

# A better way to manage high blood pressure



Assoc Prof Sharman uses the new technology to measure a patient's central blood pressure using the pen-like device

**In an attempt to reduce the rate of cardiovascular disease in our community, Menzies' high blood pressure expert Associate Professor James Sharman and his colleagues, decided to investigate the benefits of measuring central blood pressure to manage the health of patients with high blood pressure.**

Central blood pressure is widely considered to be a more accurate indicator of the pressure the heart and other vital organs experience.

The new Menzies' study used innovative pulse-reading technology to measure the central blood pressure of hypertensive patients.

This is the first time central blood pressure has been used to guide decisions on blood treatment for people with high blood pressure.

The new technology measures central blood pressure from the arterial pulse at the wrist using a pen-like device that has a pressure sensor at the tip. The device is placed lightly on the pulse at the wrist and a mathematical formula is then used to calculate central blood pressure.

"The method is quick, reliable and provides important information on blood pressure that is above and beyond that using the standard upper arm cuff method," Associate Professor James Sharman said.

"The main finding was that significantly less medication was needed to achieve healthy blood pressure levels when treatment decisions were based on central blood pressure as opposed to upper arm blood pressure levels.

"In fact, sixteen per cent of the participants came off medication altogether.

"These are important findings because people taking these medications can experience unwanted side effects that impact on quality of life, but these adverse effects are less likely with lower doses.

"We expect that evidence from this new trial will ultimately lead to a paradigm shift in the approach to treating patients with hypertension.

"That is, central blood pressure will be considered a better option for measuring blood pressure than the conventional blood pressure measured at the upper arm.

"Currently the use of central blood pressure equipment is mainly confined to the research domain. But with new developments that enable central blood pressure to be measured using an upper arm cuff technique, I hope to see this change in the near future, where GP's start using it in their practices."

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# Director's message



Professor Tom Marwick, Director

## Welcome to the final edition of the *Bulletin* for 2013.

Menzies is globally recognised as one of Australia's top medical research institutes. This, achieved in a short span of 25 years, is testament to the quality, rigour and significance of our research to the health of our community.

Our success is closely linked to the success of our researchers as they continue to lead and make significant contributions in health and medical research in Tasmania and around the world.

Professor Graeme Jones, Associate Professor James Sharman and Dr Clare Smith's recent success stories that you will read about here, are tremendous examples of the important contribution to local and global health our researchers are making right here in Hobart.

I am extremely proud of the Institute's progress and achievements over the past 12 months. I hope you enjoy reading about a handful of them in this edition of the *Bulletin*.

I thank you whole-heartedly for the generous support you have given us – it has irrefutably made us the success story that we are today.

Kind regards,



Professor Tom Marwick  
Director

# Statins: response to ABC TV's Catalyst program

By Professor Tom Marwick



**Many of you are likely aware of the Catalyst program on statins that recently aired on ABC television. As a cardiologist and medical researcher, I have been deeply concerned about reporting that I consider to be misleading. I found the story unbalanced and the information presented often opinion and experience-based rather than evidence-based.**

The take home messages of this program were that statins were ineffective, taking them did not justify the risk of side-effects, and that the widespread use of statins was effectively due to collusion between doctors and drug companies. All three are wrong.

The program was based on a number of interviews. There were two academics with extreme views about the topic and an academic who has a declared interest in law suits against drug companies (all based in the USA). There was also a patient who had suffered muscle pains on statins, and two Australians, Associate Professor David Sullivan from the Lipid Clinic at the Royal Prince Alfred Hospital in Sydney and Dr Rob Grenfell from the National Heart Foundation who tried to present a reasonable approach.

The following are important facts that everyone on statins should know;

- Statins do not just reduce cholesterol, but also seem to stabilise the wall of blood vessels. In patients with vascular disease, there is a risk of plaque rupture, heart attack and sudden death with stopping them.
- Evidence from a number of huge research studies looking at the safety

of statins over three decades was ignored. Even if you consider that the side-effects have been hidden by the drug companies (as the program proposed), there have been data outside of drug company studies that document their safety.

- In terms of efficacy for saving lives, there have been two meta-analyses (a meta-analysis is a summary of the available literature and involves data analysis of the data from all the studies, not just one) of previous trials (around 60,000 patients) showing a 9-14 per cent reduction in deaths and 25 per cent reduction of all medically related events.

The rationale for broadcasting this was to generate debate. Unfortunately, adherence to therapy has likely not been helped by this program. I have been happy to reassure my patients who have asked about stopping their statin therapy, but I worry about other patients who may not have asked their doctor and decided to stop them themselves. Like Dr Norman Swan, I am seriously concerned that it may put lives at risk. **If you are on a statin and have second thoughts about continuing, please seek the advice of your doctor.**

# Blood pressure clinic opens its doors

**Tasmanians with high blood pressure can now receive expert care at Menzies' new blood pressure clinic. The new blood pressure clinic provides a bulk-billed clinical service for Tasmanians with difficult to manage hypertension referred by their general practitioner.**

Located in the new UTAS Medical Science Precinct, the clinic uses the latest technology to investigate and manage high blood pressure.

Associate Professor James Sharman says the clinic is a place where people with resistant hypertension can receive specialist care in a collaborative relationship with their own doctor.

"The clinic also serves as a research platform into the causes and consequences of hypertension," he said.

"To be referred to Menzies' new blood pressure clinic a patient must have resistant hypertension and/or difficult to treat hypertension without other significant diseases."

Patients referred to the clinic will undergo various blood pressure testing (ambulatory, home and clinical, brachial (upper arm) and central blood pressure), as well as comprehensive risk and secondary disease assessments during their consultations. A report will then be sent to their referring doctor detailing blood pressure measures and a suggested treatment regimen.

For more information please contact Clinic Coordinator Ella Switch on 6226 4710 or email

[Menzies.BPclinic@utas.edu.au](mailto:Menzies.BPclinic@utas.edu.au)



The new blood pressure clinic uses the latest technology to investigate and manage high blood pressure



Dr Amanda Neil is a health economist with a particular focus on serious mental illness Photo by Peter Mathew

## Providing a roadmap for mental health services

**About one in five Australians will experience a mental illness in any year, and most of us will experience a mental health problem at some time in our lives. What is more, these health problems appear to be on the rise.**

The *Burden of Disease and Injury in Australia* study indicates that mental illnesses constitute the leading cause of non-fatal disability burden in Australia, accounting for an estimated 24 per cent of the total healthy years lost due to disability. Including the impact of years of life lost due to premature death, mental illnesses give rise to the third highest overall disease burden (13.3%) behind cancer (19.0%) and cardiovascular disease (18.0%).

The most common mental illnesses are anxiety, depressive disorders and substance abuse disorders, and they often co-occur. The less common mental disorders, affecting less than 0.5% of the population, are those that involve psychosis, and include schizophrenia and bipolar mood disorders.

Depression and anxiety disorders together are the leading cause of non-fatal disability in men and women in Australia, and together give rise to 55% of the overall disease burden of mental illness. Schizophrenia gives rise to 8% of the overall disease burden of mental illness due to its severity.

Dr Amanda Neil is a health economist with a particular focus on the seriously mental ill. Dr Neil began working in health economics at the Australian National University (ANU) in 1991, and has a particular expertise in economic evaluation. She recently led the economic

analysis of the Second National Survey of Psychosis.

Dr Neil says that her greatest single achievement to date is arguably in the development of a 'casemix' mechanism for pathology laboratory testing accepted and used for benchmarking public pathology laboratories at State and national levels.

Dr Neil recently moved to Tassie with her husband Peter and daughter Kara and accepted a senior appointment at the Menzies Research Institute Tasmania.

At Menzies Dr Neil will continue her research into the mentally ill, with a major focus on the provision of mental health services in Tasmania.

"The initial aim of my research is to examine State specific factors in the performance of Tasmania's mental health system relative to other States and Territories," she said. "For example, what are the implications of our State's small population but large geographical dispersion on service provision and costs?"

"On the basis of these findings, the potential for improving the State's mental health system's effectiveness, efficiency and equity will be explored.

"The ultimate outcome of this research will be improved services and better health outcomes for mental health patients in Tasmania."

# Thank you to our valued supporters

Thank you to all of our donors and volunteers for your ongoing support and commitment to Menzies.  
Listed below are new individual and community supporters of Menzies for August 2013 – October 2013.

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Mr Clive Pearce

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Listed below are our Everyday Angels – our supporters who make regular gifts to Menzies.

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Ms Barbara White  
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## Tasmanian scientist recognised for outstanding achievements

**Menzies' Professor Graeme Jones was recently named "Tasmanian Scientist of the Year" at the 2013 Tasmanian Science Excellence Awards.**

The Premier's Tasmanian Scientist of the Year Award was presented to Professor Jones for his outstanding contribution to the treatment of osteoarthritis. A number of his clinical trials have demonstrated the effectiveness of different treatments, which have the potential to ease pain and reduce joint replacements.

"Pain due to osteoarthritis is the major cause of reduced quality of life in people aged over 50. Joint replacement surgery is very effective but costs around \$20,000 for each operation," Professor Jones said.

"There are now around 1000 hip and knee replacements a year performed in Tasmania. Any treatment that can delay or prevent joint replacement is likely to lead to substantial cost savings very quickly.

"We now have evidence from my group's research that a number of therapies can help symptoms and slow progression of this disease.

"Thus, the social implications are profound: decreased pain, increased function, less days off work, better quality of life. The economic implications are equally important saving money and taking the strain off our overloaded public health system.

In Australia, there are around 45,000 knee and hip replacements so the potential for broader effects is large. Worldwide, similar statements apply as osteoarthritis has a similar prevalence in all western economies.

One example, the zoledronate (marketed as Zometa, Zomera, Aclasta and Reclast) clinical trial for bone marrow lesions of the knee which occurs with osteoarthritis, has shown these lesions can be improved with the use of zoledronate and this has resulted in a paradigm shift. The National Health and Medical Research Council (NHMRC) recently committed to funding a new trial focused on whether this therapy can decrease the need for joint replacement.

This is of major public health significance in Australia where joint replacement



Professor Graeme Nelson was named Tasmanian Scientist of the Year 2013

surgery is rapidly increasing at an unsustainable rate.

"This is well-deserved recognition of years of work from Graeme and his team. This work has led to advances that will reduce the burden of osteoarthritis in our community," Menzies' Director Professor Marwick said.

"It's a great example of how the community's support for our research is reciprocated by excellent work and eventually by significant advances, the research has also brought in excess of \$16 million dollars into Tasmania allowing me to employ 30 staff," he said.



Dr Kaz Negishi

## Researcher Profile: Dr Kazuaki (Kaz) Negishi

use of protective therapy to limit the development of heart failure (TAS-ELF Study).

### What are some of the recent findings from your work?

Some of the chemotherapy drugs for cancer treatment are potentially harmful to the heart and cause damage to the heart muscle (cardiotoxicity). We found that "myocardial strain", a new echocardiographic measure of heart muscle contraction, is a more sensitive marker of chemotherapy-induced cardiotoxicity. Based on this finding, we launched a new international multicentre project to see if this marker can be used in a clinical setting to guide the use of cardio-protective treatment (SUCCOUR study).

### What is the biggest challenge in your area of research?

In the field of cardiovascular imaging, it is essential and often challenging (and fun!) to distinguish sensitive but important imaging patterns from imaging noises that don't have clinical consequences, not only in the context of data collection/

measurement but also statistical analyses. For this purpose, we need ongoing funding to support and allow us to assemble, measure and analyse data from larger populations to achieve clinically applicable and beneficial findings.

### What is the most interesting aspect about your work?

Up to now, cardiovascular imaging technologies, such as echocardiograms, have been used for clinical diagnostic purposes only. We are trying to go one step further and use these diagnostic tools to guide treatment and to optimise the outcome, including cost of care and quality of life. This is the most interesting aspect of our work.

### What do you enjoy doing in your spare time?

As I like cycling, I am so glad that my bike has finally arrived here safely, after a five month journey from Ohio, USA to Tasmania - just in time for early summer! Since my wife and I enjoy great food and wine, we feel very lucky to be here in Tasmania!

### What is the current focus of your research?

The research focus of our group is on clinical application of cardiovascular imaging in order to optimise clinical management and improve patient outcome. Under the supervision of Professor Tom Marwick, we are working on a variety of research topics that cover a range of cardiovascular diseases. One of our research studies is a community-based study for those living in regional Tasmania. Participants in the study have their heart screened using an echocardiogram (ultrasound of the heart) to detect heart disease at a very early stage and trial the

## The Art of Christmas 2013

Creativity and science came together to support medical research in Tasmania with the ninth annual *Art of Christmas* event held on October 17 at the UTAS Medical Science Precinct.

The event was a huge success thanks to the generosity of 34 talented Tasmanian artists, our sponsors, volunteers and guests who attended the event.

Thanks to the generosity of the Honda Foundation we were excited to introduce this year **The Honda Foundation People's Choice Award**. Artist Damien Peck won the \$5,000 cash prize for his artwork *Waterwings*.



The Honda Foundation

**Artists:** John Ancher, Simon Ancher, Bert Aperloo, Gemma Black, Louise Bloomfield, Keith Climpson, Stuart Clues, Katherine Cooper, Katina Gavalas, Jane Giblin, Nick Glade-Wright, Patrick Grieve, John Ingleton, Barbie Kjar, Richard Klekociuk, Eloise Lark Cook, Julie Diana Lawless, Nigel Lazenby, Anne MacDonald, Breon Martin, Cathy McAuliffe, Mish Meijers, Milan Milojevic, Chris Needham, Richard Onn, Damien Peck, Simone Pfister, Kate Piekutowski, Craig Riddington, Troy Ruffels, Michael Schlitz, Michael Weitnauer, Michele Wilkie and Katy Woodroffe.

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**Special thanks:** Dave Noonan, Hank Petrusma, Mark Colegrave, MONA, Samuel Shelley, Jen Scharkie and Thomas and the Dank Engines.



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Dr Clare Smith named Tasmanian Young Australian of the Year 2014

## Tasmanian Young Australian of the Year 2014: Dr Clare Smith

**Menzies' PhD graduate Dr Clare Smith was recently named the 2014 Tasmanian Young Australian of the Year. Dr Smith was awarded the prestigious prize for her investigations into a novel therapy against malaria. A major outcome of her work was the discovery of an anti-malarial compound.**

This novel approach may avoid the rapid development of resistance common to the current generation of anti-malarial drugs. Clare's discovery will have an immense global impact, with clinical trials on the patented research now underway in Queensland. If they are successful, the trials will cement Clare's critical role in saving the lives of millions of vulnerable people in third world countries.

Dr Smith moved to Boston earlier this year where she secured a postdoctoral position as a Howard Hughes associate at the research University of Massachusetts.

Dr Smith is now a finalist in the National Young Australian of the Year Awards, which will be presented by Prime Minister Tony Abbott in Canberra on Australia Day, in 2014.

## Menzies embraces the local Chinese community



Local Chinese Community Association members enjoyed a visit to our new precinct where they celebrated Menzies 25 years

**Menzies was delighted to host over one hundred members from the local Chinese Community Association, who came to view our new medical research precinct and help Menzies celebrate its 25 years of research excellence.**

The visitors were impressed by the talks given by Professor Stephen Rattigan, A/Professor Changhai Ding, Larissa Bartlett and seven PhD students, on the history and research interests of Menzies.

"I am not a medicine buff, but today I was really impressed by the facilities as well as the reputation of Menzies Research Institute Tasmania. I hope the Institute will interact regularly with the local Chinese communities in the future," said Daniel Chan, the President of the Chinese Community Association of Tasmania.

"Every time I walked around Queen's Domain, I was always curious about the architecture, thank you all for giving me the opportunity to visit this building."

Today, there are over 24 Chinese researchers and PhD students at Menzies working on a diverse range of medical research interests. The number is anticipated to grow in the future.

## Taking heart screening to regional communities



Cardiac sonographer, Leah Wright tests a patient on the biobus using ultrasound to detect early heart disease

**Menzies new free heart screening project for regional Tasmania was successfully launched in September. First stop was Huonville, followed by the communities of Oatlands and Longford. The team are now ready to venture further afield, travelling north and north-west of the State in coming months.**

The purpose of the project is to run a screening program for early stage heart disease and trial the use of cardio-protective therapy to limit the development of heart failure in patients over the age of 65 in regional areas.

Professor Tom Marwick, who heads up the program says it is difficult to diagnose and manage heart failure without echocardiography (ultrasound of the heart).

"But requiring this imaging is particularly a burden for the elderly and those living in rural areas, who would usually have to travel to major cities for testing.

"Thanks to the Tasmanian Community Fund and Siemens we are now able to take free heart screening to regional Tasmania.

"Having this technology is very important to us as heart failure is increasing in Tasmania and is among the most frequent causes of hospital admissions and related health costs.

"It will potentially help us save lives in regional Tasmania," he said.

If you are interested in becoming a volunteer in the study visit [www.menzies.utas.edu.au/taself-study](http://www.menzies.utas.edu.au/taself-study) or contact Hilda Yang on 6226 4265 or email [Menzies.TASELF@utas.edu.au](mailto:Menzies.TASELF@utas.edu.au)

## Purchase your Christmas cards

There are 14 unique Tasmanian designs to choose from plus a variety pack.

**Price: \$10 per pack of 12 cards.**

You can pick-up your Menzies Christmas cards from Fullers Bookstore or at Menzies' main reception desk.

To purchase your cards by phone,

contact Lydia on (03) 6226 7700.

To view the card designs online visit

[www.menzies.utas.edu.au/ArtofChristmas2013](http://www.menzies.utas.edu.au/ArtofChristmas2013)

# More than Flowers



## In Memoriam

August 2013 – October 2013

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If you would like more information please  
contact Teisha Archer on 03 6226 4236  
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