

Every day dedicated to reaching zero deaths from melanoma.

Annual Report 2018-19





A day inside MIA:



'Australia's melanoma patients are so supportive of our research.' PAGE 4



'It is exciting that we are now including survivorship in our scope.'
PAGE 6



'The journey to date has been thrilling.' PAGE 9

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We are proud to detail our advances and achievements over the past year, and share what drives our dedicated team which is making promising progress towards zero deaths from melanoma.

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'There is so much more to do.' PAGE 10



'I was first drawn to MIA because o its high-quality research output.' PAGF 12



Progress over the last decade has been phenomenal.'
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Chairman and CEO's Report





We are proud to detail our exciting and important advances in melanoma research, treatment, care and education over the past 12 months. We are making promising progress in our mission to reach zero deaths from melanoma, a quest that less than 10 years ago was simply unthinkable.

So much has changed in the last decade in the melanoma space. The Poche Centre, established almost 10 years ago thanks to the extraordinary generosity of our Principal Benefactors Greg Poche AO and Kay Van Norton Poche AO, has cemented its place as the leading melanoma research and treatment centre in the world. This amazing legacy is having life-saving ramifications, with exponential improvements in survival rates for advanced melanoma patients since The Poche Centre officially opened. This timing is no coincidence, and we remain indebted to Greg and Kay for their foresight and their investment in Australia's future.

Although inroads have been made, there remains a lot to do. We continue to focus on our national and international research collaborations under the inspiring clinical and academic leadership of our Co-Medical Directors Professor Richard Scolyer and Professor Georgina Long.

It is with much pride that in this Annual Report we give you an insight into what drives members of Melanoma Institute Australia's dedicated clinical and research team as they continue to make promising progress towards zero deaths from melanoma.

Imperative for us now is strengthening and expanding our partnerships with patient organisations around the country including Melanoma Patients Australia, melanomaWA and Amie St Clair Melanoma Trust. These new and expanded relationships will benefit all melanoma patients and their families across Australia, as we, thankfully, shift some of our focus into the support and survivorship needs of patients and their carers.

As always, we would like to thank our generous melanoma community which continues to work tirelessly to support us with fundraising, awareness and education campaigns. We are particularly proud of the outstanding support for and success of our biggest ever *Melanoma March* as well as *Jay's Longest Melanoma March*. We thank all involved for the inspiring and heartfelt personal stories you shared, which contributed to the fabric of these amazing community events.

The needs and experiences of our patients and their families, and those impacted by melanoma across Australia and around the world, remain central to what we do and why we do it.

Grant King Chairman Matthew Browne









ASSOC. PROFESSOR PASCALE GUITERA - DERMATOLOGIST

'I got into melanoma relatively late in my studies. I had trained in physics and pathology at the Curie Institute in Paris and became fascinated with the new possibilities emerging for diagnosing melanoma. It was an uncharted field! I decided to complete my PhD in Australia, the melanoma capital of the world, which marked the beginning of my career focusing on melanoma early detection, diagnosis and treatment. I always say I stay in Australia not because of the

beautiful country, but because of the people. Australia's melanoma patients are so supportive of our research. They donate their tumours, their data and their time, all so we can go faster and achieve better results. I feel like we are a team, nearly a family, all working together towards the same goal. We are now finding the vast majority of melanomas at an early stage, which is a real relief and is critical if we are to reach zero deaths.'



Medical Directors' Report



We are delighted to report on another groundbreaking year at Melanoma Institute Australia as we edge towards reaching our ultimate goal of zero deaths from melanoma.

Rather than being achieved with one monumental research breakthrough, reaching zero deaths relies on us taking a series of incremental steps forward across the entire disease spectrum.

To that end, we continue to work simulaneously on a number of fronts – from prevention, to early detection, diagnosis and treatment of early stage disease, to tackling advanced melanoma and combatting resistance and super progression, as well as survivorship and supportive care.

There is no doubt we are making inroads. Over the past decade, five year survival rates for advanced melanoma patients have gone from less than 5% to more than 50%, but we have more work to do.

This year has seen MIA involved in a number of large collaborative research projects to strengthen the impact of work across the country and ultimately change health practices and improve patient outcomes. We continue to be at the forefront of clinical trials of new treatments, with eight new clinical trials and 183 new patients beginning treatment on MIA clinical trials this year. A focus has been on MIA investigator-led trials such as the ABC-X trial for Stage IV patients with active brain metastases and on neo-adjuvant trials of drug therapy before surgery in high-risk early melanoma. All have the potential to change clinical practice in the long-term and improve patient survival.

We are grateful for the support and participation of our patients across many ongoing research efforts. Each year, there are around 10,000 patient visits to MIA, including some 2,000 new patients. This year alone, close to 1,400 patients consented to providing samples to our Biospecimen Bank and our research data base now contains the records of 50,000 patients. We are extremely grateful for such selfless

support that will help future generations of Australians.

In 2019, MIA re-convened the external independent scientific committee to measure progress in implementing strategic research priorities first identified in 2018. We are pleased to report we are on track and are maximising our research impact, and the committee was most impressed with MIA's progress.

This year we again worked closely with key stakeholders including The University of Sydney, numerous Local Area Health Districts, Cancer Institute NSW as well as other state and federal government agencies. These collaborations are crucial in identifying and fast-tracking our combined research energies.

We are proud of MIA's ongoing leadership of and contribution to the international melanoma research effort. In addition to once again taking centre stage at world conferences such as ASCO, ESMO, USCAP and SMR, our researchers have been published in prestigious publications including Cancer Cell (Gide-Quek et al.), Nature, Nature Communications, Lancet Oncology (Long et al. & Menzies-Scolyer et al.) and New England Journal of Medicine (Long et al.) as well as the World Health Organisation's new Classification of Skin Tumours (Scolyer et al.).

Many of our Faculty hold leadership positions in their respective fields but we offer particular congratulations to Associate Professor Rachael Morton on her appointment as President, Health Services Research Association of Australia and New Zealand, and to Associate Professor Anne Cust on her appointment as President, Australasian Epidemiological Association.

We also extend a welcome to our new associates and members of Faculty,

and also to Dr Iris Bartula, Head of Research Psychology who has joined MIA thanks to the generous support of the Bill and Patricia Ritchie Foundation. A warm welcome also to our new surgical oncologist, Associate Professor Alexander van Akkooi, who starts at MIA in 2020.

'MIA's success at the 2018 NSW Premier's Awards for Outstanding Cancer Research is a reflection of the depth of expertise and the commitment of our entire research and clinical team, ably led by our esteemed Faculty.'

We hope you enjoy reading a snapshot of what drives our Faculty members each and every day, as we continue to make promising progress towards zero deaths from melanoma.

Professor Richard Scolyer Professor Georgina Long Co-Medical Directors

Research Strategy

MIA's Research Strategy is driven by five themes, all of which are integral to our mission of reaching zero deaths from melanoma.



Prevention, Risk and Clinical Detection of Melanoma



Early Diagnosis and Treatment



Treatment of Metastatic Disease



Survivorship and Support



Health Economics



In pursuit of excellence and with a strong desire to maximise our research impact, MIA underwent an independent research review by an expert international panel in 2018. The key outcomes from the review continue to drive our strategic direction.



1. Increased capacity and capability across each research theme, enhancement of national collaborations and establishment of a scientific advisory committee to improve alignment with MIA's mission



Increased investment in MIA's world leading Melanoma Research Database and Biospecimen
 Bank to provide more advanced research access



3. Identification of new funding sources directly aligned to MIA's research priorities



 4. Maximising relationships with key external stakeholders and partners
 – Universities, Local Health Districts, government, patient organisations



ASSOCIATE PROFESSOR RACHAEL MORTON – HEALTH ECONOMIST

'I was first attracted to what was then the Sydney Melanoma Unit by its impressive clinical trials research as I knew it was a pioneer in the treatment of melanoma. As a fair-skinned Australian from Irish descent, I always had a personal interest in skin cancer. I grew up in a beachside town in Victoria and eventually learnt how to navigate my way through adolescent expectations of having a tan, whilst at the same time avoiding painful and damaging sunburn. My research focus

is the economics of melanoma, meaning finding cost-effective interventions to prevent, diagnose and treat melanoma. It is also exciting that we are now including survivorship in our scope, a concept totally foreign in the melanoma research space less than a decade ago. As more people live through their diagnoses, there is a real need to design follow-up care pathways to improve quality of life for melanoma survivors. '

Publications and Awards

Congratulations to the leading researchers from MIA who took out the top accolades at the 2018 NSW Premier's Awards for Outstanding Cancer Research:



PROFESSOR GEORGINA LONG

Outstanding Cancer Researcher of the Year

PROFESSOR RICHARD SCOLYER

Professor Rob Sutherland AO Make a Difference Award

ASSOCIATE PROFESSOR ALEX MENZIES

Outstanding Cancer Research Fellow Award (less than five years post-doctoral experience in research)

ASSOCIATE PROFESSOR ANNE CUST

Outstanding Cancer Research Fellow Award (more than five years post-doctoral experience in research) This is well deserved recognition for not only these award winners, but also the multi-disciplinary teams across MIA that work tirelessly to develop new treatments to save lives from melanoma.'

MATTHEW BROWNE,
CEO Melanoma Institute Australia

Other Awards & Honours

- Co-Medical Directors
(JULY 2018 TO JUNE 2019)

PROFESSOR RICHARD SCOLYER

- 2018 Research Australia's Health and Medical Research Awards: GSK Award for Research Excellence (co-awarded with Professor Georgina Long)
- Recognised as an ExpertScape World Expert in Melanoma (top 0.1%)
- Named 8th in the world in The Pathologist's 2019 Power List

PROFESSOR GEORGINA LONG

- 2018 Research Australia's Health and Medical Research Awards: GSK Award for Research Excellence (co-awarded with Professor Richard Scolyer)
- Clarivate Analytics 2018 Highly Cited Researcher – Clinical Medicine 2018
- President of the internationally based Society for Melanoma Research (SMR)

Publications

Melanoma Institute Australia research continues to have worldwide impact and influence. There has been a 20% increase in the number of MIA publications, with more than two-thirds being in the top 20% of journals in terms of impact and effect.

| FINANCIAL YEAR | Number of papers published | Publications in journals with the strongest effect (top 20%) on institutional rankings | Publications in the highest impact category – <i>Nature, Lancet, New</i> <i>England Journal of Medicine</i> etc |
|----------------|----------------------------|--|---|
| 2018-2019 | 162 (^20%) | <u></u> | 61 |
| 2017-2018 | 133 | 95 | 55 |

Clinical Trials

Our clinical trials continue to focus on providing access to new treatments and improving patient outcomes.

Patients at Melanoma Institute Australia have the opportunity to participate in clinical trials and in doing so, contribute to our ongoing research effort. Patients on clinical trials are managed by our Clinical Trials team based at The Poche Centre and Royal Prince Alfred Hospital. MIA continues to lead the way and has developed several new large-scale collaborative trials which are now open at centres across Australia.

Neo-Adjuvant Global Collaboration

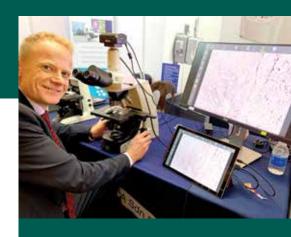
Partnering with other major international melanoma centres, MIA is at the forefront of the global effort to harmonise the approach to neo-adjuvant clinical trials by forming the International Neo-adjuvant Melanoma Consortium (INMC) The neo-adjuvant treatment platform is an exciting area of melanoma drug development, having significant capacity to change clinical practice for patients with Stage III metastatic melanoma around the world. Neo-adjuvant therapy is where drug therapy is given before surgery to remove lymph nodes affected with melanoma. One of the major benefits of neo-adjuvant therapy is enabling patients and clinicians to see the pathological effects of the drug treatment on melanoma cells following lymph node removal surgery. Being able to measure the pathological response to the treatment enables future treatment to be personalised for each individual patient depending on their unique response.

The INMC is enabling the sharing of neo-adjuvant trials between countries as well as building capacity to compare patient results from different trials around the world. This coalition of expert melanoma treatment and research centres works to build the best trials and prove scientific efficacy of new treatments, and partners with the pharmaceutical industry to deliver access to vital drugs.

The PRADO trial is a ground-breaking and world-first trial for patients with Stage III melanoma where the standard treatment is to undergo a complete lymph node dissection. In the trial, running at MIA since April 2019, patients receive six weeks of neo-adjuvant immunotherapy treatment with nivolumab and ipilimumab, and then have only one lymph node removed instead of upfront complete lymph node dissection surgery. Using standardised pathology review criteria developed by Professor Richard Scolyer and members of the INMC, melanoma pathologists evaluate the lymph node tissue under the microscope to determine the proportion of melanoma cells that have died following the immunotherapy. Patients only proceed to a complete lymph node dissection if there's evidence of a limited pathological response in that one lymph node.

Early results from this trial are promising, with a number of patients having complete eradication of their melanoma in the single lymph node removed at surgery, and thus being spared further extensive surgery. The study aims to analyse the long term outcomes of patients who don't have the standard complete lymph node dissection procedure, and examine what it means to have a complete pathological response.





'Being able to determine the pathological response to drug therapy is almost like having the benefit of a crystal ball. It enables us to predict ongoing patient response to therapy and better map long term outcomes.'

PROFESSOR RICHARD SCOLYER,
Co-Medical Director

THIS YEAR



8 new clinical trials started



and 183 new patients began treatment on MIA clinical trials.

1 JULY 2018 TO 30 JUNE 2019

Spotlight on our ABC-X Trial



The ABC-X trial (Anti-PD-1 Brain Collaboration and Radiotherapy Extension), partly funded thanks to the efforts of *Jay's Longest Melanoma March*, was developed by MIA for Stage IV patients with brain metastases. There are few clinical trial options for these patients due to their poorer outlook than Stage IV patients whose melanoma has not metastasised to the brain. The ABC-X trial recently opened at MIA and will soon open at Westmead Hospital, Peter MacCallum Cancer Centre and The Alfred Hospital in Melbourne, Princess Alexandra Hospital in Brisbane and other Australian sites next year.

Pioneered by Professor Georgina Long, ABC-X builds upon results from the ABC trial (Anti-PD-1 Brain Collaboration) which was the first trial to demonstrate that patients with advanced melanoma in the brain can be successfully treated with combination immunotherapy using nivolumab and ipilimumab. 59% of patients who received the combination and had no prior drug therapy, had either complete disappearance or a significant reduction in the size and number of brain metastases. The 3-year follow-up results were presented at this year's ESMO congress by Professor Long, who detailed that 49% of patients remained alive at three years, and patients who had not experienced any progression of their melanoma at one year continued to remain free of progression at three years.

The ABC-X trial will determine whether adding radiotherapy to nivolumab and ipilimumab will increase the effectiveness of treating brain metastases with immunotherapy.



Some members of MIA's dedicated Clinical Trials team.

'Nearly half the patients with brain metastases had not progressed for three years, whereas usually these patients would only survive around 16 weeks.'

PROFESSOR GEORGINA LONG, Co-Medical Director

ASSOC. PROFESSOR ALEX MENZIES - MEDICAL ONCOLOGIST

'I started training in medical oncology in 2009, when there were no effective drug treatments. Clinics were full of patients with metastatic melanoma who had only weeks or months to live. We began the first-in-human clinical trials of targeted therapy and immunotherapy, and for the first time saw patients responding to treatment, getting better, and living longer. Many of these patients are still alive today, and in my view, these treatments have now become part of the

greatest breakthrough in medicine of the last 50 years.

The journey to date has been thrilling, and we only need to look back ten years to see how far we have come in such a short time. Nevertheless, as I sit in clinic it is all too apparent that not all patients benefit from current treatments. The battle is not over. I strive to continue research to improve treatments for all patients with melanoma such that no one will die from this disease.'



Laboratory Research

The work being undertaken in our laboratories is building understanding of melanoma, and in doing so, is underpinning global advances in prevention, diagnosis and treatment.

New therapeutic options for mucosal melanoma

Mucosal melanoma develops from melanocytes in the oral cavity, nose and paranasal sinuses, genital tract, and anorectal region. It is rare in European populations but represents a much greater percentage of all melanomas in other populations. This type of melanoma has few gene mutations which respond to drug therapy, and a lower response rate to immunotherapies. MIA led a joint Australian, USA, European and Chinese genome sequencing study published in *Nature Communications*. It discovered frequent genetic mutations in these tumours that can be targeted with molecular inhibitors (CDK inhibitors) and mutations to oncogenic signalling pathways known to contribute to the relatively poorer responses to immunotherapy (CTNNB1). By uncovering the unique biology of this poorly understood melanoma subtype, this study identified therapeutic targets for investigation in clinical use.

Diagnosing melanoma at DNA level

A whole genome sequencing study of benign moles found evidence of sun damage in the DNA of some benign moles, with a small number of cells in some moles containing DNA mutations often associated with melanoma. This is a major step in our understanding of how melanomas develop and how they can potentially be diagnosed at DNA level.

Melanoma or benign mole?

The accurate diagnosis of melanoma and benign naevi (moles) is a recurring diagnostic problem. Melanomas resembling benign naevi, and benign naevi that grow in pregnancy, are two lesions particularly prone to diagnostic difficulty. MIA led a proof of principle study that mutations that occur often in melanoma, but are rare in naevus, could be used to determine naevoid melanomas from pregnancy related naevi. The study found a stark difference in the mutations in the DNA between the two lesion types. A DNA-based test was then developed to aid pathologists in differentiating between these skin lesions.



Improved Survival Rates

for Advanced Melanoma Patients

1-yr survival:

2-yr survival: from <15% to >60%

3-yr survival: from <10% to >50%

5-yr survival: from <5% to >50%



PROFESSOR HELEN RIZOS - BIOMEDICAL SCIENTIST

'When I began working in melanoma research 20 years ago, we knew very little about the genetics of melanoma - we didn't understand why some families were susceptible to this disease and we had no drug treatments that improved the survival of patients with advanced melanoma. Following in the footsteps of my mentors, Professors Rick Kefford and Graham Mann, I have led my own research team and worked with other translational researchers at MIA including Professors Georgina Long, Richard Scolyer

and John Thompson AO. Together, we have contributed to understanding the genes that drive melanoma growth, and how these melanomas respond and adapt to new therapies. There have been many improvements in patient outcomes in the last decade, but there is so much more to do. We are particularly excited about our recent work exploring the use of a simple blood test to monitor patient responses during treatment. It is this continued hope that drives my work, each and every day.'

Applied Research

MIA's applied research continues to fuel national research collaborations aimed at changing health practices and improving patient outcomes. MIA is involved in a number of large collaborative research projects.

Mapping molecular profile of melanoma sub-types to understand disease drivers, patient outcomes and potential treatments for each disease variant.

MIA is funding a national project - the Australian pdX MelanomA Project - to use melanoma cell lines derived from patient samples to develop a repository of melanoma sub-types in laboratory models. Led by Mark Shackleton at Monash University, these models will undergo extensive molecular profiling, with the cell lines also to be made available to melanoma researchers and collaborators. So far, 12 different melanoma cell lines and models have been developed in the lab and are ready for use, and a further eight are in progress. These include cell lines for cutaneous melanoma with a BRAF mutation and uveal melanoma, a rare sub-type of the disease.

Establishing a national melanoma registry

MelCOR – Melanoma Clinical Outcomes Register – is a national project funded by money raised from three consecutive Melanoma March events and includes a core team of melanoma researchers from Sydney, Melbourne, Brisbane and Canberra. The first stage of this national melanoma registry project will test whether collection of key data for targeted populations is achievable; determine what methodologies, innovations and infrastructure are required; and build a business case for the national registry. Data will be collected from the Victoria Cancer Registry, NSW Cancer Registry and Queensland Cancer Registry.



Revolutionising early detection of melanoma with 3D total body imaging

MIA is proud to play a vital role in the Australian Cancer Research Foundation (ACRF) Australian Centre of Excellence in Melanoma Imaging and Diagnosis (ACEMID). The three dimensional total body imaging systems are set to revolutionise the early detection of melanoma. 15 of these machines will be rolled out across Queensland, NSW and Victoria and will enhance the capability and capacity of clinicians and researchers to detect and understand melanoma. In only milliseconds, these machines take total body images which can then be analysed remotely through a telemedicine network. MIA has been selected as one of the NSW sites, along with RPA and Westmead Hospital, with planning underway for installation of the machines.



'I can't thank Professor
Spillane, Professor Long
and Jane, my Clinical Trial
Coordinator, enough.
I couldn't be in better hands.
My life has been saved and
I am determined to make the
most of every day.'

DIANE BERKI (pictured middle), MIA patient who was diagnosed with Stage III melanoma after a routine breast screen.

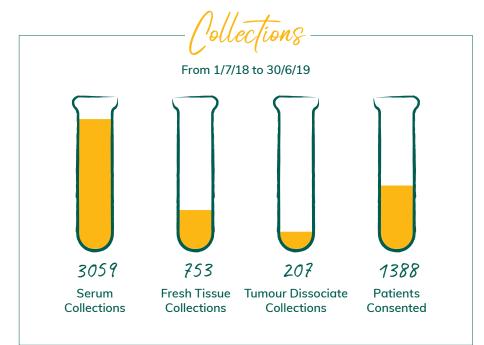
Biospecimen Bank

A highlight for the Biospecimen Bank this year was successfully testing the feasibility of processing and banking tumour dissociates (pure tumour cells) derived from core biopsies.

Core biopsies are minute specimens usually taken for diagnostic purposes, but we have now refined our processing techiques to enable them to be used for research.

The core biopsies from 23 patients have so far been processed successfully into tumour dissociates.

All patients coming to MIA have the option to contribute samples to our Biospecimen Bank which hosts the largest collection of melanoma samples in the world. By contributing to the Biospecimen Bank, our patients are contributing to global research and treatment advances.





'It's amazing to know that there could soon be new treatments for this horrible disease.

I think the best part about this discovery is that it gives hope.'

BARBARA HOLLAND (pictured below), mucosal melanoma patient commenting on possibility of breast cancer drug being used to treat mucosal melanoma.





DR SERIGNE LO - SENIOR BIOSTATISTICIAN

'I was first drawn to MIA because of its high-quality research output. It is so rewarding to be working every day on multidisciplinary projects led by the world's best melanoma researchers, all with the same objective of ultimately reducing the melanoma death toll to zero. I recently developed a prediction tool to guide patient management and it was exciting to see how this was received by the clinicians.

As a biostatistician, one of my daily challenges is to summarise data in a more meaningful way that allows for simple interpretation. It is especially rewarding to see the research I am supporting guide the clinical management of patients with melanoma, inform patient treatment strategies and help build knowledge in cancer research.'

Research Database MRD2

Data derived from our patients' samples underpin what is the world's largest single-institute clinical database for melanoma. MIA's Research Database, known as MRD2, was established in the 1960s and supports scientific collaboration and research projects nationally and internationally. It drives development of new clinical trials and treatment pathways.

This year, 89 different research projects were fuelled by data from MRD2, including:

- Using data from Stage IV melanoma patients to develop patterns of metastases and analyse the association between these patterns and patient survival. The study was based on 6031 Stage IV melanoma patients' records, diagnosed consecutively from 2010 to 2018. Patient survival before and after introduction of immunotherapy treatment was evaluated.
- 2. Development of a new risk prediction tool for treatment response and survival in metastatic melanoma patients treated with either anti-PD-1 alone or combined with ipilimumab. This followed the development of the prediction tool for sentinel lymph node positivity.
- 3. The Genome Wide Association Study checking for genetic markers to predict the presence of melanoma. Blood samples from over 6000 MIA patients diagnosed with invasive melanoma were studied, with the genotypes analysed by the biostatistics team at QIMR Berghofer in combination with their clinical data.







MRD2 contains the records of 50,000 patients.



This year, data have been extracted for **89** different research projects.

Education

A highlight for 2018 was our successful pilot of the *Sun Safe Student Ambassador Program*.

Twenty-eight students from 13 Sydney high schools attended a one day training session at MIA about the dangers of melanoma, the importance of early detection and how to prevent melanoma. They then participated in a workshop to develop a Sun Safe presentation which they took back to their schools and delivered to their peers. Key outcomes from the pilot included an 85% increase in student knowledge of melanoma and a 30% improvement in their practice of sun safe habits.



Following the successful pilot, the program was expanded to cover six locations in three states in late 2019, aiming to train 300 Sun Safe Student Ambassadors and reach more than 30,000 students and teachers with the sun safe message.

MIA has support from the School Education Working Group and will be collaborating with Cancer Institute NSW, Cancer Council NSW, NSW Department of Education, Association of Independent Schools and Catholic Schools in the development and marketing of the program.

It was a packed house for conferences and educational visits at MIA during the year, including:

- MELANOMA IN 2019: WHAT GPs NEED TO KNOW attended by GPs from across Sydney and watched online by GPs around the country.
- NURSE CONFERENCE provided a better understanding of the patient experience from detection through to advanced treatment of melanoma.
- INDIGENOUS HEALTH CARE EDUCATION SESSION provided information on melanoma and its relevance to Indigenous communities. This was the first collaboration between The Poche Centre for Indigenous Health and MIA, both backed by our generous benefactors Greg Poche AO and Kay Van Norton Poche AO, and our long-time supporter and former Chairman Reg Richardson AM, who attended.

Our education team also attended a number of conferences this year including the National Rural Health Conference, the Australasian Skin Cancer Congress and the Cancer Nurses Society of Australia Annual Congress.

'Critical, high quality and life-saving information for all high school students, parents and teachers'

HEAD OF KNOX JUNIOR ACADEMY, Knox Grammar School

'We all know that students learn best from their peers, which is what makes this program so beneficial!'

PDHPE TEACHER, Condell Park Hiah School



ndigenous Health Care Education Session

MIA Education Program Sponsors



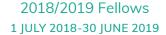






MIA is committed to providing ground breaking clinical care for the thousands of patients who attend our clinics each year, as well as sharing our knowledge and expertise to benefit melanoma patients across Australia and internationally.

Early each Friday morning, MIA's world-leading oncologists, surgeons, radiologists, pathologists and dermatologists meet at The Poche Centre to discuss the most complex and challenging melanoma cases. If a patient's case is discussed at 'MDT', as this weekly multi-disciplinary team meeting is known, they have the world's best minds in melanoma collaborating on their case. Our Fellows provide input into these weekly meetings, which are also valuable learning opportunities for trainees and visiting clinicians who attend as part of our Observership Program.



DR. LALIT PALLAN - Cameron Medical Oncology Fellow

DR. ADRIANA HEPNER - Medical Oncology Fellow

DR. INES DA SILVA - Medical Oncology Fellow

DR. ANDREW COLEBATCH - Jani Haenke Melanoma Pathology Fellow

DR. TERESA BAILEY - McMurtrie Cancer Pathology Fellow

DR. RAILYA MOUSINA - Surgical Oncology Fellow

DR. DAVID RYAN - Poche Fellow in Melanoma and Surgical Oncology

DR. KAVITA VAKHARIA - Poche Fellow in Melanoma and Surgical Oncology



'I really appreciated the quality of the speakers and the great educational opportunity that this conference provided. I feel that my patients will benefit from my learning as I feel more adept to answer questions about melanoma treatment and potential side effects.'

PARTICIPANT AT NURSE CONFERENCE

Ensuring clinicians are up-to-date with latest melanoma research and treatment is important to MIA.

Our education portal (melanomaeducation. org.au) provides free online educational programs which have been accessed by more than 1,900 GPs, specialists and nurses. The website is continually updated with new findings and content to ensure latest research is translated into every day clinic practice.

PROFESSOR ANGELA HONG, RADIATION ONCOLOGIST

'My first experience working with melanoma patients was during my radiation oncology training. Patients with brain metastases had what could only be described as a hopeless future - the treatment pathway was whole brain radiotherapy and then refer them on for palliative care. It was just heartbreaking. When starting as a junior consultant, I was 'given' the melanoma clinic and so started attending the multi-disciplinary team (MDT) meeting at MIA. I distinctly remember the collegiality amongst all clinicians, with everyone having the chance

to present and contribute. I really admired the quest for evidence-based best practice across all the associated disciplines including surgery, pathology and medical oncology. The last 10 years have seen a massive change in the use of radiotherapy for melanoma patients and MIA has been the leader in running randomised radiotherapy trials for patients with early stage to advanced disease. Progress over the last decade has been phenomenal, and I am excited about the future as I really believe I can make a difference.'



Our Community

(A)

MELANOMA MARCH

\$1.4 million raised

Family friendly events



\$804,000 raised





23 locations +1 corporate



Funds supported
a national
personalised
immunotherapy
project

Jay's Longest Melanoma March



\$447,000 raised from walk



50 days, 2000 kms from Adelaide to Sydney M

\$159,000 raised from Gala Dinner and raffle



Funds supported a clinical trial for Stage IV melanoma patients



MIA OUTBACK TREK 2018

This travelling troupe of trekkers headed to the Northern Territory to challenge themselves on the Larapinta Trail. In doing so (and while staying sun safe), John Day, Katherine Roberts, Lee Hennessy, Robyn Rostron and Catherine McManus raised \$40,000 for MIA. What an outstanding result!











Our CEO Matthew Browne joined the speakers trail in WA!



MACARTHUR CHARITY DINNER 2019

The 3rd annual Macarthur Charity Dinner was a massive success with a bevvy of drinks, fundraising, food and fun. Thanks to everyone's generosity, the event raised over \$30,000. What an achievement!



JAY'S LONGEST MELANOMA MARCH

Australia rallied behind Jay's Longest Melanoma March - a 50 day walk from Adelaide to Sydney. Jay Allen and volunteers trekked 2000kms before finishing at Government House. Our heartfelt thanks to all involved, with funds supporting a clinical trial for Stage IV melanoma patients.

'Participating in community events alongside our patients and their families brings me immense joy and inspires my ongoing work in the clinic, every single day.'

ASSOC. PROFESSOR JONATHAN STRETCH AM, Deputy Medical Director





Bettina Corbo spoke at 'Brunch for Morgs' in Fairfield, Victoria. Morgs had multiple sclorosis but it was melanoma that took her life at the young age of 24.





AMBASSADORS

We were delighted to welcome two new MIA ambassadors - Olympic swimming champion and melanoma survivor Cate Campbell, and celebrity Sophie Monk who had a close friend with melanoma. Both generously supported *Melanoma March* and other MIA campaigns and we thank them for helping us raise awareness about melanoma particularly amongst young Australians.

ALAN KIEFER CHARITY GOLF DAY

This inaugural event, held at Riverlakes Golf Course, honoured the life of Alan Kiefer. It was attended by 50 people and raised over \$8,000 for melanoma research. A big shout out to Rainer Kiefer for all your fundraising efforts.



Keith Rowe talked all things melanoma and sun safety at Earlwood Probus Club.

CAMDEN RED SOX CHARITY DINNER

Camden Red Sox Baseball Club held their charity

dinner and presented our CEO Matthew Browne with

Matt Redman and Senior Coordinator Brendon Goff.

Our best wishes go to the Willard family which has

a cheque for over \$23,000! Thank you to Club President

CTO CONTRACTOR OF THE CONTRACT

THROUGH THE LOOKING GLASS

Raising \$15,500, this annual event supported the *Emma Betts PhD Scholarship* with inaugural recipient Jordan Conway attending the night. The PhD Scholarship will support the next generation of researchers and clinicians. Thank you Tamra, Leon and Serge for your passion in continuing Emma's legacy.



JOSHUA BROWN MEMORIAL GOLF DAY

To celebrate the life of Joshua, the Brown family organised the inaugural Memorial Golf Day at Shelley Beach Golf Club. More than 100 people showed their support and celebrated the life of a wonderful young man, raising \$22,000 for melanoma research.



What a year for our volunteer speakers, taking centre stage at some 60 events across NSW, QLD, Victoria and WA and reaching more than 9,000 people from corporations, community groups, schools and even pre-schools. This year we also added the option of video link to enable their personal melanoma stories and the sun safe message to be spread far and wide.

Sharing your personal story is never easy, and we sincerely thank our growing number of speakers for so generously and selflessly stepping up. You have helped change lives and in doing so, have moved us closer to reaching our goal of zero deaths from melanoma.

COMMUNITY PARTNERSHIPS

It was NRL all the way this year for MIA, teaming up with both the Manly Warringah Sea Eagles and the North Queensland Cowboys. Thanks to Kayla Smith, we were in the Community Corner at 1300SMILES Stadium for the Cowboys' first home game of the season, spreading our sun safety message to the 15,000 strong crowd. And once again, our generous benefactor Kay Van Norton Poche AO made sure MIA's logo was proudly on display at Lottoland during the Sea Eagles' home game clash in the Community Round.





RORY'S BOTTOM TURN

been impacted by melanoma.

NSN

In a first for MIA, we were front and centre at the Red Bull Flugtag in Sydney! Four mates participated to raise money and awareness in memory of Rory den-Besten. Those magnificent men in their flying machine raised over \$5,500. Thank you Sean, Ciaran, Brian and Stuart.



ILLAWARRA HONEYBEES

This group of dedicated ladies raised a total of \$25,000 throughout the year to contribute to research that could benefit both melanoma and breast cancer patients. Thank you Lynne Sadd and all the ladies for your dedication.

Thank You

Thank you to our *Melanoma March* Principal Partner, Ricky, volunteer committees and local corporate partners across the country and to our partner organisations melanomaWA, Australian Melanoma Research Foundation and Skin & Cancer Foundation Inc.

A special thank you also to the *Jay's Longest Melanoma March* volunteer committee and corporate partners.

Melanoma March Principal Partner





Acknowledging Our Generous Donors



MIA major donors at time of printing

PRINCIPAL BENEFACTOR

Greg Poche AO and Kay Van Norton Poche AO

LIFE GOVERNORS

Cameron Family

Reg Richardson AM and Sally Richardson

Peter and Sally Doherty (CP2)

Apex Foundation

The Melanoma Foundation

Friends of the Mater Foundation

CLEARbridge Foundation

Len Ainsworth AM – The Ainsworth

Foundation

David Macintosh AM – The Macintosh

Foundation

GOVERNORS

Jani Haenke Melanoma Pathology Fellowship

H and N Moore

Perpetual Foundation

BENEFACTORS

Jerry Ellis AO and Ann Ellis

The Petre Foundation

Ray and Penni Jones

Nevin and Marie Holland

Neville and Robyn Newton

Skipper Jacobs Charitable Trust

Perpetual Foundation – HT Andrew and Agnes Cheung Endowment

Perpetual Foundation – The Hilmer

Family Endowment

Deborah and John McMurtrie

Toni and Mark Heath

Jim and Fran Sweeny

Peter Rockey

The Ross Trust

Jo Phillips - Natan Foundation

Goodridge Foundation

Jürgen and Mary Fengels

COMPANIONS

The Manildra Foundation

Bob MacSmith

Susan Maple-Brown AM

The Charity Challenge

Michael Alscher

The Late Professor Geoffrey White AM

Norman Green

Clive Thomas

Rosemary Pryor Foundation

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Gai and Tony Wales

Janet Ferguson PhD Scholarship

Bradley Hunt

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Julie and Don Priest

Mater Imaging

Keith and Maureen Kerridge

David Mortimer AO and Barbara

Mortimer

Steadfast Foundation

Peter Hemming

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The Dick and Pip Smith Foundation

Laurence Edward Wilkins

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Lin Huddleston Charitable Foundation

Dr John P Stephen and Christine Stephen

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Peter Vogliotti and Angela McHugh

Chris London

Giovas Family

V John Plummer

Peter and Rose McNeill

Dr Michael Armstrong OAM and Mary-Anne Armstrong

Ashley and Felicity Benoit

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 Gardiner

The Estate of the Late Sandra Margaret Taylor

The Estate of the Late John Lethe

The Estate of the Late Mary Elizabeth Brodie

The Estate of the Late Peter Hammond

The Estate of the Late Helen McKinnon

The Estate of the Late Peter Freilich

The Estate of the Late Alan Johnson

The Estate of the Late Catherine Dwan

The Estate of the Late Arthur Bryce

The Estate of the Late June Taylor

Partners

What an amazing and supportive community we have!

From community fundraisers, major donors, event participants and volunteers, corporate and local sponsors, to generous community groups and volunteer speakers - you are all helping change lives by spreading the sun safe message and supporting our vital research. We just couldn't do it without you!" - FROM ALL OF US AT MIA.





























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 immuno-oncology 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 280 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 and NSW Health Pathology, 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 600 publications and has presented on more than 350 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.

Susan Elder was MIA's Company Secretary during the financial year.

Full bios at www.melanoma.org.au

GRANT KING, CHAIRMAN

'I take this opportunity to thank my fellow Directors, and particularly all members of Faculty and Committees, for their expertise, guidance and dedication. It's truly humbling to be around the board table with the world's leaders in such an important field of science and care.'

21 governance meetings across all committees; equating to a total of over 400 governance hours.



FACULTY

Chair

Professor Georgina Long - Co-Medical Director

Professor Richard Scolyer - Co-Medical Director

Members

Associate Professor Jonathan Stretch AM, Deputy Director

Associate Professor Matteo Carlino

Associate Professor Anne Cust

Professor Diona Damian

Associate Professor Pascale Guitera

Professor Peter Hersey Professor Angela Hong Professor Richard Kefford AM

Dr Serigne Lo

Professor Graham Mann

Associate Professor Alexander Menzies

Associate Professor Rachael Morton

Professor Omgo Nieweg Professor Helen Rizos

Associate Professor Robyn Saw

Dr Kerwin Shannon Professor Andrew Spillane

Professor John Thompson AO

Dr James Wilmott

Ex-officio

Matthew Browne

COMMITTEES

RESEARCH

Chair

Associate Professor Anne Cust

Members

Dr Iris Bartula

Associate Professor Pascale Guitera

Professor Nick Hayward Professor Richard Kefford AM Craig Lawn (Consumer Rep)

Dr Serigne Lo

Professor Graham Mann

Associate Professor Alexander Menzies

Professor Omgo Nieweg Professor Helen Rizos

Professor John Thompson AO

Dr James Wilmott

Ex-officio

Professor Georgina Long Professor Richard Scolyer Matthew Browne Maria Gonzalez Valerie Jakrot Rebecca Velickovic

CLINICAL

Chair

Professor Angela Hong

Members

Rebecca Johnston, CNC

Dr Linda Martin

Associate Professor Alexander Menzies

Dr Tom Pennington

Dr Kerwin Shannon

Professor Andrew Spillane

Associate Professor Jonathan Stretch AM

Ex-officio

Professor Georgina Long Professor Richard Scolyer Matthew Browne Maria Gonzales Rebecca Velickovic

EDUCATION

Chair

Associate Professor Matteo Carlino

Members

Dr Michael Armstrong (Consumer Rep) Professor Sydney Ch'ng Shahn Coburn, CNC Professor Diona Damian Associate Professor Rachael Morton Associate Professor Robyn Saw

Ex-officio

Dr Annika Smith

Professor Georgina Long Professor Richard Scolyer Matthew Browne Derek Bryan Danielle Fischer Denise Sorrell

Membership at time of printing



ASSOC. PROFESSOR ANNE CUST,
Research Committee Chair



PROFESSOR ANGELA HONG, Clinical Committee Chair



ASSOC. PROFESSOR MATTEO CARLINO, Education Committee Chair

Concise Financials

MIA has continued its strong financial performance, increasing revenue to \$17.1 million.

MELANOMA INSTITUTE AUSTRALIA Statement of Comprehensive Income

For the Year Ended 30 June 2019

| | 2019 \$ | 2018 \$ |
|--|--------------|--------------|
| REVENUE | | |
| Donations | 7,641,156 | 7,216,853 |
| Investment Income | 775,152 | 485,801 |
| Poche Centre Income | 933,568 | 922,644 |
| Research Income | 7,262,035 | 6,380,706 |
| Other Income | 93,281 | 148,340 |
| Change in Fair Value Through Profit & | 390,505 | |
| Loss (FVTPL) on financial assets | | |
| Total revenue from ordinary activities | 17,095,697 | 15,154,344 |
| EXPENSES | | |
| Audit | (30,000) | (30,000) |
| In Kind Rental of Poche Centre | (750,820) | (750,820) |
| Personnel Costs | (9,497,828) | (8,688,843) |
| Conference/Functions | (17,683) | (25,543) |
| Administration Costs | (887,374) | (1,041,982) |
| IT Support | (262,820) | (277,531) |
| Utilities | (186,300) | (170,760) |
| Fundraising | (725,993) | (525,486) |
| Cleaning | (94,980) | (85,801) |
| Building Operations | (371,967) | (331,272) |
| Other Expenses | | (37,844) |
| Depreciation Expense | (650,316) | (444,847) |
| Bank & Investment Fees | (108,754) | (109,888) |
| Research Expense | (3,028,499) | (3,178,993) |
| Total expenses | (16,613,334) | (15,699,610) |
| Other Comprehensive Income | | |
| Available for Sale financial assets | | 408,034 |
| Profit/(Loss) for the year | 482,363 | (137,232) |
| Total comprehensive (loss)/income for the year | 482,363 | (137,232) |

Philanthropic donations have increased almost 6% to \$7.2 million, reflecting the confidence our wonderful donor community has with the impact we are making towards our mission. We receive nominal direct government funding and rely heavily on our donor community.

MIA's personnel costs were \$9.5 million, the vast majority of which was staff employed directly on research & research infrastructure, clinical care and education pillars. MIA has small administration, fundraising and communications teams to support its mission activities.

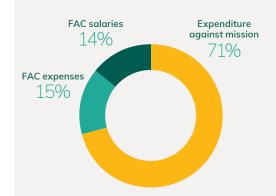


MIA's net assets total \$16.0 million, which provides it with the financial capability to leverage this strength and drive its research projects.

MELANOMA INSTITUTE AUSTRALIA Statement of Financial Position

As at 30 June 2019

| | 2019 \$ | 2018 \$ |
|--------------------------|------------|------------|
| | | |
| TOTAL CURRENT ASSETS | 20,739,226 | 18,907,736 |
| TOTAL NON CURRENT ASSETS | 1,478,044 | 1,477,741 |
| TOTAL ASSETS | 22,217,270 | 20,385,477 |
| TOTAL LIABILITIES | 6,228,126 | 4,878,696 |
| NET ASSETS | 15,989,144 | 15,506,781 |
| Accumulated Surplus | 15,989,144 | 13,757,470 |
| Revaluation Reserve | | 1,749,311 |
| TOTAL MEMBERS' FUNDS | 15,989,144 | 15,506,781 |



In addition to the liabilities shown, MIA has quarantined a further \$4.1 million for research projects the subject of specific donors' wishes.

FAC: Fundraising, administration and communications



MIA has increased its percentage expenditure against mission to 71% and a record expenditure on its mission pillars of \$11.3 million.

JENNIFER BENFIELD, STAGE IV MELANOMA PATIENT

'My world came crashing down when I was diagnosed with Stage IV melanoma. I just didn't think something like this could happen to me. My biggest fear was not being around to see my two young children grow up. It was so hard explaining melanoma to my kids, but I tried to be honest with them and also re-assure them that I had the world's best team in my corner.

I am so lucky to have had access to the best minds in melanoma research and treatment, and am so grateful for their dedication each and every day to saving lives from melanoma. Being able to tell my children that I now have no evidence of disease was the best day ever! Thanks to the tireless work of the Melanoma Institute Australia team, I now have hopes for a promising future with my family.'



Melanoma Institute Australia

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ABN: 35 123 321 148 CFN: 20341