

Menzies secures NHMRC funding to continue ground breaking research

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Menzies School of Health Research (Menzies) has welcomed today's announcement of more than \$12 million in National Health and Medical Research Council (NHMRC) funding for new and ongoing research.

Of the six project grants that have been awarded to Menzies today, Aboriginal and Torres Strait Islander children with respiratory health issues and people with diabetes will be amongst those who will benefit from the funding.

According to Menzies Director, Professor Alan Cass, this latest stream of funding will enable research teams to address critical health issues and find the best ways to tackle them. Through our research, based on rigorous methods and strong community engagement, we aim to make the maximum difference," Prof Cass said.

In addition to the six project grants, Menzies received support for five postgraduate scholars from NHMRC.

"It is fantastic that Menzies researchers secured this highly competitive scholarship funding - it will give the researchers certainty to continue their career in science and medical research, as well as helping Menzies to retain and develop highly skilled staff," Prof Cass said.

The NHMRC are the principal funders of health research in Australia.

Menzies success in NHMRC Project Grants announced today continues our ability to undertake high-priority research projects, in partnership with communities, aiming to make a real difference.

Menzies researchers have worked with a wide range of health services and community-based partners, for more than 30 years, to undertake research with impact.

ENDS

Project grants

Josh Davis - *A novel genotype of hepatitis B virus in Indigenous Australians with an aggressive phenotype and poor vaccine efficacy: implications for clinical care and public health policy.*

Hepatitis B virus infection (HBV) is common in Indigenous Australian people and can cause liver damage and liver cancer. The HBV strain in NT Indigenous people is an unusual one which appears more aggressive than common strains and is a poor match for the current HBV vaccine. We will determine the geographical extent and natural history of this strain and explore possible solutions in order to refine clinical and public health approaches to this common but poorly understood chronic disease.

Louise Maple-Brown - *PANDORA (Pregnancy And Neonatal Diabetes Outcomes in Remote Australia) Generations.*

PANDORA (Pregnancy And Neonatal Diabetes Outcomes in Remote Australia) is a birth cohort of 1,100 women and 1,100 children, including 550 Aboriginal women and their children. We will assess maternal and child growth and risk markers at 6-10 years after pregnancy, and describe the relative importance of pregnancy-related factors and factors at age 2-4 years, in predicting diabetes and obesity risk at age 6 to 10 years. We will also work to improve models of care for youth obesity and diabetes.

Bridget Barber - *Targeting acute kidney injury in knowlesi malaria*

We are conducting a randomised clinical trial to assess whether paracetamol can reduce kidney dysfunction in knowlesi malaria, by inhibiting oxidative damage caused by the breakdown of red blood cells. To-date >330 Malaysian adults and children have been randomly assigned to receive either regularly-dosed paracetamol or no paracetamol, together with anti-malarial treatment. The primary endpoint is change in kidney function at 72 hours, in patients who received paracetamol vs. no paracetamol.

Gabrielle McCallum - *Preventing recurrent respiratory-related hospitalisation in young Indigenous children through regular azithromycin: a multi-centre randomised controlled trial.*

Acute lower respiratory infections (ALRI) are a leading cause of hospitalisation in Indigenous children of Australia and New Zealand. Our international, multi-centre, randomised controlled trial will determine whether weekly azithromycin for 12-months, reduces ALRI hospitalisations and future bronchiectasis among Indigenous children. We will also determine the impact of azithromycin on ALRI rates, safety, antibiotic resistance, impact on the upper airway bacteria, and cost-effectiveness.

Paul Lawton - *Return To Country: A National Platform Study of Indigenous Dialysis Patients.*

Not only are Indigenous Australians six times more likely to need dialysis or a kidney transplant for end-stage kidney disease than non-Indigenous Australians, they have a quarter the chance of a kidney transplant and a third the chance of treatment that allows them to return home. Return To Country is designed to find out why, and test health service changes to increase the chances of better treatment, at home, for over 1,500 Indigenous Australians on long-term dialysis

Alan Cass - *NT Safety and Efficacy of Iron in Haemodialysis Study.*

One in 50 Indigenous adults in the NT need dialysis to stay alive. People on dialysis have anaemia, usually complicated by iron deficiency. Usual treatment includes EPO and

intravenous iron. Indigenous dialysis patients also have high rates of severe infection response to treatment can be poor. We do not know the balance of risk and benefit for iron treatment. The Iron Infusion Study will provide rigorous evidence and potentially benefit the majority of Indigenous haemodialysis patients.

Scholarships

Alana Gall - Wellbeing and Quality of Life of Indigenous People.

Gill Gorham - Considering place in the delivery of cost-effective services for Aboriginal people in rural and remote Northern Territory.

Anna McLean - Improving outcomes for women with diabetes in pregnancy in Far North Queensland.

Diana MacKay - Improving the implementation of recommended postpartum care of Aboriginal and Torres Strait Islander women in the Northern Territory and Far North Queensland following a pregnancy complicated by diabetes.

Matthew Hare - Intergenerational metabolic health in Indigenous and non-Indigenous Australians – Understanding trends, determinants and outcomes.

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Menzies School of Health Research

Menzies School of Health Research is one of Australia's leading medical research institutes dedicated to improving Indigenous, global and tropical health. Menzies has a history of over 30 years of scientific discovery and public health achievement. Menzies works at the frontline, joining with partners across the Asia-Pacific as well as Indigenous communities across northern and central Australia. Menzies collaborates to create new knowledge, grow local skills and find enduring solutions to problems that matter.