collective experience and wisdom to the meeting.

The program also features all of the usual highlights of a HSANZ meeting including the David Heaton Memorial session for registrars and the Ash Symmans Memorial Morphology Quiz.

The social program includes Welcome Drinks and Nibbles on Monday evening, with guest speaker Dr David Galler, and the conference dinner on Tuesday evening. This is being held at the Kelliher Estate on Puketutu Island, a truly unique setting, which we expect will be a conference highlight. There will also be plenty of opportunity to network with friends and colleagues from around the country, which is always such an important part of this meeting.

We look forward to welcoming you to Counties Manukau.

Best wishes

Sharon and Gordon

#### **ORGANISING COMMITTEE**

**Meeting Convenors** 

Dr Sharon Jackson

E: Sharon.Jackson@middlemore.co.nz

Dr Gordon Royle

E: Gordon.Royle@middlemore.co.nz

#### **Meeting Manager**

Sue Peck, SP Conference Management PO Box 4400, Palmerston North 4442 T: +64 6 357 1466 F: +64 6 357 1426 E: sue@spconferences.co.nz

#### **PRINCIPAL SPONSORS**



www.spconferences.co.nz/hsanz-2017



### THE HSANZ NG MYELOMA SPECIAL PRACTICE NETWORK 'M-SPN'

#### Tracy King

Chair HSANZ NG MM-Special Practice Network

Tracy.king@sswahs.nsw.gov.au



The Myeloma Special Practice Network (M-SPN) continues to work together to deliver and develop information and education on a range of myeloma related matters. During HAA we presented an update of our work including 'live' voting using myeNURSE; hosted the MM Nursing Masterclass with Sandy Kurtin, and held our own M-SPN meeting to plan our activities ahead.

#### M-SPN Group Projects: An update

The group have been successful in obtaining an educational grant to help us achieve our project outputs for the year ahead.

- Best practice in the administration of bortezomib: consensus statement and educational resources
- MM nurse business case template for local adaption
- Teaching and information resources

We are grateful to Amgen, Janssen and Takeda for their generous support of the group through grants. We will be working with InspireHCP to help us develop a range of resources related to our projects and will report directly to members once they are completed.

#### **Annual M-SPN Seminar NSW 2017**

Following on from a successful 1st annual seminar at the Alfred in Melbourne last year, plans are underway to host our 2nd seminar this year in Sydney at RPA. A great opportunity to come together and learn about the clinical care and management of those with myeloma. We aim to hold our seminar in August 2017 – watch this space for a date coming soon.

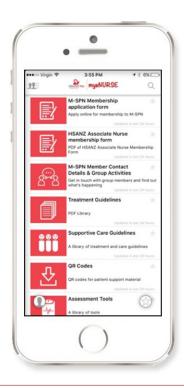
#### myeNURSE: Dynamic content including slide sets

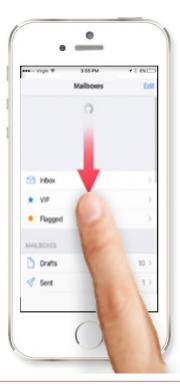
Our information App myeNURSE continues to evolve based on user feedback. With over 95% of users finding it good / very good, the group is working on new content to include in this valuable source of MM information – 'FREE to M-SPN Members'.

Why not consider joining the M-SPN so you can access the full content of myeNURSE and have a comprehensive range of MM resources available to you on your hand held device or desktop PC.

### myeNURSE

Don't forget – swipe Down to Refresh Content







## The International Myeloma Foundation (IMF) recognises nursing contribution to the myeloma community – The IMF Nurse Leadership Board celebrates 10 year anniversary

As one of only 2 international affiliates of the IMF Nurse Leadership Board, I recently attended the annual meeting in Boca Raton, Florida. I believe I was on the plane as long as I was at the meeting! Hosted by Diane Moran from the IMF and chaired by Beth Faiman and Kevin Brigle, the nurse's board worked towards a range of educational and research projects and publications relating to supportive care in myeloma. At a dinner meeting that night celebrating IO years of the nurses group, the nurse members were recognised by Diane Moran and the IMF "for their distinguished service to the myeloma community".

#### How do I join the M-SPN?

We welcome associate nurse members of HSANZ NG who have an interest in myeloma and would like to contribute to improving nursing care of those with myeloma. Application forms can be found at the <a href="https://hsanz.org.au">hsanz.org.au</a> website or by emailing us at <a href="mailto:nurses@hsanz.org.au">nurses@hsanz.org.au</a> or email me directly – <a href="mailto:tracy.king@sswahs.nsw.gov.au">tracy.king@sswahs.nsw.gov.au</a> to find out more about our group.

New members will be sent an e-invitation to join myeNURSE and once you have set up your login and password, you can freely access myeNURSE content on any device and desktop PC.



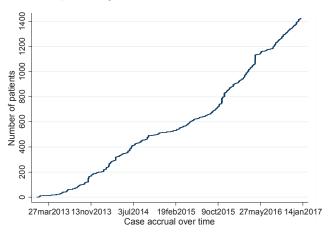
Tracy King recognised for her contribution to the myeloma community as an international affiliate of the IMF Nurse Leadership Board.



## NEWS FROM THE MYELOMA AND RELATED DISEASES REGISTRY

#### RECRUITMENT UPDATE

As of January 2017, more than 1480 patients have been registered on the MRDR. Thank you to all the participants and participating hospitals for your support. The number of hospital sites continues to increase with 24 approved sites on board, and 22 sites actively participating. New sites to obtain approval to participate are: Liverpool, Epworth Freemasons and Nelson Hospital in New Zealand. Hollywood Private Hospital in Perth is now actively recruiting.



MRDR patient recruitment at the end of December 2016.

We have several sites with approval pending. ICON Cancer Care group will soon join the registry and will eventually open recruitment at 4 of their sites in Queensland. Darwin Hospital is also coming on board completing MRDR representation in all states and territories in Australia. Greater representation in Queensland will be possible when Royal Brisbane and Women's and Nambour Hospitals are approved, and the inclusion of Lismore and Royal North Shore Hospitals soon will increase participation in NSW. Furthermore, Sunshine and Bendigo Hospital will increase registry coverage in Victoria. Additional general practice sites expressing interest in participation will also increase our representation in this sector. We are certainly in the midst of a growth spurt! This is fantastic; thanks for all your efforts at contributing sites and for the growing interest in the registry.

Takeda Australia and Janssen support the MRDR which enables this important research to continue.

#### MRDR AT ASH

The 58th ASH annual meeting and exposition 2016 was held in San Diego, from December 1-6. Over 27,000 people attended including Prof Andrew Spencer, A/Prof Erica Wood, Dr Zoe McQuilten and Dr Krystal Bergin from the MRDR management team. They met with members of the Austrian Myeloma Registry to progress a collaboration comparing diagnostics and initial treatment in multiple myeloma between the 2 countries.



ASH Annual Meeting. Left to Right: Roman from the Austrian Myeloma Registry with the MRDR team members; Dr Krystal Bergin, Prof Andrew Spencer, A/Prof Erica Wood, and Dr Zoe McQuilten

### PATIENT REPORTED OUTCOMES: THE MY-PROMPT PROJECT

A new MRDR pilot randomised trial, 'My-PROMPT', is soon to start recruitment at the Alfred and Royal Prince Alfred Hospital. This substudy of the registry will test the feasibility of real-time reporting of Patient Reported Outcomes to clinicians treating patients with multiple myeloma in order to improve care. Clinicians will be encouraged to use this information along with routine assessments, in patients' care. The theory is that increasing clinicians' awareness of issues affecting patients' quality of life could help to improve their care and their health-related quality of life.

The study is lead by Dr Elizabeth Moore and a research team at Monash University, along with lead investigators Tracy King and Daniela Klarica at the Royal Prince Alfred and Alfred hospitals respectively. The team will soon be looking for further sites.

### MRDR: HOW CAN YOUR HOSPITAL BE INVOLVED?

Phone: 1800 811 326

Email: sphpm-myeloma@monash.edu

Website: mrdr.net.au



MONASH MEDICINE, NURSING AND HEALTH SCIENCES









#### WHAT IS NEW FOR LYMPHOMA AUSTRALIA

Sharon Millman CEO Lymphoma Australia Sharna Moloney National Nurse Manager Lymphoma Australia



#### **Our Lymphoma Care Nurses**

Our vision of funding Lymphoma Care Nurses to support lymphoma patients and their families has become a reality with Sharna Moloney appointed to the National Nurse Manager role and Tania Cushion appointed to the Lymphoma Care Nurse role based at The Austin Hospital in Melbourne.



This is a fantastic achievement for us and we plan on appointing more Lymphoma Care Nurses around the country in 2017 and beyond. Our Lymphoma Care

Nurses will work to support patients and their families along their lymphoma journey by providing expert advice, support, resources, and information days as well as provide professional development for other nurses and health care teams across Australia. If you think that your hospital could benefit from having a Lymphoma Care Nurse please get in contact with our team.

#### Lymphoma Nurse Hotline

As part of our vision that all lymphoma patients in Australia should have access to a Lymphoma Care Nurse no matter where they are located or what their financial situation, we are launching our new Lymphoma Care Nurse Hotline. The Lymphoma Care Nurse Hotline will provide expert advice to help support patients and their families throughout their lymphoma journey by assisting them to understand their diagnosis, treatment options, clinical trials and survivorship care.

We are launching this free service on Monday 20th February 2017 and the free call number will be staffed during business hours Monday to Friday and a message service is in place for any patients and their families who call outside of these hours. We also have dedicated closed groups on facebook that patients and their families can join by searching 'Lymphoma Down Under' on facebook. We have flyers and business cards to promote this free support service for your patients so please get in contact with our team if you would like us to send you any of these for your work place.

### Attendance at the Annual Lymphoma Coalition Meeting in San Diego USA (December 2016)

The Lymphoma Coalition (LC) is a worldwide network of lymphoma groups involving over 50 countries to support one another in providing the best care and support to our patients and their families. We were delighted to attend the annual LC conference and AGM in December 2016 which provides a valuable way of sharing and developing resources, best practices, policies and procedures with other countries while increasing awareness and understanding of lymphoma amongst our communities. With the new WHO classifications of lymphoma released in 2016 there are now over 100 subtypes all with their individual treatment considerations and management challenges. We participated in workshops on the subtypes of lymphoma

as well as receiving presentations on impact reporting, standards of excellence program, understanding the pharmacoeconomic process,



INTERLYMPH update and meeting with pharmaceutical companies to work shop patient advocacy and access to the best medicines.

The LC believes that working together we can change the lymphoma landscape and achieve more for patients and you can find more information about the LC on their website www.lymphomacoalition.org.



### Attendance at the 58th American Society of Haematology (ASH) in San Diego USA (December 2016)

The holy grail of haematology conferences from around the world with a record breaking attendance of over 27,000 people this year! The conference provided a very inspiring platform for vital research and clinical practice being performed all around the world to be shared in the aim to cure and treat lymphoma. The major advances in lymphoma have been seen in immunotherapy medicines such a PDI inhibitors for relapsed and refractory Hodgkin's Lymphoma, CART cell therapy for ALL, DLCBL and emerging in Follicular and other subtypes of lymphoma as well as targeted therapies such as venetoclax, ibrutinib and idelalisib for treatment of CLL, Follicular and other indolent lymphoma subtypes. If you missed out on ASH you can head to their website www. hematology.org or look at attending one of the follow up conferences called ASH Highlights held in several sites in

the first months of this year with Hong Kong being the closest place to Australia from 10th – 12th March 2017. The 59th ASH will be held in Atlanta Georgia USA in December 2017.







All 2016 attendees from 44 countries across the world. We look forward to a productive and successful 2017 working in collaboration with the LC.



#### **Patient Education Days**

In August 2016 we had the pleasure of hosting international world lymphoma expert Professor Martin Dreyling who is Head of the Lymphoma Programme in the Department of Medicine at Ludwig Maximilians University in Munich Germany. Martin specialises in Mantle Cell Lymphoma (MCL) and spent a few hours going through lymphoma in general, latest treatment options, clinical trials and novel concepts before answering questions from the patients and their loved ones who attended.

Professor Peter Hillmen is a Haematologist at Leeds Teaching Hospital NHS Trust and the Professor of Experimental Haematology at the University of Leeds. Peter specialises in Chronic Lymphocytic Leukaemia (CLL) and is actively involved in clinical trials leading several National Cancer Research Institute trials in relapsed and refractory CLL and previously untreated CLL. Additionaly he has maintained an interest in paroxysmal nocturnal haemaoglobinuria (PNH) having established the National PNH Service in the UK. Peter spent a few hours going through what CLL is and how we manage it, new treatments and clinical trials for CLL and answered many questions from the audience. Peter also used the electronic white board to draw images to explain his presentation and answer questions which was well received by the patients and their loved ones attending.

These sessions are free for patients, carers and health professionals all you need to do is register on our website and sign up to our E newsletter to receive regular updates on speakers for 2017.

#### **Our Free Lymphoma Resources**

We are just about to launch two new resources for patients and their families which will be available both online or in hard copy for you to have on hand at your work place to give to patients. These resources include the "Living with CLL" booklet which details practical advice and support and "What is New for Lymphoma and CLL - Know Your Treatments" booklet which details all the new innovative therapies available as well as information on clinical trials and how new medicines are approved for use in Australia. We will be launching more resources in the near future including our "Living with Lymphoma" booklet, patient diary and subtype specific information so we will keep you posted when these are available for your patients. Any resources can be delivered to your work place free of charge by emailing our team at support@lymphoma.org.au.



#### Lymphoma: Karen Matoga

Expressions of Interest are being sought from nurse members who are interested in forming a steering group to establish a Lymphoma SPN.

Potential areas for development could include:

- Establishing educational guidelines and resources for nurses providing education and support to new diagnosed Lymphoma patients
- Collaboration opportunities for research activities Formulating a discussion forum on clinical practice updates

If you are interested in being part of a steering group to develop the aims and activities of such a group please contact Karen Matoga at: karen.matoga@mh.org.au

MEMBERSHIP PROFILE:

#### REBECCA DRING

Clinical Nurse Consultant MDS/Non malignant Haematology Victorian Comprehensive Cancer Centre, Melbourne, Australia

Each edition we would like to include a profile of a nurse member of HSANZ. If you would like to share some career highlights and experiences please email us at HSANZ.

Alternatively, encourage a colleague to write.

I began my nursing training in 1990. I entered straight from high school. I look back and laugh when I think what a naive catholic schoolgirl I was.

I often think to myself if I had my time over would I still nurse and the answer is I think I would, I know that I could have been an accountant in the same time and earnt a lot more money but I don't know if I would have been happy. I can honestly say that I love my job, however there are times it can push me to breaking point.

When I completed my training in 1993 there was an oversupply of nurses in Australia and you had to apply across the county to get a job. I was one of the lucky ones and secured a graduate year at Royal Melbourne Hospital (RMH). I had no idea what to expect when I was told that I was to work the year in the oncology ward (no rotations then). I remember a friend joking that I wouldn't need to use the crash trolley much, how wrong they were. It was a year that was made to make or break me. I was the second college trained person on the ward and every action I felt was scrutinised. Many a time I went home in tears. However the friendships that I made during those early years are very dear to me.

About 15 months into my nursing career the bone marrow transplant ward opened and I was one of the first nurses to rotate. It was a learning curve but one that I absolutely loved. It was intense nursing that meant that I dreamt about these patients as you looked after them for several weeks. A conversation one night duty with Yvonne Panek encouraged me to go to the UK specifically the Royal Marsden to further my oncology/

haematology training. It took me 4 years to do this but in the meantime I worked in various roles in the field; inpatient radiotherapy looking after patients from Russia after the Chernobyl fall out, day centre chemotherapy and still I continued my love of BMT and haematology at UCLH hospital. It was here that I was first introduced to a Sickle cell crisis. I have many fond memories of working in the UK and nursing that allowed me to work overseas and travel.

I have had a lot of different nursing roles with oncology/ haematology prior to being a nurse consultant. I have one piece of advice for anyone I work with, always look at where you want to go, it is not ambition, it is thinking ahead on how you can better yourself, your skills and improve your patients care. We don't get every job we apply for but we do gain experience from the interviews and application process. It has taken me over 20 years to get to where I am now but in that time I was silly enough in the UK to fall in love (whatever that is) and marry a Pom and have 3 feral children. I am still nursing and my ever patient family know that my work often comes before them. As I often say I was a nurse before all of you were around and I will be a nurse if you all left me.

I have been a member of HSANZ for approximately 5 years and a committee member for the last 2 years. Being a member of HSANZ allows me to keep up to date with nursing research projects as well as allowing me to have input in to the educational meetings held throughout the year. It is great value for money.

#### CHANCE TO WIN YOUR MEMBERSHIP FEES BACK!

To encourage nurses to join HSANZ and renew their membership each year, the Nursing executive will reimburse one lucky member their yearly membership costs.

To win this back you must be a current financial member, having renewed your membership by the due date, which will be the end of June 2017.

### AUSTRALIAN RED CROSS BLOOD SERVICE EDUCATION PROGRAMMES

#### Australian Red Cross BLOOD SERVICE

#### Plan your year of learning

#### Helen Kish

Communications Project Officer Transfusion Policy and Education. Australian Red Cross Blood Service.

Build your knowledge in 2017 with the Australian Red Cross Blood Service's comprehensive transfusion education sessions.

These sessions continue to grow in popularity every year and are designed to support you to either refresh or improve your blood and transfusion knowledge and practice.

Tailored to professionals just starting their career through to advanced scientists and clinicians, the calendar is offered through a combination of face-to-face workshops and seminars, self-paced eLearning and recorded webinars.

The Transfusion Education 2017 Calendar provides a great opportunity to boost your knowledge and hear from a wide range of experts in their field.

Continuing professional development points are awarded for all completed sessions.

Download the full calendar which is available now at <a href="https://learn.transfusion.com.au/">https://learn.transfusion.com.au/</a> to start registering for sessions and filling your diary with key dates.

Choose from learning options that include rapid-fire 30-minute knowledge transfer sessions to interactive workshops focusing on the practical aspects of transfusion medicine, practice and science.



### TRANSFUSION EDUCATION

### 2017 calendar

The Australian Red Cross Blood Service offers a comprehensive transfusion education calendar.

Transfusion education is open to health professionals and anyone with an interest in blood and transfusion. Continuing professional development points are awarded for all completed sessions.

#### **KEY**

- Early career, 30 minutes
- ! Intermediate/advanced, 1 hour
- Transfusion workshops
- Registrar transfusion education
- Webinar
- In person

#### **FEBRUARY**

- 1 Haematology registrar transfusion education webinars released • These webinars include the following topics: basic immunohaematology, blood groups, adverse events, and more.
- 9 Critical care registrar workshop

  © • 6.00 pm local time,
  Sydney Processing Centre

#### MARCH

- 2 **Critical care registrar workshop**••• •• 6.00 pm local time, Royal Melbourne Hospital
- Medical management for a patient who refuses a transfusion • 1.30 pm
- 29 **Epitopes, immunology and the HLA**platelet donor panel ② ⑤ ⑤
  1.30 pm local time, Melbourne
  Processing Centre

#### **APRIL**

- 19 A day in the life of an obstetric/ paediatric transfusion laboratory • 1.30 pm
- 27 Transfusion Update 2017 

  Time TBA, Sydney

#### **MAY**

- 17 Assessing the need for red cell transfusion **0 9** 1.30 pm

#### **JUNE**

- 28 **TRALI** • 1.30 pm

#### JULY

- 12 Infectious agents update: Hepatitis
  C and Zika virus @ 12.30 pm
  local time, Sydney Processing
  Centre
- Introduction to Neonatal Exchange Transfusion 1.30 pm

#### **AUGUST**

- Introducing changes to blood component labelling **0 1** 1.30 pm
- Data linkage of transfusion in maternity @ 12.30 pm local time, Sydney Processing Centre
- Pretransfusion testing: what's involved? • 1.30 pm
- TBA **50 years of RhD 8** Time and location TBA

#### **SEPTEMBER**

- 14 Massive transfusion in the era of TEG 12.00 pm local time, Gold Coast University Hospital

#### **OCTOBER**

- 11 Transfusion as part of disaster response management ② 

  1.30 pm
- 25 Disseminated Intravascular Coagulation (DIC): An overview (1.30 pm

#### **NOVEMBER**

- Clinical errors in transfusion practice © © 9 1.30 pm local time, Adelaide Administration and Distribution Centre
- 22 **ABO Subgroups 1**.30 pm

#### **NURSING WORKSHOPS**

2017 Nursing Workshops will be held in:

- Adelaide
- Brisbane
- Sydney

Please note: unless indicated as 'local time', all times are Sydney/Melbourne time.

All **1** early career and **1** intermediate/advanced sessions are recorded and made available for viewing one week following the event on **learn.transfusion.com.au.** 

This calendar is subject to change. Visit learn.transfusion.com.au for up-to-date information.

Register today to enhance your knowledge and gain CPD points. learn.transfusion.com.au







# Postgraduate study Cancer and haematology nursing



Study a postgraduate course in cancer and haematology nursing with Sydney Nursing School at the University of Sydney.

Our courses enable registered nurses to contribute to the improved survival and recovery of cancer patients and to move towards a leadership position in this exciting field.

"This course supports my everyday clinical practice and has helped me to stay abreast of innovations in the field. The teaching staff are active practitioners in the healthcare system, and guest lectures at study days have also allowed me to learn first hand from experts."

#### Teinei

Registered nurse and graduate certificate student

#### Why study at Sydney Nursing School?

Graduates of Sydney Nursing School gain knowledge and awareness of local and global health systems and learn how to apply their skills in leadership to shape the future of healthcare and improve patient outcomes.

Nursing at the University of Sydney has been ranked first in Australia and 13th in the world in research and educational excellence in the 2016 QS World University Rankings by Subject.

As a student, you will:

- build professional practice capabilities needed for leadership
- further develop your research skills to make evidence-based decisions, and open the door to a PhD at Sydney Nursing School
- enhance your specialty knowledge, clinical expertise and therapeutic skills, applying what you learn in class to your professional practice
- join our global community of influential students, staff and alumni, building your professional network as you study alongside academics and peers from the nursing community
- choose how to fit study into your life with full-time and part-time options, as well as self-paced online study for some components of the program.

#### Why study at the University of Sydney?

As Australia's first university, our reputation spans more than 160 years. We are regularly ranked in the top 50 universities worldwide.\*

Home to five major health disciplines, we have a unique opportunity to lead the future of healthcare education, practice and research.

#### How will I learn?

You can choose to study at the level and for the duration that suits you:

- Graduate Certificate in Cancer and Haematology Nursing: one year part time
- Graduate Diploma in Cancer and Haematology Nursing: one year full time or two years part time
- Master of Cancer and Haematology Nursing:
   18 months full time or 2.5 years part time.

#### Flexible delivery

- Benefit from flexible, self-paced online study, allowing you to fit study around other commitments.
- There are four compulsory face-to-face study days for each unit. These sessions offer you real-time support from lecturers and clinical experts, and the opportunity to share experiences and build professional networks in a small class environment.

#### What will I study?

The graduate certificate covers:

- clinical judgment and decision-making
- biology of cancer and haematology
- treatments and integrated multidisciplinary management
- future treatment trends such as home-based care.

The **graduate diploma** covers graduate certificate content, plus you will:

- develop advanced nursing practice domains with subjects in contemporary leadership, research, education, workforce issues, and safety and quality
- explore an advanced nursing practice issue
- undertake a clinical project in an area of your choice.

The **master's degree** covers graduate certificate and diploma content, plus:

- a six-month capstone to either:
  - examine the professional/clinical/political context of your desired career trajectory or
  - undertake a supervised research project.

#### **Important dates**

- Applications close on 20 February 2017.
- Courses commence on March 2017.

\*QS World University Rankings 2015-16

#### More information

For details of scholarships on offer, visit sydney.edu.au/nursing/study/scholarships
To learn more about our postgraduate specialty programs, visit sydney.edu.au/nursing/advance

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#### **CONFERENCE CALENDAR 2017**

Compiled by Peter Haywood

DATE	CONFERENCE	DETAILS
FEBRUARY 2017		
22–26 Feb	<b>BMT Tandem:</b> Combined annual meetings of the Center for International Blood & Marrow Transplant Research (CIBMTR) and the American Society for Blood and Marrow Transplantation (ASBMT)	Orlando, USA. <u>asbmt.org/meetings-events/</u> <u>bmt-tandem-meetings</u>
MARCH 2017		
10–12 March	ASH Highlights: 2017 Highlights of the American Society of Haematology	Hong Kong
26–29 March	<b>EBMT 2017:</b> 43rd Annual meeting of the European Society for Blood and Marrow Transplantation	Marseille, France. www.ebmt2017.org
MAY 2017		
3-6 May	MDS: The 14th International symposium on Myelodysplastic Syndromes	Valencia, Spain. mds2017.kenes.com
2-5 May	ALLG: Scientific meeting	Melbourne, Australia.
4–7 May	ONS: Oncology Nursing Society 42nd annual congress	Denver, USA. congress.ons.org
10-12 May	AVAS: Australian Vascular Access Society annual scientific meeting	Perth, Australia. <u>avas.org.au</u>
JUNE 2017		
2–6 June	<b>ASCO:</b> American Society Of Clinical Oncology annual meeting 2017	Chicago, USA. <u>am.asco.org</u>
14–17 June	ICML: International Conference on Malignant Lymphoma	Lugano, Switzerland. <u>www.lymphcon.ch/icml/website/index.php</u>
15–17 June	<b>ANZCHOG:</b> Ausralian and New Zealand Childrens Oncology Group Annual Scientific Meeing	Adelaide, Australia.
15–17 June	CNSA: Cancer Nurses Society Australia 20th annual congress	Adelaide, Australia. <u>www.cnsa.org.au/</u> congressevents/cnsa-annual-congress
22–25 June	EHA: European Hematology Association 22nd congress	Madrid, Spain. www.ehaweb.org/congress- and-events/22nd-congress/key-information
22–24 June	MASCC/ISOO: Annual Meeting on Supportive Care in Cancer	Washington, USA. <u>mascc2017.com</u>
JULY 2017		
9–12 July	ICCN: International Conference on Cancer Nursing	Anaheim, USA. <u>www.isncc.org/page/</u> ICCN2017
OCTOBER 2017		
29–I Oct/Nov	<b>HAA</b> 2017	Sydney. www.haa2017.com
NOVEMBER 201	7	
13–15 Nov	COSA: Clinical Oncology Society of Australia Annual Scientific Meeting	Sydney, Australia. <u>www.cosa.org.au/</u> <u>events/2017/11/cosas-44th-annual-scientif-ic-meeting-2017.aspx</u>
14-17 Nov	ALLG Scientific Meeting	Sydney, Australia.
DECEMBER 2017	7	
9-12 Dec	ASH: American Society of Hematology Annual Meeting	Atlanta, USA.



#### **EDITOR'S NOTE**

#### Rosemary Hoyt

Dunedin Hospital, New Zealand

This edition is out later than I would have liked but hopefully it provides those who were unable to attend HAA 2016 with a snapshot of what occurred and perhaps inspire others to contribute to the next meeting in Sydney.

I remain on the hunt for content for the newsletter and welcome any contributions people wish to make. Those who receive travel grants for conferences can take the opportunity to share their experiences and knowledge gained. So please do not wait to be invited, take the initiative tell us what you are doing, have learnt, have seen or think others should know about.

At this time last year I was sitting with my Mum and talking to her about her end of life wishes. She had been diagnosed with an inoperable

cancer and had been told she had only a month or two to live. Conversations about where she wanted to die, who she wanted to tell about the diagnosis, who she did not want to tell, finalising wills and planning the funeral were held over several days. The resulting action required from such discussions however took longer. These all fell to me as my siblings live overseas. It was tiring for both of us and emotionally demanding. As Mum was very deaf, communicating emotions, practicalities and liaising with clergy, lawyers and health care staff were challenging and at times very loud!

Some of the oral presentations at HAA 2016 resonated very much with me due to the recent experience with my Mum; advanced care planning, caregivers needs. Mum did not want to do an advanced care plan. When I first brought it up she refused to talk about it. Then of course later she initiated a 'check-list' of things she wanted organised. So in the end the above plans went by another name and she simply replied to anyone who asked, "My daughter and I have sorted it out'.

#### References:

- I. Deloitte Access Economics (2015) The economic value of informal care in Australia in 2015
- 2. Infometrics (2014) The economic value and impacts of informal care in New Zealand.
- 3. Womens Health Victoria (2008) Women and Informal Caregiving (Gender Impact Statement no.7).



The responsibility of being a caregiver and an advocate for a family or a friend can be overwhelming. I am sure I knew this before hand and had always endeavoured to support caregivers of patients, particularly complex ones. However maybe I did not do enough.

After the time with my Mum I try harder to ask the caregiver about their needs, do they need more support and how we can find it. I encourage them to accept help, involve family and friends in the

care, take time out for themselves, address their own health care needs and access emotional support and counselling. All the things I should have done but thought I could do or should do on my own.

Some interesting facts:

- Women are more likely to be informal caregivers than men<sup>1-3</sup>
- Society relies on the lower participatory rate of women in full time work as a means of providing informal care in the community<sup>1</sup>
- The replacement cost of informal caregiving is considerable with it estimated in Australia as being 60.3 billon dollars per year<sup>1</sup>
- Informal caregivers frequently report higher levels of depression, illness and social isolation<sup>3</sup>

Please make contact if you wish to contribute to the newsletter and share your knowledge and experiences with your colleagues. I would love to hear from you.

#### SUBMISSION DATES FOR 2017 NEWSLETTER

Monday 24th April
Monday 14th August
Monday 27th November