

Annual Report 2017-18



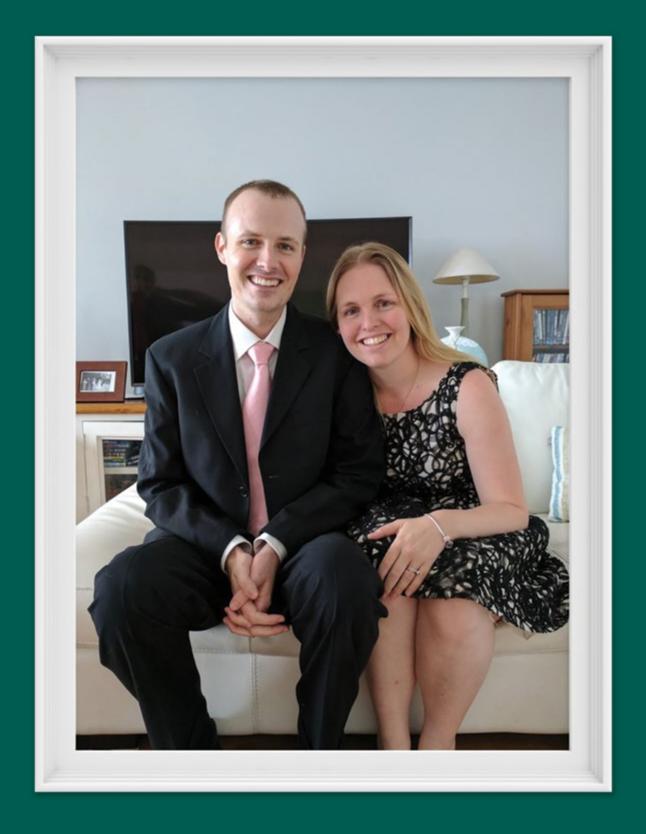












People impacted by melanoma are at the heart of everything we do.

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CEO & Chairman's Report



Over the past 12 months, Melanoma Institute Australia has taken great strides forward in our quest for zero deaths from melanoma. This is a true collaborative effort – our world-leading clinicians and researchers, our clinical trials teams, our national and international partner organisations, our generous supporters and donors, and of course our patients and their families – all working together to advance research and trial new

These advances are due in no small part to the leadership shown by our inaugural CEO Carole Renouf, who retired this year to spend time with family overseas. During her two-year tenure, Carole worked tirelessly to ensure the business side of MIA was transformed so it could support the rapid pace of change and advances on our research and clinical side. We sincerely thank Carole for her efforts and wish her well in her retirement.

A key initiative this year was the establishment of MIA Education, a department dedicated to translating advances in research and clinical care



MIA has expanded in a financially responsible way, with \$10.4 million this year going directly towards our mission. While we are proud of this record level of investment, we continually search for further efficiencies to maximise this

Under the clinical and academic leadership of our Co-Medical Directors. MIA continues to direct and lead the global research effort. MIA recently won four out of seven awards at the NSW Premier's Awards for Outstanding Cancer Research, including Professor Georgina Long being awarded Outstanding Cancer Researcher of the Year and Professor Richard Scolyer The Professor Rob Sutherland AO Make a Difference Award. Only days earlier, Professor Long became the first Australian and first woman to be President of the prestigious international Society of Melanoma Research.

This recognition within Australia and internationally is the result of their relentless commitment to driving melanoma research and changing clinical practice over many years.

After an extensive search by the Board, we were delighted with the appointment of our new CEO Matthew Browne, who will lead MIA through its next critical growth phase.

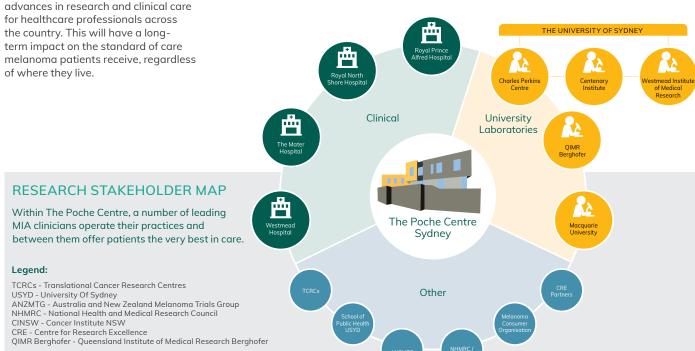
GRANT KING

Thanks to their leadership, MIA is firmly in the international research spotlight with the world's best minds in melanoma research and practice looking towards Professors Long and Scolyer for where to next. We can no longer lay claim to being the world's best kept secret, a title we are proud to shed.

What continues to ground us, and guide us, are patients with melanoma and their families. They will always remain at the centre of everything we do – they drive our research focus, participate in clinical trials, run and support awareness and fundraising campaigns, and importantly, provide first-hand input to ensure we understand the patient experience. We are proud to feature in this Annual Report just some of the people and families who are, and will always be, at the very heart of what we do. Like you, they are a valued part of the Melanoma Institute Australia family.

Grant King Chairman

Matthew Browne CFO



Medical Directors' Report



We are proud to provide the clinical and academic leadership of Melanoma Institute Australia. Our pursuit of zero deaths from melanoma continues unabated, and our research success this year ensures we are on course to achieve this goal. In the last 12 months, three ground breaking adjuvant drug therapy trials were published in the prestigious New England Journal of Medicine. We also published our world-leading ABC study in *The Lancet Oncology* (Australia Anti-PD1 Brain Collaboration), which has changed clinical practice globally. The new AJCC staging system, underpinned by data from our pioneering Melanoma Research Database, was published late 2017. This database now holds almost 50,000 patient records, with linked banked biospecimen samples, making it the largest of its kind in the world. Resourcing it requires major ongoing investment, and we continue to strive to streamline and improve it.

Our mission is very much a team pursuit, and one that relies on collaboration and teamwork both within MIA, across our nation, and internationally. With funds from Melanoma March, the annual national fundraising event coordinated and led by MIA, we continue to lead the Australian National Melanoma Data Registry. Other important national initiatives led by MIA include the new Australian Melanoma Clinical Management Guidelines launched in May

2018, and our recognition as an NHMRC Centre for Research Excellence to lead the national implementation of research driven changes to clinical practice.

Another landmark publication in 2018 was the new World Health Organisation Classification of Skin Tumours (Coeditor Richard Scolyer) which is already changing clinical practice worldwide.

Our other collaborations around the globe ensure we are at the leading edge of the latest developments.

Our MIA translational research laboratories across The University of Sydney campuses and Macauarie University, continue to provide new insights in all aspects of the disease spectrum from 1. Prevention and those at High Risk of Melanoma; 2. Early Stage Melanoma; 3. Advanced Melanoma; 4. Supportive Care/Survivorship; and 5. Health Economics. There has been an enormous number of publications from MIA in the last 12 months with major impacts across each of our research themes, which will influence the cancer field in general. Moving forward, we are expanding our investment in survivorship and supportive care, an area of areat need given the improvements in melanoma survival in recent years.

In our pursuit of excellence and strong desire to improve and maximise our research impact, we underwent a three-day external research review by an expert international panel. They were overwhelmed and excited by our achievements and productivity and struck by our unique culture and collegiality. The panel used its collective expertise to comprehensively review our activities and provide us with strategic suggestions.

In 2018, we have expanded the breadth and depth of talent in the MIA Faculty, bringing it to 19 senior MIA clinicians and researchers. MIA's Faculty and the committees that underpin each of our three pillars of work – clinical care, research and education – advise on operational matters and assist with the strategic direction we take as Medical Directors. We sincerely thank Faculty and all committee members for their support and guidance this past year.

Education and training is a key part of MIA. This year we launched the MIA education portal and expanded our educational activities. Our rich tradition of mentoring and training the next generation of melanoma experts across all medical disciplines continues to grow, now with a formal observership program. In addition, our trainees and Fellows learn the latest advances in clinical care and also make important contributions to our research program.

Over the past year, MIA researchers at all levels from students to senior researchers have received numerous awards and accolades in recognition of their groundbreaking work. Whilst there are simply too many to list individually, particularly noteworthy was the NSW Premier's Outstanding Cancer Researcher of the Year being awarded to MIA's Prof Rick Kefford AM (2017) along with the numerous other NSW Premier's awards MIA researchers received.

We would like to re-iterate the words of our Chairman and CEO that those affected by melanoma are at the centre of everything we do. We are humbled every day by the strength and selflessness of our patients and their families, and are delighted to share with you a small snapshot of their stories. These serve to remind us why we are here and why our research effort will continue unabated until we achieve zero deaths from melanoma.

Professor Georgina Long Professor Richard Scolyer Co-Medical Directors



David Day

When David Day lost his life to melanoma, he was only 33 years old, with three daughters under the age of six. He passed away just eight months after being diagnosed. Despite all the treatments, nothing worked and David's melanoma progressed rapidly. David made such an impact on his clinical team at Melanoma Institute Australia that they were inspired to immediately start a new research project into why some patients don't respond to treatments that work for others, and instead their disease progresses rapidly. The research team is studying the blood and tissue samples from patients like David, in the hope of understanding why treatments failed and to pave the way for new and potentially lifesaving therapies for this group of patients. David's family is dedicated to helping too – his dad and aunt tackled the Larapinta Trek to raise money for research, and his wife Jenny and his little girls were featured in our 2018 Tax Appeal and are promoting Melanoma March.



Research Strategy

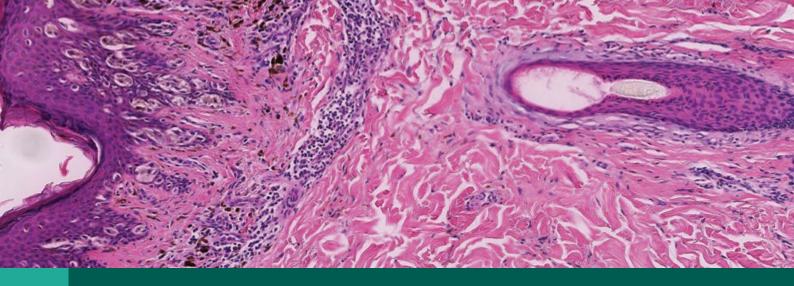
Aim: to produce new knowledge and translate it into better outcomes for people with melanoma

FOCUS	THEME 1 The person with early, curable disease	THEME 2 The person with advanced disease	THEME 3 The person at high risk of melanoma	THEME 4 Support and survivorship	THEME 5 Society, policy and economics
Summary	What makes a melanoma dangerous: how to treat it when it arises, with the best chance of cure	How best to treat melanoma that has spread or is locally advanced, for cure or long-term control	The causes of melanoma: how to better prevent and detect it	How best to support people dealing with melanoma and the consequences of its treatment	How healthcare systems, providers and government can best meet the needs of people with melanoma
Health Outcomes	Fewer people in whom melanoma recurs, more options for cure up front, with the least intervention	Metastatic or advanced melanoma cured, or its effects controlled, with good quality of life, as long as possible	Fewer people getting melanoma, and melanoma detected earlier and more efficiently	Fewer unmet personal needs in people with melanoma and their families; good quality and end of life	Good care available to all with melanoma, at a sustainable cost to individuals and society



Emma Dunlop

In February 2014 Emma Dunlop spotted a freckle inside her hairline that was turning pink. It was removed that day and turned out to be melanoma. Emma quickly became one of MIA's most loved and active community fundraisers, working tirelessly to raise funds for research whilst at the same time battling her melanoma. Emma volunteered for Melanoma March each year, and even though her disease had progressed to Stage IV, last year she took on the Great Wall of China with a group of fellow trekkers to raise funds for MIA. Sadly, Emma passed away in May 2018. Emma was on a mission to support research to find a cure for all melanoma patients – a mission her family is continuing in her honour.



Laboratory Research

Our laboratory program aims to transform basic understanding of melanoma in a way that accelerates new prevention, diagnosis and treatment.

MELANOMA GENOME DATA HAVE MASSIVE IMPACT

The Australian Melanoma Genome Project (AMGP) made waves with one of the highest-profile papers in cancer research. Our researchers detailed in the journal Nature that melanomas of the fingers, toes and internal body surfaces result from unique cancer-causing processes, which pointed the way to new treatments for these cancers. Recent studies from the AMGP have shown that skin melanomas suffered by young people, even teenagers, are driven by excessive damage from ultraviolet light. This reinforces how important sun protection is throughout life, and also implies that our personal vulnerability to DNA damage is a critical angle for us to explore in preventing and detecting melanoma.

Our landmark collaboration on what molecules "build" a melanoma, The Cancer Genome Atlas (TCGA) melanoma study in the top journal Cell, has become one of MIA's most influential research projects. MIA specimens and data made up one third of this project and our researchers played leading roles.

Our research has shown that skin melanomas suffered by young people, even teenagers, are driven by excessive damage from ultraviolet light.

DR JAMES WILMOTT, MIA FACULT

Crucially, those data were immediately made publicly available and have so far supported 600 melanoma research studies around the world. This TCGA network has now combined our melanoma data with similar work from all other cancers, delivering 29 studies in Cell and related top journals. Together, these projects have decoded cancer like never before - explaining what links melanoma to other cancers and what is unique to melanoma – and will accelerate research on all types of cancer for years to come.

1-YEAR SURVIVAL: from 25% to 75%

2-YEAR SURVIVAL: from <15% to >60%

3-YEAR SURVIVAL: from <10% to >50%

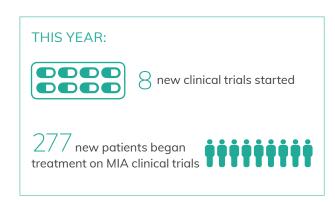




Clinical Trials

Clinical trials are a crucial part of the research undertaken at Melanoma Institute Australia. Coordinated by MIA's Clinical Trials team at The Poche Centre, and at various locations throughout our network, our trials focus on improving outcomes for patients with melanoma whilst providing access to new treatments.

With a focus on surgery, radiotherapy, dermatology and systemic therapy, clinical trials are an option for all patients at MIA. Nearly 700 patients are ongoing participants, with 277 new patients enrolled to clinical trials during the past year. Innovation in clinical research is vital so our clinical trials encompass a broad range of novel treatments, new treatment combinations, and new treatment approaches (neo-adjuvant therapy), to combat melanoma from every possible angle.



SPOTLIGHT ON... NEO-ADJUVANT THERAPY

ESSENTIAL NEW PATHOLOGY GUIDE FOR THE MOST EXCITING CANCER TRIALS

Neo-adjuvant trials are an exciting way to zero in on effective novel cancer drugs or immune treatments as fast as possible – by giving them prior to surgery for a short duration (6 weeks), and then operating to remove what is left. What can be learned from the pathology at that point is critical, and MIA's Co-Medical Director Professor Richard Scolyer has led the way in defining what is best practice, through new guidelines just published in the prestigious Annals of Oncology.

Our work in defining pathological response means we have a clearer picture of which patients are responding to certain treatments and to what extent, enabling us to better target treatments for optimum outcomes.

PROFESSOR RICHARD SCOLYER, CO-MEDICAL DIRECTOR OF MELANOMA INSTITUTE AUSTRALIA.

CURRENT NEO-ADJUVANT TRIALS

Neo-adjuvant treatment is a medication sequencing approach whereby drug therapy is given before complete lymph node removal surgery for patients with Stage III melanoma that has spread to the lymph nodes. It is the new frontier in melanoma clinical research, pioneered by Melanoma Institute Australia with other world leading organisations, who together form the International Neo-Adjuvant Melanoma Consortium. Two recent trials at MIA, OpACIN-Neo and NeoTrio are leading the way forward.

1. OpACIN-Neo

The OpACIN-Neo study for high-risk Stage III melanoma patients, led by a team out of the Netherlands with a large number of patients recruited from Melanoma Institute Australia has shown that a modified combination of the immunotherapies ipilimumab and nivolumab given prior to surgery produced a response in over 70% of patients. Importantly, there were drastically reduced side effects for patients and remarkably, none of these patients have relapsed to date.



Melissa Taque

When Melissa Tague was diagnosed with Stage III melanoma earlier this year, she was devastated to learn that standard treatment was surgery followed by having to 'wait and see' if her melanoma would progress to Stage IV. The mum of two young girls jumped at the opportunity to participate in the OpACIN-Neo clinical trial, where she was given a revised dose and schedule of combination immunotherapy before surgery, in the hope it would shrink the melanoma cells and prevent her disease progressing. Melissa has had a complete response to the trial, giving her hope and confidence that she has a long future ahead of her with her children and husband.

'To be given the chance of hope in what was a very dark time in our lives is all we can ask for. The ripple effect this has is astonishing. I am a mother, a wife, a daughter, a friend, a co-worker, a person who still has many things to achieve in life and this is all thanks to the amazing work of Melanoma Institute Australia.' MELISSA TAGUE, CLINICAL TRIAL PATIENT

A NEW TRIAL IN DERMATOLOGY

Lentigo maligna (LM) is a form of early melanoma which is not invasive (in-situ). Most commonly affecting the face, it occurs on exposed sun-damaged skin. Australia has the highest incidence of LM in the world and with an aging population, LM rates are likely to increase. There is up to a 50% life-time risk of progression from LM to invasive melanoma which is why early detection and effective treatment are very important. Surgery is the preferred way to treat LM, however surgery is not always possible for extensive lesions covering large areas, therefore more conservative measures may be considered.

The RADICAL trial is investigating two treatment options for the treatment of LM when surgery is not feasible. In this trial, patients are randomised to either topical cream treatment with imiquimod or radiotherapy treatment. The RADICAL trial aims to address which type of treatment is most effective. The RADICAL trial is currently open at MIA as well as centres across Australia and internationally and it is supported by the Australia and New Zealand Melanoma Trials Group (ANZMTG).

In addition to the trials conducted at MIA, MIA sponsor many trials undertaken through ANZMTG and also provide ongoing financial and office accommodation support to ANZMTG personnel.

Standard therapy for Stage III patients is to undergo surgery to remove their melanoma, however those who undergo surgery alone have a significant risk (40-70%) of their disease recurring and progressing to Stage IV.

Neo-adjuvant (pre-surgery) ipilimumab and nivolumab was found to induce a stronger immune response, leading researchers to believe that when the immunotherapy is able to see the melanoma cells, they are able to assist the immune system to mount a more effective response.

This is one of the most exciting things happening in drug therapy in melanoma and has the capacity to ultimately change clinical practice around the world.

PROFESSOR GEORGINA LONG, CO-MEDICAL DIRECTOR OF MELANOMA INSTITUTE AUSTRALIA.

2. NeoTrio

The NeoTrio trial, developed by MIA investigators, is running at The Poche Centre and Westmead Hospital. Patients receive a course of immunotherapy (pembrolizumab) or immunotherapy combined with targeted therapy (dabrafenib and trametinib) before and after their complete lymph node dissection surgery. There is some evidence to suggest that targeted therapy increases the number of immune cells in the tumour, thereby giving the immunotherapy more weaponry to boost and attack cancer cells. 13 patients across both sites are currently receiving treatment on this trial, which aims to recruit a total of 120 patients over the next year. The trial builds upon a previous neo-adjuvant clinical trial conducted at MIA which showed that close to 50% of patients had no evidence of melanoma at the time of their complete lymph node dissection surgery after 12 weeks of targeted therapy treatment.



Photo courtesy of Sam Ruttyn / The Sunday Telegraph

Dads and Babies

Meet babies Mia Drover and Gracie June Georgina Brown. Not only are they the apple of their dads' eyes, but they are the ultimate thank you to the organisation that saved their lives.

Josh Drover (pictured right) was 30 when he was diagnosed with advanced melanoma. He had an outstanding response to a MIA clinical trial and is now cancer free. Remarkably, his wife fell pregnant while Josh was halfway through the trial and they named their bundle of joy Mia. 'It is a reflection of what we went through. Without the support and research from MIA, I might not be here,' Josh said.

It was a similar story for Adam Brown (pictured left). Two years after being put on a MIA clinical trial he is now cancer free, with his wife and he welcoming their second baby, Gracie June Georgina Brown. 'Professor Georgina Long is the reason we could have another baby. We really liked her name and wanted to make it a part of Gracie's name. It is our way of showing thanks,' said Adam.

Applied Research

Our applied research aims to drive change in the health system that will benefit people affected by melanoma, by exploring patient experiences and perspectives and analysing the cost and quality of care.

SAVING MILLIONS BY SCREENING THE RIGHT PEOPLE THE RIGHT WAY

MIA researchers have shown over the past several years that melanomas are detected earlier and more efficiently if people at highest risk of melanoma follow a simple program of six-monthly skin examinations with the help of total body photography. This influential research was embedded in the recently updated Clinical Guidelines for the Diagnosis and Management of Melanoma and is relevant to about 18% of people who currently develop melanoma. We have now shown that if this approach was supported across Australia, compared to what is average practice now, our health system would save at least \$4 million per year. This is in addition to benefits to patients of being diagnosed earlier and having fewer and better-targeted excisions.

Planning and developing services must use economic measures that reflect how people value those services, from their perspective as patients and considering their view on their quality of life. In our recent research with people at high risk of melanoma, we have now shown how best to take issues like fear of cancer recurrence and quality of life into account when doing health services research in melanoma.

YES, IT IS WORTH MEASURING GENETIC RISK OF MELANOMA IN THE CLINIC

The Australian Melanoma Family Study showed conclusively that knowing our genetic background, which includes many gene variations that influence melanoma risk, can help in the clinic. In its 30th research paper, MIA investigators and Australian colleagues collaborated once more with a similar UK study group to compare the performance of testing these genetic variations (SNPs) with conventional risk factors, to predict a person's risk of melanoma. Conventional risk factors like skin colour, mole counts, sun sensitivity, age and sex did well, but gene tests added something extra. In particular, they helped sort out who was at unsuspected high risk due to their genes, even if they seemed to have low risk skin. This is likely to be where genetic testing has the biggest impact in future.

Knowing our genetic background, which includes many gene variations that influence melanoma risk, can help in the clinic.

SURGICAL APPLIED RESEARCH

Surgery continues to be an important treatment for patients where their melanoma is detected early. MIA's applied research has helped address issues surrounding what is the appropriate extent of surgery for optimum patient outcomes. The EAGLE FM trial aimed to determine whether any patient benefit came from the additional removal of pelvic lymph nodes as well as the superficial lymph nodes in the groin.

The MSLT-II trial, involving close to 2,000 patients internationally, assessed whether complete lymph node dissection or monitoring with ultrasound was the most effective way to treating patients who have a positive sentinel lymph node biopsy. The results of both trials have had an impact on clinical practice around the world.



Publications and Awards

There has been a 50% increase in publications in highest impact journals over the last four years.

PUBLICATIONS

FIN YEAR	n	Q	Q+
2017-2018	119 (17%)	79 (14%)	<u></u>
2016-2017	102	69	24
2015-2016	90	57	17
2014-2015	108	73	17
2013-2014	119	85	18

Q Publications in journals with the strongest effect (top 20%) on institutional rankings

Q+ Publications in the highest impact category – Nature, Lancet, New England Journal of Medicine etc.

AWARDS & HONOURS - CO-MEDICAL DIRECTORS (JULY 2017 TO JUNE 2018)

Professor Richard Scolyer

- 2017 NSW Premier's Awards for Outstanding Cancer Research: Wildfire Award for most highly cited paper in a peer reviewed journal
- 2017 Excellence in Translational Cancer Research, NSW Premier's Awards for Outstanding Cancer Research, Cancer Institute NSW
- 2018 William O. Russell Lectureship and Joanne Vandenberge Hill Award for Lifetime Achievement in Anatomical Pathology, MD Anderson Cancer Center
- Fellowship of the Australian Academy of Health and Medical Sciences 2017

Professor Georgina Long

- Clarivate Analytics 2017 Highly Cited Researcher – Clinical Medicine 2017
- 2017 NSW Premier's Awards for Outstanding Cancer Research: Wildfire Award for most highly cited paper in a peer reviewed journal
- 2017 Excellence in Translational Cancer Research, NSW Premier's Awards for Outstanding Cancer Research, Cancer Institute NSW
- Fellowship of the Australian Academy of Health and Medical Sciences 2017

UPDATED CLINICAL GUIDELINES FOR MELANOMA

Melanoma patients across Australia will benefit from the updated Clinical Guidelines for the Diagnosis and Management of Melanoma, developed by Melanoma Institute Australia and Cancer Council Australia. The updated guidelines reflect new and advanced diagnostic and treatment options for melanoma resulting from research reported over the last five years.

'The melanoma treatment landscape has changed dramatically in recent years due to extensive and ongoing research and clinical trials, and it is vital that frontline healthcare professionals across Australia are aware of new diagnostic techniques and treatments that are saving lives,' said Professor John Thompson AO, Chair of the Guidelines Working Group and Senior Faculty Member at MIA.

Congratulations to the MIA team awarded at the 2017 NSW Premier's Awards for Outstanding Cancer Research, particularly Professor Richard Kefford AM awarded Outstanding Cancer Researcher of the Year and Professor Helen Rizos for the Wildfire Highly Cited Publication Award (pictured above).



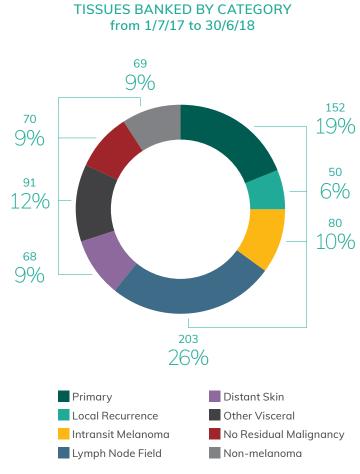
Biospecimen Bank

A focus for the Biospecimen Bank this year was its Primary Dissociate Study. With the help of MIA's Pathology Fellows, extra primary tissue was reserved where possible, with the tumour cells separated from the tissue in the laboratory soon after collection. This enables the separated tumour cells to be used in further research and experiments.

MIA's Biospecimen Bank remains the largest collection of melanoma samples in the world, and drives global discovery of new treatments and translational research. We are grateful to all MIA patients who contribute samples to the Biospecimen Bank, and by doing so, play a vital role in research and treatment advances.









Research Database MRD2

MIA's Research Database, now known as MRD2, was established in the 1960s. The database is the largest single-institute clinical database for melanoma in the world, containing the records of more than 45,000 patients.

This clinical data have enabled major initiatives in melanoma research, underpinned the development of the standard international clinical and pathological classifications of melanoma, and continues to make MIA a magnet for scientific collaboration and new clinical trials.

This year, data extracted from MRD2 have fuelled 87 research projects with impacts including:

• Development of an updated prediction tool for sentinel lymph node positivity. The tool has better accuracy over the existing 10 year-old method and includes new parameters clinically associated to SLN-positivity such as mitotic rate and lymphovascular invasion.

> MRD2 now contains the records of over 45,000 patients

- Underpinning the International Melanoma Database Discovery Platform (IMDDP), established to support the American Joint Committee on Cancer's (AJCC) Staging Manual 8th Edition. MRD2 contributed 19,127 records gathered from 15 centres across seven countries to IMDDP, with analysis of this evidence-based international database potentially refining contemporary staging criteria and leading to development of new algorithms for estimating prognosis in melanoma patients across all stages of the disease.
- Greater understanding of features within individual tumour cells that predicate survival patterns in Stage II and Stage III melanoma patients. MRD2 contributed samples and associated clinical data to InterMEL, an international consortium of 12 clinical research centres, which is leading this vital area of research.



This year, data have been extracted for 87 different research projects



The Brazier family

The Brazier family, from the NSW Northern Tablelands, didn't know much about melanoma until father of four Mark was diagnosed with the disease in 2015. Mark's melanoma progressed rapidly and he passed away the following year. Not wanting to see other families go through what they had, Mark's four sons – Angus, Harrison, Thomas and Hugo – decided to raise money for research into the disease. They launched 'Five Cent Friday', a community fundraising campaign that swept across NSW and raised more than \$25,000 for Melanoma Institute Australia. 'Hopefully this money can help save lives so no one else has to die from melanoma,' said Angus. The boys and their mother Kath aren't stopping there. They are also selflessly sharing their story as part of the Melanoma March 2019 campaign.



Education

Education is one of the three pillars of MIA. Our Education Program is dedicated to raising community awareness about melanoma and its prevention, and also to significantly improving national and international standards of care through education of clinicians.

MELANOMA EDUCATION PORTAL

We are proud to have launched our Melanoma Education Portal (melanomaeducation.org.au) which translates world-leading research and clinical practice into quality educational programs. The website is helping more than 1,000 GPs, specialists and nurses stay on top of the latest developments in melanoma research and treatment through interactive and engaging educational programs, videos and resources. These resources have been developed by our experts here at MIA and will in the long-term help ensure best practice and equity of care for melanoma patients around the country. The website is free to access with thanks to the generous support of our sponsors.



THE ULTIMATE MELANOMA MASTERCLASS

MIA celebrated the extraordinary contribution of Australia's most distinguished clinicians and researchers in the field of melanoma at *The Ultimate Melanoma Masterclass.* Our luminaries — Professors Stan McCarthy AO, Richard Kefford AM, Roger Uren, John Thompson AO and Peter Hersey (pictured above, left to right) — have transformed the diagnosis, treatment and management of melanoma during their long and remarkable careers. Almost 350 clinicians and researchers gathered to learn from the luminaries as well as hear a comprehensive review on the latest advances in research and clinical management of melanoma.

MELANOMA NURSE CONFERENCE

Recognising the vital role nurses play in the treatment and care of melanoma patients, MIA Education hosted the inaugural Melanoma Nurse Conference. Some 100 nurses from across NSW attended the full-day course that focussed on understanding the patient experience better, from detection through to treatment of advanced disease. So popular and successful was the inaugural Melanoma Nurse Conference that it is likely to become an annual event

MIA EDUCATION PROGRAM SPONSORS











Each year thousands of patients come to MIA for treatment at one of The Poche Centre clinics. Their clinical care is underpinned by MIA's multi disciplinary team of world-leading oncologists, surgeons, radiologists, pathologists and dermatologists who meet each week to discuss management of the most complex and challenging cases. This weekly collaboration, chaired by Professors Long and Scolyer, includes input from our Fellows and also provides an opportunity for trainees and visiting clinicians to learn as part of our Observership Program.

2017/2018 FELLOWS

Martin Tio

CAMERON MEDICAL ONCOLOGY FELLOW

Carina Owen

MEDICAL ONCOLOGY FELLOW (FUNDED BY RICKY RICHARDS)

Chandra Adhikari

JANI HAENKE MELANOMA PATHOLOGY FELLOW (FROM FEB 2018)

Tristan Dodds

JANI HAENKE MELANOMA PATHOLOGY FELLOW (UNTIL DEC 2017)

Peter Ferguson

MCMURTRIE CANCER PATHOLOGY FELLOW (UNTIL JUNE 2018)

Teresa Bailey

MCMURTRIE CANCER PATHOLOGY FELLOW (FROM JUNE 2018)

Milap Rughani

POCHE FELLOW IN MELANOMA AND SURGICAL ONCOLOGY

Thomas Pennington

POCHE FELLOW IN MELANOMA AND SURGICAL ONCOLOGY

Shehnarz Salindera

BREAST AND MELANOMA SURGICAL ONCOLOGY FELLOW

Inês De Silva

POCHE FELLOW IN MELANOMA AND MEDICAL ONCOLOGY



Bettina and Madi

Little Madi was only a toddler when her dad Peter was diagnosed with melanoma after finding a painful lump in his arm in 2014. Peter's was a rare and aggressive form of cancer called nodular melanoma, which presents as lumps, and he passed away before Madi turned four. 'I miss Daddy,' says Madi. 'And I love him."

It was Peter's wish that his family do all they could to prevent little Madi from being at risk of developing melanoma. He knew research was the key to ending melanoma for future generations. Madi and her mum Bettina honoured Peter's legacy by being the faces of Melanoma March 2018 and encouraging Australians to join them in raising funds to support life-saving research. Bettina is also a volunteer with MIA's Speakers' Hub and shares their story to raise awareness about melanoma.

Community Fundraising



MELANOMA MARCH 2018



raised to support melanoma research



participants nationally



Melanoma March locations



GREAT WALL OF CHINA TREK

It was 11 days of culture, adventure and challenges for our team of volunteers taking on the Great Wall of China trek. The MIA team was made up of 10 generous supporters from across the country, including the unstoppable Emma Dunlop who walked the entire way despite her advanced melanoma. Our Great Wall trekkers raised in excess of \$70,000 and came home tired but inspired!





Our volunteer speakers have travelled far and wide to share their stories and advocate for greater melanoma awareness. From community groups, to corporate events and schools, our speakers have shared their personal experiences with melanoma and urged fellow Aussies to be sun-safe and importantly, support life-saving research. The Hub (as we like to call it) is increasingly in demand, and we thank our volunteer speakers for helping be advocates for change.

THE IAKE BORLACE LUNCHEON

When North Broken Hill Football Club favourite Jake Borlace was hit with a shock diagnosis of melanoma, his teammates and friends swung into action. The result – the Jake Borlace Luncheon at Adelaide Oval. The Jakob Arlen Borlace Trust partnered with MIA for the event which was hosted by Chris Dittmar from Triple M Adelaide. \$40,000 was raised, with MIA receiving proceeds from ticket sales. Best of luck Jake with your ongoing recovery.

SA

Thank You

Thank you to our Melanoma March volunteer committees across the country and to our partner organisations melanomaWA, Australian Melanoma Research Foundation and Skin & Cancer Foundation Inc.

MELANOMA MARCH PRINCIPAL PARTNER

SUPPORTING PARTNERS









brightside



VIOLETS AND LACE MASOUERADE BALL

Shout out to Violets and Lace for hosting a fabulous masquerade ball in Townsville. The Ball raised \$10,000 in memory of 30 year old Katie-Lee Spence who passed away from melanoma only 10 months after being diagnosed. We greatly appreciate the ongoing fundraising efforts of Violets and Lace in support of lifesavina research.



THROUGH THE LOOKING GLASS

Through the Looking Glass' raised over \$28,000 in support of Melanoma Institute Australia, Wow! Bravo to Tamra and Leon Betts for pulling off such a marvellous event in memory of their daughter, and much-loved sun-safety and research advocate, Emma.



LEAVE YOUR HAT ON

THE FOOD FOR THOUGHT BRISBANE LONG LUNCH

What better place for a leisurely Long Lunch than beautiful Brisbane, and what better source of inspiration than the memory of Emma Betts. The Food for Thought Brisbane Long Lunch was a HUGE success raising over \$27,000 for Melanoma Institute Australia research, which Emma supported so passionately. Emma's family attended the lunch and we sincerely thank the Long Lunch organising committee for their support.



MACARTHUR CHARITY DINNER

The 2018 annual Macarthur Charity Dinner raised a massive \$47,000 - that's close to \$10,000 more than last year! We cannot thank the amazing team of volunteers enough, as without your continued efforts we couldn't continue to fund our ground breaking research.



BLACK RIBBON BALL

A big thank you to Lisa, Nat and Nadine for helping make the Black Ribbon Ball such a success. More than \$27,000 was raised for life-saving melanoma research in honour of Brian Chudleigh and Kim Troy. What an incredible feat!



CITY2SURF 2017

Team Melanoma was head of the pack at the 2017 City2Surf, spurred on by none other than our (unofficial) Team Captain Jay Allen! Sweating it out from Hyde Park to Bondi Beach, our runners raised \$23,000-epic result Team Melanoma!



DENIS MCFARLANE GOLF DAY For Aletta and Alan McFarlane, the golf day in memory of their son Denis was a

chance to help others. Off the green, raffles and auctions raised over \$4,000 for MIA to

support our ongoing research efforts.

Thumbs up to the Aussies who joined us for our month-long 'Leave Your Hat On' campaign. From fedoras to fancy dress, there was no shortage of creativity as supporters across the country donned an eclectic collection of headwear to raise awareness about sun-safety and \$60,000 for melanoma research. 102-vear old melanoma survivor Bert Collins shot to national fame as the face of the

BAYVIEW LADIES CHARITY GOLF DAY Bayview on Sydney's northern beaches was awash with hats and sunscreen as the ladies teed off for the Bayview Ladies Charity Golf Day. A big thank you to

Susanne and all involved in the golf day for raising over

campaign.

\$13,000 for MIA

PETER WHATSON MEMORIAL GOLF DAY

It is an annual event on the South Coast calendar, and we certainly appreciate it! Our sincere thanks to Trish Whatson and Peter's family, friends and the Illawarra golfing community for raising in excess of \$21,000 in Peter's memory. You are making a huge difference and we thank you.





COMMUNITY PARTNERSHIPS

When the Manly Warringah Sea Eagles took to Brookvale Oval for the NRL Women in League Round, so too did MIA! Many thanks to our generous benefactor Kay Van Norton Poche for this opportunity to reach a new audience with our life-saving message.

Go the mighty Wollongong Wolves! Once again MIA's logo took pride of place on player jerseys, meaning sun-safety was always top of mind for players and spectators alike.

Acknowledging Our Generous Donors

PRINCIPAL BENEFACTOR

Greg Poche AO & Kay Van Norton Poche

LIFE GOVERNORS

The Cameron Family

Reg Richardson AM & Sally Richardson

Peter & Sally Doherty (CP2)

CLEARbridge Foundation

GOVERNORS

Apex Foundation

BENEFACTORS

Jim & Fran Sweeny

Jani Haenke Melanoma Pathology Fellowship (BB & A Miller Foundation)

Jürgen & Mary Fengels

Toni & Mark Heath

Jo Phillips

Jerry Ellis AO & Ann Ellis

The Petre Foundation

Ray & Penni Jones

Nevin & Marie Holland

The Macintosh Foundation

Skipper Jacobs Charitable Trust

Deborah & John McMurtrie

Tour de Cure

Perpetual Foundation – HT Andrew

& Agnes Cheung Endowment

Perpetual Foundation – The Hilmer Family

Foundation

N&H Moore

The Melanoma Foundation

Friends of the Mater Foundation

COMPANIONS

The Manildra Foundation

Bob Mac Smith

The Ross Trust

Goodridge Foundation

James N. Kirby Foundation

Nigel Masters

Susan Maple-Brown AM

Janet Ferguson PhD Scholarship

The Charity Challenge

Michael Alscher

The Late Professor Geoffrey White AM

Norman Green

Clive & Lee Thomas CT Freight Pty Ltd

Gai & Tony Wales

Peter Rockey

Caroline & Glenn Crane

ASSOCIATES

Rosemary Pryor Foundation

Macquarie Bank Foundation

Ashley & Felicity Benoit

Shoalhaven Melanoma Committee

Berson Family

Robert O Albert AO

Ann Powell

Stephen & Michelle Bennett

Julie & Don Priest

Mater Imaging

Keith & Maureen Kerridge

David Mortimer AO & Barbara Mortimer

Peter Hemming

Equity Trustees

Kaye & Anthony Flynn

The Pip & Dick Smith Foundation

Robert & Carole Lane

Jocelyn Lloyd

Joanne Howarth

Jakob Arlen Borlace Trust

Nicolette Lewis

FRIENDS

Joe Collins

Dr John & Christine Stephen

Paul & Michelle Amar

Tony Merrett

Yvonne Schofield

Peter Vogliotti & Angela McHugh

Valspar Pty Ltd

John Buchanan

The King Family

The Watchorn Family

CUSTODIANS FOR A CURE (ESTATES)

The Estate of the Late Zara Splayford

The Estate of the Late Ann

Margaret Campbell

The Estate of the Late Sydney

Donald Smith

The Estate of the Late Brett Arthur

The Estate of the Late John Lethe

The Estate of the Late Mary

Elizabeth Brodie

The Estate of the Late Peter Hammond

Corporate Partners

Johnson Johnson Pacific













CLAYTON UTZ







Raphael McGowan

Raphael McGowan is a man on a mission, driven by the memory of his adored sister Tess who passed away from melanoma only months after giving birth to her baby daughter Mabel. Tess was only 31 years old. And so began Raph's mission to save other families from enduring what his had. He began volunteering for Melanoma Institute Australia, raising awareness about sunsafety but also money to fuel further research into the disease. Raph's latest endeavour is sure to be his most life-changing yet – the development of a sunscreen applicator called bakslap, with \$1 from every sale going to support MIA research.

Governance

MIA is a company limited by guarantee with deductible gift recipient status. MIA is governed by a Board of Directors and advised by Faculty, led by the Co-Medical Directors. Faculty is advised on clinical, research and education matters by Committees.

BOARD OF DIRECTORS

Grant King, MA, FAICD, Chairman

Grant King was appointed Chairman of MIA on 28 February 2017. He is the former Managing Director of Origin Energy Limited where he worked for 17 years. Grant has extensive experience in the Australian oil and gas industry, as the former Managing Director of Boral Energy and General Manager of AGL Gas Companies. He is a Fellow of Australian Institute of Company Directors and is also President of the Business Council of Australia.

Professor Georgina Long, BSc, PhD, MBBS, FRACP

Professor Long is Co-Medical Director of MIA and Chair of Melanoma Medical Oncology and Translational Research at MIA, Royal North Shore Hospital and The University of Sydney. Professor Long leads an extensive clinical trials team and laboratory at MIA, with a focus on targeted therapies and immunooncology in melanoma. She is principal investigator on Phase I, II and III clinical trials in adjuvant and metastatic melanoma, including trials in patients with active brain metastases. Professor Long is the first Australian and first woman to be President of the Society for Melanoma Research, the world's most prestigious international melanoma research association. She has authored over 200 publications in melanoma clinical and translational research and has presented at hundreds of international conferences.

Professor Richard Scolyer, BMedSci, MBBS, MD, FRCPA, FRCPath, FAHMS

Professor Scolyer is Co-Medical Director and Consultant Pathologist at MIA; Senior Staff Specialist, Tissue Pathology and Diagnostic Oncology, Royal Prince Alfred Hospital, Sydney; and Clinical Professor, The University of Sydney. He provides a clinical consultation service for the diagnosis of difficult pigmented lesions and receives more than 2000 cases for opinion from Australasia and beyond annually. He is Vice Chair of the Melanoma Expert Panel of the American Joint Committee on Cancer (AJCC) for the 8th edition of AJCC Cancer Staging System, most recently co-editing the new WHO Classification of Skin Tumours, 4th Edition. He has co-authored more than 500 publications and has presented on more than 300 occasions at conferences throughout the world.

Associate Professor Jonathan Stretch AM, D.Phil (Oxon) FRACS

Associate Professor Stretch has been Deputy Medical Director of MIA since 2007 and was one of the founding Board of Directors. Associate Professor Stretch undertook his surgical training in Sydney, becoming a Fellow of the Royal Australasian College of Surgeons (Plastic Surgery) in 1987. He was appointed to Royal North Shore Hospital in 1991 and the Sydney Melanoma Unit and Royal Prince Alfred Hospital in 2002. He is Associate Professor of Melanoma and Skin Oncology at The University of Sydney. He was made a Member of the Order of Australia in 2012.

Jennifer Elliott, BA (Hons) LLB (Hons) MA (Hons)

Jennifer Elliott was appointed a Non-Executive Director of MIA in 2012 and as Chair of the Finance Committee in 2013. Jennifer has broad Australian and international experience in the financial services industry, with a particular focus on business strategy, corporate governance and regulation, and human resources. Jennifer previously held various roles within Moody's Corporation for 20 years, including Regional Head – Asia Pacific for Moody's Investors Service, and Chief Human Resources Officer for the global Moody's Corporation.

Sally Doherty, BA, GAICD

Sally Doherty was appointed a Non-Executive Director of MIA in 2016. Sally co-founded the investment firm CP2 along with her late husband Peter Doherty and Professor Robert Officer in 1997. She held the position of Managing Director from 2012 to 2015, and has been Chair of the Board from 2007. Sally has 25 years' experience in investment execution and managing investment portfolios for long-term investors.

Full bios available at www.melanoma.org.au

Matthew Browne was MIA's Company Secretary during the financial year.



Bert Collins

Bert Collins is our (and perhaps the world's) oldest melanoma survivor. At 100 years of age, Bert was diagnosed with advanced melanoma. Growing up, Bert spent a lot of time outside and there was no education about sun safety. Luckily, he had a specific type of tumour that responded well to immunotherapy. 'Associate Professor Alex Menzies took a chance on me, despite my age. I had melanoma in my brain and lung and he removed a growth near my mouth. I am so grateful to MIA's ongoing research efforts, which ultimately saved my life,' said Bert, who was joined by Associate Professor Menzies and MIA staff for his 102nd birthday celebrations.

FACULTY

Professor Richard Scolyer - Co-Medical Director Professor Georgina Long – Co-Medical Director

Associate Professor Jonathan Stretch AM, Deputy Director

Associate Professor Matteo Carlino

Associate Professor Pascale Guitera

Associate Professor Alex Guminski (resigned 1 Nov 2018)

Professor Peter Hersey

Professor Angela Hong

Professor Richard Kefford AM

Professor Graham Mann

Associate Professor Alex Menzies

Professor Omao Niewea

Professor Helen Rizos

Associate Professor Robyn Saw

Dr Kerwin Shannon

Professor Andrew Spillane

Professor John Thompson AO

Dr James Wilmott

Matthew Browne (ex-officio)

Additional since 30 June 2018

Associate Professor Anne Cust

Professor Diona Damian

Associate Professor Rachael Morton

COMMITTEES

Research

Advise Faculty and Medical Directors on all strategic and operational matters affecting MIA research

Professor Graham Mann (Chair)

Professor Diona Damian

Professor Nicholas Hayward

Professor Richard Kefford AM

Craig Lawn (consumer representative)

Associate Professor Alex Menzies

Professor Omgo Nieweg

Professor Helen Rizos

Professor John Thompson AO

Dr James Wilmott

Associate Professor Rachael Morton

Professor Georgina Long (ex-officio)

Professor Richard Scolyer (ex-officio)

Matthew Browne (ex-officio)

Maria Gonzalez (ex-officio)

Valerie Jakrot (ex-officio)

Serigne Lo (ex-officio)

Clinical

Advise Faculty and the Medical Directors on operational and strategic matters affecting clinical services

Professor Andrew Spillane (Chair)

Maria Gonzalez

Professor Angela Hong

Valerie Jakrot

Dr Linda Martin

Associate Professor Jonathan Stretch AM

Kate Willis

Professor Georgina Long (ex-officio)

Professor Richard Scolyer (ex-officio)

Matthew Browne (ex-officio)

Education

Advise Faculty and the Medical Directors on the provision of melanoma education to clinicians, patients and wider community to encourage best practise and promote melanoma awareness

Associate Professor Robyn Saw (Chair)

Georgia Cairns

Professor Matteo Carlino

Dr Kerwin Shannon

Dr Annika Smith

Professor Georgina Long (ex-officio)

Professor Richard Scolyer (ex-officio)

Matthew Browne (ex-officio)

Derek Bryan (ex-officio)

Danielle Fischer (ex-officio)

Additional since 30 June 2018

Dr Michael Armstrong (consumer representative)



Professor Graham Mann



Associate Professor Robyn Saw



Professor Andrew Spillane

Concise Financials

MIA has had another strong year financially, with \$15.2 million raised in revenue from all services, including \$7.2 million in philanthropic donations and fundraising.

This is a 13% increase from 2016/2017 and is a wonderful endorsement of the confidence in MIA to achieve its mission.

MELANOMA INSTITUTE AUSTRALIA

STATEMENT OF COMPREHENSIVE INCOME

For the Year Ended 30 June 2018

	2018 \$	2017 \$
REVENUE		
Donations	7,216,853	6,386,496
Investment Income	485,801	518,164
Poche Centre Income	922,644	826,236
Research Income	6,380,706	5,545,439
Other Income	148,340	188,512
Total revenue from ordinary activities	15,154,343	13,464,848
EXPENSES		
Audit	(30,000)	(30,000)
In Kind Rental of Poche Centre	(750,820)	(750,820)
Personnel Costs	(8,688,843)	(7,335,902)
Conference/Functions	(25,543)	(18,093)
Administration Costs	(1,041,982)	(810,148)
IT Support	(277,531)	(258,697)
Utilities	(170,760)	(141,789)
Fundraising	(525,486)	(427,995)
Cleaning	(85,801)	(88,278)
Building Operations	(331,272)	(445,553)
Other Expenses	(37,844)	(27,965)
Depreciation Expense	(444,847)	(373,563)
Bank & Investment Fees	(109,888)	(130,173)
Research Expense	(3,178,993)	(2,845,623)
Total expenses	(15,699,610)	(13,684,599)
LOSS FOR THE YEAR	(545,267)	(219,751)
Other comprehensive income		
Available for Sale Assets - net change in fair value	408,034	274,624
Total comprehensive (loss)/income for the year	(137,233)	54,873

MIA ends 2017/18 in a strong financial position, with cash and financial assets of almost \$19 million.

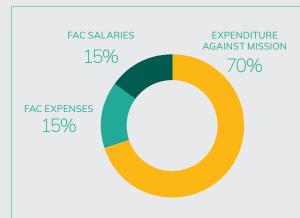
MIA's net assets total \$15.5 million providing MIA its financial strength to invest in the latest research, techniques and infrastructure to cure melanoma. MIA has set aside \$3.4 million to fund new research projects, the subject of donors' specific wishes.

MELANOMA INSTITUTE AUSTRALIA

STATEMENT OF FINANCIAL POSITION

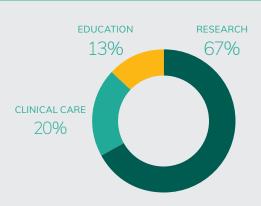
As at 30 June 2018

	2018 \$	2017 \$
CURRENT ASSETS	18,907,736	18,854,235
NON CURRENT ASSETS	1,477,741	1,091,983
TOTAL ASSETS	20,385,477	19,946,218
TOTAL LIABILITIES	4,878,696	4,302,204
NET ASSETS	15,506,781	15,644,014
Accumulated Surplus	13,757,470	14,302,737
Revaluation Reserve	1,749,311	1,341,277
TOTAL MEMBERS' FUNDS	15,506,781	15,644,014



MIA is proud of its efforts to minimise fundraising administration and communications costs to allow 70% of all expenditure to be spent directly against its mission.

FAC: Fundraising, administration and communications



MIA continues to build capacity and expertise and invest larger sums into its core mission pillars:

- Research \$7.0 million
- Education \$1.4 million
- Clinical care \$2.0 million



MELANOMA INSTITUTE AUSTRALIA THE POCHE CENTRE, 40 ROCKLANDS RD, WOLLSTONECRAFT NSW 2065

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