

# RCH1000

Members Newsletter FEBRUARY 05



*Funding Excellence in Research  
To Make Sick Kids Better*

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## *Million Dollar Dinner Dance*



# Chairman's Note



Efreim Goldhammer -  
Chairman RCH1000

## Happy New Year

I am delighted to say that not with standing the fact that some of our members were physically caught in the Tsunami affected areas, they thankfully all are well.

Against the backdrop of such a massive tragedy, I can't help but feel fortunate to be able to look forward to 2005.

I pray that this year brings you and those close to you health, happiness and prosperity.

## Extraordinary community generosity

The Tsunami tragedy has brought to light some of the best and worst in mankind.

A clear demonstration of the 'best' of mankind has been the extraordinary generosity of Australians in their immediate response to the needs of the communities affected.

Perhaps never before has there been quite so much media exposure focused on the needs of the victims, nonetheless, the sheer weight of donations has shown very clearly that Australians are a caring and supportive nation.

Australians are fortunate to have many opportunities to feel national pride; successes in activities such as sport, entertainment, cultural and academic pursuits provide ample opportunities, but the response to the Tsunami tragedy stands alone.

I am however saddened to read that the 'worst' aspects of the above generosity, is the fact that there is a question mark over the amounts that will ultimately reach the intended recipients because of corruption. That some individuals would corruptly profit from the suffering of others is disgraceful. I can only hope that the agencies involved in the relief process will be as diligent as humanly possible to ensure that the intended recipients of the community's generosity are the beneficiaries.

## Outlook for 2005

As you are all aware, RCH1000 has made a commitment to provide \$1 Million to the Australian and New Zealand Heart Research Centre to be housed at the Royal Childrens

Hospital. We will be hosting a number of information luncheons specifically related to this activity this year with a view to making all members aware of the importance of this initiative.

As always, I encourage you to invite prospective new members to all of our functions.

Our Annual Dinner will be held at Crown Palladium on 1st June 2005. Please mark this date into your calendar and keep it in the back of your mind when interacting with people that you think would be willing to become members.

I am confident that 2005 will see the continued growth and support of members in extending the reach of the Royal Children's Hospital to sectors of the community that have not previously benefited from the Hospital's credo of "Making Sick Kids better"

## Advertising in our Newsletter

You may have noticed our new look Newsletter. For as little as \$250.00 your advertisement can appear in 4 quarterly issues of the Newsletter, the circulation of which includes all our current members, Children's Hospital staff, participants of other auxiliaries, the waiting rooms of RCH 1000 members and a number of public relations firms. Your support of our Newsletter would be appreciated.

Thank you

Thank you one and all and I look forward to seeing you and your friends at our next function.

Efreim Goldhammer

## RCH1000 committee

Mr Efreim Goldhammer (Chairman)  
Mr Stephen Carter (Deputy Chairman)  
Mr Brian Mallon  
Mr Geoff Kliger  
Mr Mark LoGiudice  
Ms Sharon Lloyd  
Mr Michael Argyrou  
Mr Richard Leder  
Mr Barry Novy  
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application form on page 10

# RCH 1000 Report

Dr Kate Simpson  
RCH 1000 Scholar  
Department of Cardiology  
Royal Children's Hospital and  
Murdoch Childrens Research Institute.



Kate Simpson

## Research Update 07/02/05:

Part of my research over the last year has involved looking at a substance (or protein) called Urotensin-II, which has recently been identified in humans. Urotensin-II has very powerful actions on blood vessels, and is increased in adults with heart problems. As yet, Urotensin-II has never been measured in children.

We have examined the blood levels of this substance in infants and children with various forms of heart disease, pulmonary hypertension (increased pressure and resistance in blood vessels of the lungs) and in healthy children and infants (as a comparison group).

We have shown for the first time that this protein is almost three times higher in children with congenital heart disease than in healthy children. We have also shown that levels of this protein are increased further in children who undergo open heart surgery with the use of a heart lung (bypass) machine.

We think Urotensin-II may be an important protein leading to, or associated with, the impaired blood vessel function seen in children with heart problems, particularly those who undergo bypass surgery. This impairment can lead to changes in blood pressure and can increase the stress placed on the heart. Therefore, it is important for us to identify and try to control the activity of such substances, to improve the current treatments we have for children with heart problems. We plan to continue to investigate this protein, and the implications of our findings, with further clinical and laboratory work in the upcoming year.

# Research Report February 2005



Anastasia Pellicauo

Phase one has been completed, and the results have been presented locally and internationally.

A manuscript detailing some of these results is almost complete, and will be submitted to the American Journal of Respiratory and Critical Care Medicine. Some additional results will be presented for the first time to a national audience at the

Annual Conference of the Perinatal Society of Australia and New Zealand in March this year.

Phase two was commenced in October 2004, and so far has been successful. The first half of 2005 will be a period of intense data collection to complete the phase two experiments. The second half of 2005 will be used to collate information from both phases and draw conclusions from the studies.

Thanks again for your continued support with this exciting research.

## Calendar of Events

### Diary Dates

Please note these dates in your diary for some of next years RCH1000 functions.

RCH1000 2005 Luncheons held at the Ella Latham Meeting Room at the Royal Children's Hospital:

- **Tuesday 22nd February**
- **Tuesday 19th April**
- **Tuesday 16th August**
- **Tuesday 18th October**

More details regarding these luncheons will be sent out in due course.



# Final function for 2004 RCH 1000 Luncheon

Guest Speakers: Professor Sheena Reilly  
Professor of Paediatric Speech Pathology,  
The Royal Children's Hospital



On Tuesday 23rd November, RCH1000 members and guests attended the final luncheon for 2004. Professor Sheena Reilly, Professor of Paediatric Speech Pathology at The Royal Children's Hospital was the guest speaker. Professor Reilly's research program is focused on understanding the epidemiology of speech, language and swallowing disorders in children. Such impediments can significantly differ in their severity. Her speech was very informative and created an interesting discussion forum.

The next luncheon is on Tuesday 22nd February 2005 at 12:30pm. The guest speaker will be Professor Dan Penny, Director of Cardiology at The Royal Children's Hospital. He will be discussing RCH1000 commitment to the new Australia, New Zealand Children's Heart Research Centre. To RSVP, please call Priscilla on 9345 7064.







# *Million Dollar Dinner Dance*

*at Crown - 1st June 2005*



# RCH 1000 Sponsorship

The Royal Children's Hospital is a world-recognised centre of paediatric excellence, specialising in the diagnosis, care, treatment and research into all diseases, disorders and illnesses of childhood and adolescents.

Incorporating the Murdoch Children's Research Institute, it is the largest tertiary paediatric Hospital in the southern Hemisphere and provides a major paediatric teaching centre in association with Melbourne University.

The Hospital offers a wide range of clinical and surgical facilities, including cardiac surgery, renal services, craniofacial, orthopaedic surgery as well as emergency and community services.

The Royal Children's Hospital has an ambitious vision with increasing emphasis on supporting families whose children are cared for by the Hospital and the pursuit of research into some of the toughest health challenges.

There is a strong desire to minimise the hospitalisation of patients, whilst increasing the support to the community and other health care agencies in the improvement of health for children and adolescents.

## Into the Future

Critically, research will continue and expand into the causes, treatment and cure of childhood diseases, the prevention of illness and injury and most importantly, total health promotion.

## The RCH 1000

The major challenge facing the Hospital, is to develop various fundraising programs and activities that will allow it to continue to build its reputation as an international leader in paediatric healthcare, education and research.

The Royal Children's Hospital has an ambitious vision with increasing emphasis on supporting families whose children are cared for by the Hospital and the pursuit of research into some of the toughest health challenges.

The funds raised by the RCH 1000 will be applied toward vital research to ensure the complete physical, mental and social well being of our most important asset – the next generation.

[www.rch1000.org.au](http://www.rch1000.org.au)

## **Our Mission**

The aim of the RCH 1000 is simple – to provide over \$1 million per annum for research programs to be conducted by the Royal Children’s Hospital and its Murdoch Children’s Research Institute.

## **Sponsorship**

As a member of the RCH 1000 you will be given a privileged opportunity to contribute to these ambitious plans and to gain enormous personal satisfaction from witnessing these plans transformed into action. Sponsorship entails an annual deductible donation of \$1,000 invoiced on each anniversary.

Sponsors of the RCH 1000 will have opportunities for networking whilst at the same time contributing to a charitable organisation that is an icon within the community.

### **Sponsorship will also offer:**

- Functions with guest speakers from the funded research projects to update members on progress and on current issues relevant to the Royal Children’s Hospital
- You will be asked for permission to publicise your sponsorship on our website.
- The option to display your support of this worthwhile undertaking by the use of the “RCH 1000” logo for personal stationery.
- A quarterly newsletter, to provide updates and matters of interest.
- You will receive an exclusive RCH 1000 lapel badge

Most importantly, being part of the RCH 1000 will give you the chance to make a difference.

**RCH 1000 Funding Excellence in Research  
To make Sick Kids Better**

# Application Form

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# Royal Children's Hospital International responds to requests after the Tsunami disaster

Following the tsunami, many people turned to RCHI for information and coordination. In the information network, we had become a "node". Initially, hospital staff (especially those working in the Emergency Department) passionately expressed their desire to form a flying squad that would travel abroad at short notice and set up a clinic in Sri Lanka. RCHI contacted the Director of the world's largest children's hospital, the Lady Ridgeway Children's Hospital in Colombo, and offered to send 4-6 Emergency-trained doctors and nurses, provided this could be coordinated in Sri Lanka. There was no response to this offer. As time passed, it became clear that this would have been futile because things were chaotic in Sri Lanka, travel from place to place was impossible, and it was a better principle to provide Sri Lankan doctors and nurses with resources. They know the conditions, have the training and the language, and are highly motivated to provide the service to their own country. Groups who did go reported their frustration that they could not do the job they went to do because supplies did not arrive in time and there was a lack of government coordination in the early days.

RCHI was also contacted by the Victorian Department of Human Services and asked to suggest names of suitably

qualified health professionals to serve with government organised teams to go to disaster-affected areas. We and the hospital CEO put out a call to hospital staff to register as volunteers and more than 150 responded. The Department of Human Services commented that the response from RCH was "exemplary". Despite this, at the time of writing only one staff member, Trevor Duke, has travelled to one of the disaster areas. Readers will however be interested to learn that Endocrinologist, Dr Margaret Zacharin, was on vacation in Galle, Sri Lanka when the tsunami hit. Fortunately she was unhurt.

At the same time, we decided to establish a group of Sri Lankan staff members which called itself the RCH Sri Lankan Fellowship. Chaired by gynaecologist, Dr Yasmin Jayasinghe, this new group is using its contacts to seek ways of providing coordinated assistance to medical colleagues in Sri Lanka.

RCHI was contacted by Dr Jane Bell, the Coordinator of Health Programs from World Vision Australia and a meeting with WVA's CEO, the Reverend Tim Costello, was set up for January 7th. We invited RCH CEO Tony Cull, Dr Trevor Duke from the Department of Paediatrics, Dr Simon Young from the RCH Emergency Department and Associate Professor



Graeme Barnes to attend this meeting. We brought two proposals to the meeting. The first was one prepared by Trevor Duke and Graeme Barnes, that WVA should provide funding for an existing disaster relief program being provided in Western Aceh Province, Indonesia, by the Faculty of Medicine at Gadjah Mada University in Yogyakarta. This project appealed because we endorse the principle of strengthening existing institutions. Tim Costello immediately agreed to support this program, and RCH will provide technical and other assistance to GMU. The second one, strongly advocated by Tony Cull, was that RCH and WVA should join forces and establish an indigenous health program. Tim Costello was also very positive about this proposal and Associate Professor Graeme Barnes will convene a working party to gather ideas from hospital staff and external advisers on what form our program might take.

RCHI was also contacted by The Reverend John Baldock, Chairman of an AusAid-sponsored Inter-Faith Council, about another proposal to assist with the post-tsunami relief program. The Inter-Faith Council had been asked to decide how \$500,000 raised by a predominantly Vietnamese Buddhist organization should be spent. Their

proposal was to purchase pre-fabricated medical clinics designed for tropical conditions to off aid specifications and that are manufactured in Broadford, and have them shipped to Aceh and perhaps Sri Lanka. RCHI suggested that one clinic might be offered to the Gadjah Mada University to be sited in one of their areas of control and staffed by them. The Inter-Faith Council then began negotiations with World Vision and GMU. It is possible that a second clinic might be offered to Sri Lanka.

RCHI continue to provide the best service & care to our international partners.

**Associate Professor Garry Warne  
Director, Royal Children's Hospital International  
and Senior Endocrinologist**





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