

ANZBMS



2018 ANNUAL REPORT

AUSTRALIAN AND NEW ZEALAND BONE AND MINERAL SOCIETY

AIMS AND GOALS

THE AIMS AND GOALS OF THE SOCIETY ARE TO:

- ACT AS THE PRINCIPAL PROFESSIONAL BODY FOR SCIENTISTS AND CLINICIANS INVOLVED IN RESEARCH AND MANAGEMENT OF PATIENTS IN THE FIELD OF METABOLIC BONE DISEASE AND MINERAL METABOLISM IN AUSTRALIA AND NEW ZEALAND;
- ACT AS THE PREMIER FORUM FOR THE PRESENTATION OF RESEARCH AND DEBATE ABOUT CLINICAL AND METABOLIC BONE DISEASE IN AUSTRALIA AND NEW ZEALAND; AND
- ADVANCE THE EDUCATION OF CLINICIANS, ALLIED HEALTH PROFESSIONALS AND THE PUBLIC IN THE NATURE OF AND MANAGEMENT OF DISEASES IMPACTING UPON THE SKELETON.

REPORT FROM THE **PRESIDENT**

This is my first year as President of ANZBMS. As an organisation we represent a field that often does not receive the recognition that it deserves, yet arguably, as a research community we punch above our weight' in the global context. This also comes at a time when the research funding landscape is changing and there is concern over the impact this will have on our field. Increasingly this means we will need to work together to support our community. Fortunately, the previous work of the Society, including work undertaken by Emma Duncan our Past-President, will help us meet this challenge. This year we have been able to build upon much of this activity and ensure that the society is in a strong position to tackle future challenges. With this in mind I wanted to highlight a number of areas that have been the focus for the last twelve months:

Early Career Investigator Engagement

This year has seen the early career investigator committee (ECIC) go from strength to strength. The committee is chaired currently by Sabashini Ramchand and Josh Lewis. Sabs and Josh both attend Council meetings representing the interests of the ECIC. Under their excellent leadership the wider interests of the ECIC are kept at the top of the agenda and are now being actively developed. This is best exemplified by their increasingly important role in setting the agenda for the annual scientific meeting. This includes the scientific agenda, the career development sessions and the networking events. The latter are increasingly seen as some of the 'must attend' events of the meeting. Rotation of the committee this year will see opportunities provided to other early career investigators. The ECIC should be commended on their achievements. It is clear that if the ANZBMS can leverage the passion and enthusiasm of the ECIC we will be in a strong position moving forward.

Planning Future Meetings

The development of the Meetings Committee is starting to see real rewards. This was initially chaired by Emma Duncan but more recently has been chaired by Natalie Sims as President-Elect. The committee has been established to be proactive, rather than responsive, in planning future meetings. We aim to plan our meetings years ahead of time enabling us to identify the optimum locations and best partnerships. An important role is to retain corporate memory and expertise in order to support the program organising committee (POC). The POC is currently chaired by Rachel Davey and Rory Clifton-Bligh, and supported by Jill Cornish and Ian Reid, chairs of the local organising committee, who have done an excellent job with the 2018 meeting. The committee has elected to hold our 2019 annual scientific meeting in Darwin and has already appointed a conference organiser. Planning is in progress for the 2020 meeting and a location will be announced shortly.

Improving Communications

To provide the best support to ANZBMS members, Council has recognised the importance of improving communication. This applies both throughout ANZBMS as an organisation and also with external partners and stakeholders. With this in mind we have sought to clarify the committee structures and empower committee chairs to define their remit and deliver on their agenda. This has coincided with the rotation of chairs of the Professional Affairs Committee and Therapeutics Committee. Gustavo Duque has stepped down from chairing the Professional Affairs Committee and been replaced by Grahame Elder, whereas, Richard Prince has taken over from Mark Kotowitz as chair of the Therapeutics Committee. Gustavo and Mark have been excellent and the Society owes them our thanks. An important development this year has been to see the Communications Committee, chaired by Paul Anderson, develop a more contemporary communication strategy.

CONTINUED

REPORT FROM THE **PRESIDENT**

This has included reinvigorating our website and has benefited significantly from input from our ECIC. The new website has recently come on line and we anticipate this will better serve members of the society and give the wider community greater insights into the activities of ANZBMS.

Considering the future

It is clear our field faces challenging times. To be successful we will need to work together to address these challenges. This will require closer working relationships, particularly within ANZBMS, the strengthening of existing partnerships and potentially creating new partnerships. We are already a member of the International Federation of Musculoskeletal Research Societies (IFMRS) and are currently represented on their council by Markus Seibel. IFMRS are currently revising their constitution, which will ensure greater clarity over our relationship with the Federation. We have also been strengthening relationships with other organisations, both within Australia, including the Endocrine Society of Australia, the Australian Rheumatology Association and the Australia and New Zealand Orthopaedic Research Society, and international bodies such as the International Osteoporosis Foundation. However, we do need to be proactive and consider where we want to be as a Society in the future. Council is actively discussing these challenges and considering how we best do this. The work of the various sub-committees including the Research Committee, the Professional Affairs Committee, the Therapeutic Committee and the ECIC will become increasingly important in this regard.

I want to acknowledge all of the hard work of the chairs of our sub-committees, the work of committee members, members of ANZBMS council and particular lvone and Melissa for their hard work in supporting the day to day running of the society. This is very much appreciated and makes the society what it is today. Finally, I want to thank Emma and Natalie for their support and advice during this past year. This has made my job that much easier. There is no doubt that we are entering challenging times. However, I am optimistic that by coming together as an organisation, ANZBMS can meet these future challenges.

Peter Croucher



Peter Croucher, President

TREASURER'S REPORT

ASSOCIATE PROFESSOR NATHAN PAVLOS ANZBMS TREASURER

General Financial Result

2018 Member's funds = \$1,030,237 2017 Member's funds = \$1,042,786

The society remains in sound financial position with considerable funds conservatively invested. Reserves have declined marginally in successive years reflecting decreasing revenue from membership subscriptions and funding commitments to the Fracture Liaison Alliance, Osteoporosis Australia and the continuation ANZBMS Mid-Career Fellowship Scheme. Current external support is also down on previous years and will likely remain at reduced levels for the foreseeable future. This inevitably impacts profits from our meetings and we will likely see only small profits (if any) from future ASMs (including joint international meetings).

Overall Loss

\$12,549 Loss (2017= \$64,440 Loss, 2016= \$51,305 Loss; 2015 =\$79,747, profit)

The ANZBMS-IFMRS 2017 Joint Scientific Meeting in Brisbane generated a net profit (~\$83,044), of which we realised a profit share of (~\$42,051) following distribution of agreed profit splits with IFMRS.

Following Australian accounting standards the Auditor assigns ASM revenues to the year received, and expenditure to the year when committed. Consequently, the gross income and gross expenditure in respect of each ASM will be reflected in the profit and loss account, as they occur, rather than simply recognizing a 'net profit' of each individual meeting.

Investments (as at August 2018) COMMONWEALTH BANK

Balance in Premium Business Cheque Account **\$84,765.12** Balance in Business online saver **\$724.19**

BOQ SPECIALIST

Invested on: 3 July 2018 Maturity date 3 October 2018 Interest rate is 2.25% p.a. (Compounded at maturity) **\$299,595.58**

Invested on: 3 July 2018 Maturity date: 3 October 2018 Interest rate is 2.25% p.a. (Compounded at maturity) \$143,677.11

RURAL BANK TERM DEPOSIT

Invested on: 28 May 2018 Maturity date 28 August 2018 Interest rate is 2.42% p.a. (Compounded at maturity) **\$426,462.27**

TOTAL ACCUMULATED FUNDS \$955,224.17

We continue to exercise a conservative investment approach, although this strategy will be subject to revision in 2018/19. Term deposits are at <2.1%, which yielded \$22,520 in 2017-2018 with this income decreasing over (2016-2017 \$26,575) reflecting declining interest rates (2017, 2.79%) and cash reserves.

Expenses

Our society expenses increased marginally for 2017-2018 (\$~120,000) up from (\$110,000 for 2016-2017).

This includes;

Office - \$92,000 (Rent + salaries + office expenses) Audit - \$5,065 Awards - \$20,000 (Christine & T Jack Martin Research Travel Grant (\$15,000) - Amgen funded), Amgen-ANZBMS Outstanding Abstract award (x5, \$1,000 each - Amgen funded), Roger Melick and Chris & Margie Nordin Young Investigator Awards, Kaye Ibbertson Award, Sol Posen Award (all \$1,000, funded by the society) SOS Fracture Liaison Alliance -\$10,000

TREASURER'S REPORT

ASSOCIATE PROFESSOR NATHAN PAVLOS ANZBMS TREASURER

The Society remains in a strong financial position.

Income

Sponsorship - \$24,000 ANZBMS satellite meetings (Densitometry courses) - \$92,914 Subscriptions - \$39,874 Interest from term deposits -\$22,520

Membership and subscriptions have fallen over the last year (\$39,874 2018; \$51,191 2017) a trend consistent with other national and international societies. The Society should acknowledge the excellent contributions of the 2018 ASM POC, in particular to Rachel Davey and Rory Clifton-Bligh and to Nick Pocock for overseeing the outstandingly successful Densitometry Courses, respectively.

Future directions

For 2017-2018 we encountered a small but consecutive period of downturn in overall profits (~\$12,000 2018; \$64,400 in 2017). This is partly attributed to declining subscriptions, sponsorship and honouring our fiscal commitments to the SOS Fracture Liaison Alliance (\$10,000), provision of top-up funds to support Amgen OA ANZBMS Grants (~\$5000) and the continuation of the ANZBMS Mid-Career Fellowship Scheme (\$50,000). The fiscal sustainability of these schemes will again be closely reviewed for the 2018/19 period pending profit outcomes of the 2018 ASM.

For 2018/19, our standard outgoings are likely to be marginally reduced having met our fiscal obligations to Fracture Liaison Alliance in 2018. A foreseeable challenge remains to attract and retain financial members and to maintain sponsorship support afforded in previous years.

I would like to offer my thanks to members of the Finance Committee, Ivone Johnson and Melissa Dupavillion who have provided excellent guidance and support to me and Rod Laws of Tinworth & Co Chartered Accounts for overseeing the accounts.



Associate Professor Nathan Pavlos, ANZBMS Treasurer

INTERNATIONAL RECOGNITION OF ANZBAS MEMBERS

PROFESSOR HALA ZREIQAT WINS TOP ACCOLADE AT 2018 NSW WOMEN OF THE YEAR AWARDS

An extraordinary contribution to regenerative medicine and orthopaedic research in NSW and an unwavering commitment to improving opportunities for women around the world has won Professor Hala Zreiqat the top accolade at the 2018 NSW Women of the Year awards.

Hala Zreiqat grew up, studied and worked in Jordan before moving to Sydney to do a PhD in Medical Sciences – a decision that transformed her life. Today she is recognised internationally for her extraordinary contributions to regenerative medicine and translational orthopaedic research. Hala is Professor of Biomedical Engineering at the University of Sydney, where she founded the Tissue Engineering and Biomaterials Research Unit in 2006. Pioneering the invention of new biomaterials and biomedical devices, the unit's work is giving NSW a place at the table in the highly competitive global orthopaedic market.

Described as a trailblazer in championing opportunities for women, Hala was the first female president of the Australian and New Zealand Orthopaedic Research Society. A Senior Research Fellow of the National Health and Medical Research Council for the last 10 years, she was also the first person in NSW to receive a prestigious Radcliffe Fellowship from Harvard University. Hala is also known for her work in developing the younger generation and is an avid supporter of upcoming Australian researchers; having mentored many postdoctoral researchers and supervised almost 70 PhD, Masters and Honours students. While at Harvard, Hala founded a new international network called IDEAL Society, dedicated to improving opportunities and recognition for women around the world.



Hala Zreiqat

OUR MEMBERS

ANZBMS MEMBERS PASSING

Obituary HK lbbertson 26/11/1926 – 12/7/2018

Professor Henry Kaye (Kaye) Ibbertson, Emeritus Professor of Endocrinology at the University of Auckland and previous Head of the Department of Endocrinology at Auckland Hospital, died on 12 July 2018 age 91 years. Kaye graduated from the University of Otago in 1951 and, after working at Auckland Hospital as a junior doctor, did postgraduate training at the Hammersmith Hospital in London under Professor Russell Fraser, and at the Royal Free Hospital in London working with Dr Shelia Sherlock. He returned to New Zealand in 1963 to head the Radioisotope Unit at Auckland Hospital and went on to establish the Department of Endocrinology at the Hospital in the mid-1960s. As Head of Department, and Professor of Endocrinology at the University (1970-1992), he was responsible for training a large number of younger physicians who have gone on to senior positions in New Zealand and beyond.

His influence extended well beyond the University and Hospital. He held important positions in the Royal Australasian College of Physicians, the Medical Research Council, the Child Health Research Council, the Auckland Medical Research Foundation, and was a foundation member of both the NZ Society of Endocrinology and the Australian and NZ Bone and Mineral Society. Both these societies have established ongoing awards named in his honour.

Kaye travelled to Nepal with Edmund Hillary on 3 occasions between 1966 and 1972 and studied the effects of iodine deficiency among the Sherpa population, leading to a programme of iodinisation which led to a profound improvement in the health of the Sherpa population. He helped establish a programme for growth hormone replacement in deficient children in NZ, and did much early work on treatment of Paget's disease and osteoporosis with bisphosphonates. Kaye had a deep interest in medical history and was a founding member of the Auckland Medical Historical Society which he chaired for many years. He was instrumental in establishing the Ernest and Marion Davis Memorial Library and Lecture Halls on the Auckland Hospital site, a great asset to the local medical

community. Kaye was a keen trout fisherman, beekeeper and antiquarian. He made an immense contribution to medical research and practice in New Zealand and Australia, and he will be greatly missed by his many friends and colleagues.

Obituary contributed by Prof Ian Holdaway and Prof Ian Reid



Professor Henry Kaye Ibbertson

THERAPEUTIC COMMITTEE REPORT

New members Sabashini Ramchand and Peter Sim were welcomed to the committee.

The current members are: Richard Prince, Sabashini Ramchand, Peter Sim, Emma Duncan, Craig Munns, Nick Pocock, Tania Winzenberg and Fran Milat.

The new TOR recently approved by Council was tabled and approved. It is now available on the updated ANZBMS web site.

Consultation Reply Regarding Denosumab for Osteoporosis. The Therapeutics Committee provided advice to PHARMC New Zealand on the extension of support for denosumab prescription. PHARMAC has now has now extended support for denosumab in limited circumstances.

ESA/ANZBMS/MSA/COSA Position Statement: "Optimising bone health in women with breast cancer on endocrine therapy" now published in Clin Endo Actions Requesting a link on the updated ANZBMS web site Supporting publication in the Australian Medical Literature Investigating further actions to progress evidence into practise including actions from Bone Density Committee (MBS) and Therapeutics Committee (manufacturers). Therapeutics Guidelines update ANZBMS has been asked to contribute to a new Therapeutics Guidelines update. Many important suggestions have been made. The new version is expected in 2019.

Therapeutic agent guidelines As part of the new TOR the Therapeutics Committee is planning to develop Australian Guidelines to assist practitioners in Australia and New Zealand to understand and apply advances in the medicinal and surgical therapeutics. A subcommittee lead by Dr Peter Sim is

A subcommittee lead by Dr Peter Sim is considering guidelines for Burosomab and new FGF 23 monoclonal antibody for the management of hypophosphatemic rickets. Guidelines for new anabolic agents

and anti resorptive agents have been suggested. Media Contacts

Laura Wakely from the Cancer Council requested advice vitamin D story for The House of Wellness online



Richard Prince Chair Therapeutics Committee

RESEARCH SUB-COMMITTEE REPORT

Chair: Paul Baldock Committee: Natalie Sims, Jacqueline Center, Dorit Naot, Sharon Brennan, Jiake Xu, David Findlay; Mark Forwood

I'd like to thank all of the Research Sub-committee members for their contributions and support. Their thoughtful and timely responses continue to make my job much easier. I would suggest that the composition of the committee needs to be adjusted to include greater clinical perspective. Discussion regarding inclusion of representation from the Early Career Investigator Committee will also be held during the ASM. The workload regarding prizes (most notably at the ASM) is considerable, with the potential to have an individual responsible for such activities, freeing the Head of committee for more strategic activities.

NHMRC Consultation on Peer Review

- A submission was made to NHMRC regarding issues with peer review.
- An 18 part pro forma was sent early December 2017. Special Mention to Allison Pettit and David Findlay for their role in assisting with this submission.
- The need for subject-specific peer review was highlighted.
- In the 'consultation summary report' the need for 'appropriate expertise' and 'subject matter experts' were noted as key requirements.
- https://www.nhmrc.gov.au/ restructure/news/summarynhmrc-s-public-consultationpeer-review-new-grantprogram
- Happy to submit final report to the Council if requested



Paul Baldock

Annual Scientific Conference/ Awards

• ASM: The committee contributed to scoring of abstracts, and conferred as to the appropriateness of awards allocated based upon these scores. Additionally, applications for the Sol Posen, Kaye Ibbertson and Christine and T Jack Martin Travel Awards were judged. Members of the Research Subcommittee also actively participated in the review of several high quality applications for this year's Amgen GSK/OA ANZBMS awards.

• Of note, the scientific organising committee (Rachel Davey, Rory Clifton-Bligh) for the ASM have instituted a new poster system, involving guided tours and mini presentations in a more structured format. This change will be monitored closely, and if successful, is recommended as a standard format going forward.

CLINICAL PRACTICE COMMITTEE

Background:

The role of the Clinical Practice Committee, (previously the Professional Affairs Committee) is to engage with other Scientific Societies, NGOs and Professional Colleges sharing a similar interest in promoting high quality research, strong scholarship and professional development in areas directly or to some extent associated with musculoskeletal diseases.

Matters arising over the past year

Prof Gustavo Duque, previous chair of the Professional Affairs Committee, was the ANZBMS representative to the Adult Medicine Division of the RACP till June 2018. Activities included working on a model of cooperation with the College, which has now been circulated. The aim of this document is to clarify the respective contributions of the ANZBMS and the College to common activities, including ssupporting the professional careers, education and training of Fellows and Trainees and advice on policy and advocacy.

The society supports the mission of the SOS Fracture Alliance, and has previously provided financial support. The Committee has received a report from Prof Markus Seibel (SOS Fracture Alliance chair). The Alliance, in conjunction with Osteoporosis Australia, submitted a report to the Australian Federal Government titled 'A national approach to expanding secondary fracture prevention in Australia', which has subsequently been forwarded to state governments for comment.

A response to this submission is pending. The Alliance also commissioned the Sax Institute to determine the feasibility of designing and translating into practice a program to identify, investigate and initiate management of all people following a sentinel fracture. Most Australian fracture liaison services have been assessed and models of care are being developed. In addition, Natural Language Processing (NLP) is currently being assessed at three Sydney hospitals with funding from the Local Health District, to identify patients with fracture from imaging reports. That study is expected to be completed towards the end of 2019.

Current and planned activities:

Relationships with company sponsors are important to the financial viability of the Society and our educational activities. These relationships need to remain in accordance with Medicines Australia Codes of Conduct Guidelines. The Committee oversees these relationships and will reach out to additional company sponsorship of educational activities.

The Committee will assess opportunities for early career investigator exchanges with the ASBMR and the ECTS.

The Committee will seek additional opportunities to engage with the Royal Australian College of General Practitioners including the RACGP Expert Committee Research and the Australasian Association of Academic Primary Care. The Committee will discuss ways to increase the focus on osteoporosis in the Medical Journal of Australia and the Internal Medicine Journal. The Committee will investigate providing advice on content to relevant areas of the HealthPathways Portal, which provides guidance to primary care clinicians on the assessment and treatment of over 500 clinical conditions, including osteoporosis and mineral and bone disorders. The pathways also contain guidance on access to diagnostics, specialist opinion, specialist treatment services, and other supports, and facilitate smoother patient management between hospital and primary care staff. The system started with a template developed by the Canterbury District Health Board in NZ and an IT company (Streamliners), and has since spread. A number of Local Health Districts in Australia are currently introducing HealthPathways and requesting advice on local templates.

The Committee, together the society representatives to the RACP Advanced Training Committee for endocrine training, will support the development of an Electronic Seminar Series with downloadable material for osteoporosis and bone biology.

The Committee will seek to actively engage and collaborate with other, newer Societies in the area of musculoskeletal disease and bone biology.



Graeme Elder

PROGRAMME ORGANISING COMMITTEE 2018

The ANZBMS POC (Rachel Davey, Co-Chair; Rory Clifton-Bligh, Co-Chair; David Findlay, Jill Cornish, Tim Cundy, Jackie Centre and Audrey Chan) have worked together to create what we hope will be an exciting and engaging program for this year's meeting. The final program offers a variety of cuttingedge science, with a good balance of basic and clinical sciences. We are very privileged, particularly as this is a stand-alone ANZBMS meeting, to have 5 prestigious international speakers including Marie-Helene Lafage-Proust (France), Roberto Civitelli (USA), Mike McClung (USA), Buddy Ratner (USA) and Kenneth Saag (USA). In addition, we have 20 invited speakers from Australia and New Zealand and from the 144 abstracts that were submitted, 40 were accepted for oral presentations, with 20 plenary posters, 11 Margie and Christopher Nordin Poster Award finalists and 74 regular posters. This year, we have introduced a poster tour whereby the finalists for the Nordin Young Investigator Poster prize will have the opportunity to present their poster as a short oral presentation.

To start the program, we are very grateful to Nick Pocock for organising an update on DXA symposium. We have continued to strengthen existing links with other societies, with a cobadged symposia with the Australian & New Zealand Orthopaedic Research Society (ANZORS). Following on from last year's success, the ANZBMS Early Career Investigator Committee have organised three events during this year's meeting, a satellite clinical case meeting, a networking event and a career development symposium. Although the program is extensive, as there are no concurrent sessions, there is still plenty of opportunity for networking and discussion including an activities afternoon, where delegates can experience some of what beautiful Oueenstown has to offer.

We are very grateful for the generous support from industry, our platinum sponsors Amgen and Eli-Lilly for supporting two lunch time symposia, and Getz Healthcare, Hologic, Theramex, Reframe Osteoporosis and Bruker. We would like to thank all the members of the ANZBMS POC for their tireless contributions, the 11 society members who reviewed abstracts within a tight schedule, the session chairs, all members of the LOC, Ivone Johnson, QT Event Management (Malcolm Blakey) and all others who have contributed to the meeting.



Rachel Davey, Rory Clifton-Bligh ANZBMS POC co-Chairs

DENSITOMETRY SUB-COMMITTEE

ANZBMS Training Course The course in Sydney in April was very successful with over 70 registrants. The next course is due to run in Adelaide in October 2018.

There is a continuing demand for a one-day course by Endocrine Registrars who do not need to know the technical details or scanning. The Committee feels there is a good case to run such a course once a year.

DXA Medicare Item No.

The committee was approached for an informal opinion regarding possible a possible approach to the DOH for Capital Sensitivity for DXA scanners similar to what currently applies to other diagnostic imaging equipment. Capital Sensitivity refers to the system where the Medicare rebate amount is determined by the age of the equipment used to provide the service. The "Capital Sensitivity" measure encourages service providers to upgrade and replace aged equipment with the aim of improving the delivery of quality of diagnostic imaging services). While the suggestion, from one of the manufacturers is to their advantage there is a good case that medical imaging equipment older than a certain age should not receive the same reimbursement as newer scanners and there is no obvious reason why DXA scanners should be treated differently to CT scanners etc. The committee suggested that if ANZBMS support was sought the manufacturers

should contact the Council requesting a formal position. Awaiting advice of Council.



Nick Pocock

COMMUNICATIONS REPORT

The relatively newly formed Communications Committee has been focussed on reviewing the way we engage and promote the activities of the ANZBMS membership, as well as provide resources supporting clinical and basic musculoskeletal health research. With the advice of the Communications Working Group, the new ANZBMS website seeks to improve the way we communicate information for, and on behalf of, the ANZBMS membership.

The new ANZBMS website is now 'live'. The overall content you can review either on your computer or now more accessibly on any smartphone at www.anzbms.org. au. The intent of the new website is to have a look, accessibility and relevancy which will draw people back to the site for old and new content.

The site is not yet complete but contains much of the same content of the old website in a re-organised manner. The site also contains new content and options for adding additional material. Where relevant, the Communications committee will seek to engage with Council and each sub-committee over the coming weeks to review the content on the relevant pages in order to ensure that the material published on the ANZBMS is accurate and current. As well, we will seek to add value to the website content. In some cases, this may include revisiting published policies and statements. With an organised website, those conversations and reviews should be able to take place as frequently as required.

A level of communication for which we can do much better is to promote the activities of our membership, especially within the ECIC. The website will now provide avenues to do so, including prominent News sites and stories, ECICs-specific resources, and a live twitter-feed which allows twitter users to tag @ANZBMSoc and have their stories/messages appear on the front page of ANZBMS. The twitter-feed also allows non-users of twitter the ability to scroll through twitter posts and click on links to direct them to relevant information. We encourage members who tweet to follow and add @ANZBMSoc to their messages related to musculoskeletal research, and by doing so it served as a way of communicating with ANZMBS.

Future ANZBMS email alerts will remain and will both have in-text message content and links to specific content on the ANZBMS webpages. This will ensure that if you missed emailed content that you can search for the same information on the website.

We welcome input from all members with regards to the content of the webpages, including any fresh ideas for displaying content. We also request that members provide news-worthy stories, achievement, and images throughout the year which promote ANZBMS and the individuals within. The website and our communication is only as good as the content provided. We want to remind the membership that by using ANZBMS to promote their activity to the broader scientific community and general population, it also strengthens ANZBMS.

I'd like to thank Ivone and Allison for their efforts in the Communications committee. As well, I would like to thank the Communications Working Group and ECIC Committee for their contributions towards the website design and content.

Communications Committee: Paul Anderson Allison Petitt Ivone Johnson

Working Group: Richard Prince Natalia Sims Victoria Lietch Joshua Lewis Sabashini Ramchand Athena Brunt Audrey Chan



Paul Anderson

COMMUNICATIONS REPORT



EARLY CAREER INVESTIGATOR COMMITTEE

The specific objectives of ECIC are to:

- 1. To act in collaboration with the ANZBMS senior committee and foster active engagement of early career investigators within the ANZBMS.
- 2. To promote activities that engage early career investigators and senior members in open dialogue and collaborative initiatives.
- 3. To increase early career investigator awareness of research trends and application of new technologies in bone and mineral research.
- 4. To increase engagement of clinical trainees and improve training in bone and mineral metabolism.
- 5. Involvement in scientific and social programs at the ANZBMS Annual Scientific Meeting.
- To foster science communication and engagement with the public.
- 7. To facilitate translation of scientific findings to industry and government.

2018 ECIC Committee:

The ECIC committee was formed in February 2017 and consists of two co-chairs Dr Sabashini Ramchand and Dr Joshua Lewis and 8 members Dr Ashika Chhana, Mr Feitong Wu, Mr Alexander Rodriguez, Dr Audrey Chan, Dr Renee Ormsby, Dr Christina Vrahnas, Dr Jasna Aleksova, Ms Athena Brunt. In the last 12 months, for personal and professional reasons, Athena **Brunt and Christina Vrahnas** have left the ECIC. The 2-year term for 3 members (Audrey Chan, Feitong Wu and Joshua

Lewis) is complete and these members will give up their roles on 3rd September 2018 for new ECIC members. As per the ANZBMS ECIC terms of reference, past cochairs stepping down (J. Lewis) will remain as an observer for a further term. We would like to thank all the members of the ECIC for their contributions and support over the last 18 months.

New ANZBMS ECIC members:

In June we asked for EOIs for new members of the ANZBMS ECIC. There were 11 applicants for 5 positions. All applicants were ranked 1-11, by each member of the ECIC, except where there was a conflict of interest. Rankings were based on the applicants resume and goals for the ECIC. State representation, gender equality and a balance of clinicians and scientists were also taken into consideration.

The 5 top ranked applicants were selected by the ECIC and endorsed by Peter Croucher (ANZBMS President). We would like to thank all applicants for their interest in the ECIC and warmly welcome our new ECIC members and we look forward to working with you. These applicants were: Dr Eleanor Thong, Victoria Dr Melissa Cantley, South Australia Dr Laura Laslett, Tasmania Dr Ayse Zengin, Victoria Dr Marc Sim, Western Australia

Objective 1:

To act in collaboration with the ANZBMS senior committee and foster active engagement of early career investigators within the ANZBMS.

This year at the ANZBMS, early career investigators have been given the opportunity to co-chair sessions with senior members. We are also working to increase the number of ECIs that ask questions during sessions.

J. Lewis and S. Ramchand will cochair the Christopher and Margie Nordin Young Investigator Poster Prize Tour with R. Davey and R. Clifton-Bligh. Rosettes have been organised to highlight these posters for the tour.

ECIs are also currently members of other ANZBMS sub-committees: Ashika Chhana and Audrey Chan – Meetings Committee; S. Ramchand – Therapeutics Committee.

Objective 2:

To promote activities that engage early career investigators and senior members in open dialogue and collaborative initiatives. Bones and Brews Networking Event. Was held at Reds bar,

Rydges. The purpose of this social event is for early career investigators and student members of the Society to interact with more senior members and international guests as well as to meet and engage with the ECIC members personally. During this session a bone themed trivia was run. The major prize for this event was two movie tickets and ANZBMS membership registration for 1 year. A number of smaller prizes such as movie tickets, wine and novelty pens will be used for door prizes and runner up prizes. 45 registered delegates as of 30th August 2018 and we anticipate that these numbers will increase.

Objective 3:

To increase early career investigator awareness of research trends and application of new technologies in bone and mineral research.

EARLY CAREER INVESTIGATOR COMMITTEE

ANZBMS Website. The ECIC has been working with the ANZBMS Website Working Group to develop the early career section of the ANZBMS website. This includes pages on the role of the ECIC and its members, ECI news, ECI calendar, ECI awards, grants and scholarships and ECI resources.

Objective 4:

To increase engagement of clinical trainees and improve training in bone and mineral metabolism.

Clinical Cases in Metabolic Bone Disease Seminar. Akin to the Endocrine Society of Australia (ESA) Clinical Weekend, this is a pre-satellite event organised prior to the ASM to increase engagement of clinical advanced trainees and improve training in bone and mineral metabolism. Advanced trainees were invited to submit a clinical case for presentation at this meeting and the 6 top scoring abstracts, determined by an independent judging panel who were blinded, were selected for presentation at this meeting. The 6 cases were presented over a 3-course buffet dinner and a winner adjudicated by a panel of 4 judges (E. Duncan, I. Reid, J. Centre and P. Ebeling). The prize for this event is two movie tickets, ANZBMS membership registration for 1 year, fee exemption for publishing in JBMR Plus (courtesy of P. Ebeling). 36 registered delegates as of 14th August 2018.

RACP Webinar Series.

The clinical representatives (J. Aleksova and S. Ramchand), with the assistance of E. Duncan and I. Johnson, submitted an successful application to the Royal Australasian College of Physicians (RACP) to host a webinar series in metabolic bone health to RACP advanced trainees. This webinar is part of the Specialty Society Webinar Service pilot that is being undertaken by the RACP in partnership with its affiliated specialty societies. The first lecture was delivered by Professor Peter Ebeling on Wednesday 18 July on post-transplant osteoporosis/bone health (including solid organ and bone marrow transplant). This was well received with approximately 56 people who dialled in on the night. The remaining 2 lectures will be delivered by Professor Emma Duncan on pre-menopausal osteoporosis (including POI and the female athlete) and Professor John Eisman on stopping osteoporosis medications- when, why and how.

Objective 5:

Involvement in scientific and social programs at the ANZBMS Annual Scientific Meeting. In addition to the events held by the ECIC at the ANZBMS ASM, to identify and engage with ANZBMS early career investigators the ECIC have a booth and promotional material for display in the Poster Hall. In addition, ECIs that signed up to the ECIC mailing list and were selected to present a poster at this year's ASM have their posters highlighted with an "ANZBMS Early Career Investigator" rosette.

The ECIs, with the assistance of N. Sims, identified the JSBMR early career investigator delegates and welcomed them by email prior to the meeting. During the meeting, the ECIC met with these delegates and involved them in our ASM program and social functions.

Objective 6:

To foster science communication and engagement with the public. Osteoblasting Your Research Profile in the Digital Age: This career development event held at the ASM provides an excellent opportunity for all early career researchers to gain knowledge in using online and social media tools (Twitter, Research Gate, podcasts, Facebook, Blogs etc.) to advance their research and career. Invited speakers for this session are Souxisie Wiles, Roberto Civitelli, Gustavo Duque and Natalie Sims who are well-known for their active use of these communication tools.

We are currently developing new initiatives outside of the annual scientific meeting to enhance the ANZBMS ECIC profile in conjunction with other international early career committees in bone and mineral research.

We would like to thank all members of the ECIC for their contributions and support in 2018.



Sabashini Ramchand and Joshua Lewis

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COMMITTEE REPORTS

EARLY CAREER INVESTIGATOR COMMITTEE







AMGEN OUTSTANDING ABSTRACT AWARDS

Ian Reid Institute: University of Auckland, NZ



KAYE IBBERTSON AWARD

Dawn Aitken Institute: Menzies Institute for Medical Research, TAS



SOL POSEN AWARD Nicola Lee Institute: Garvan Institute of Medical Research, NSW



Nathan Pavlos Institute: University of Western Australia, WA



CHRISTINE AND TJ MARTIN TRAVEL GRANT

Thao Phuong Ho-Le Institute: University of Technology, NSW



ROGER MELICK YOUNG INVESTIGATOR AWARD Jun Li Institute: University of Otago, NZ





Alexander Rodriguez Institute: Monash University, VIC

HIGHEST RANKED STUDENT ABSTRACT AWARD Marija Simic Institute: Garvan Institute of Medical Research, NSW



ANZBMS CLINICAL RESEARCH EXCELLENCE AWARD Jasna Aleksova Institute: Garvan Institute of Medical Research, NSW



ANZBMS CAREER ACHIEVEMENT AWARD

Professor John Eisman is the recipient 2018 ANZBMS Career Achievement Award. This award recognises John's outstanding contributions to scientific and clinical research, excellence in teaching, and services to the field of musculoskeletal medicine.

John Eisman AO (MB BS, PhD, FRACP) is Director of Clinical Translation and Advanced Education at the Garvan Institute. From 1984 to December 2011, John was Garvan's Director of Osteoporosis and Bone Biology. His medical and basic science training was in Sydney and Melbourne with post-doctoral studies in Madison, Wisconsin and Bern, Switzerland. Professor Eisman initiated and has run the Bone and Calcium clinic at St Vincent's Hospital and the Dubbo Osteoporosis Epidemiology Study since their inception more than 20 years ago. Professor Eisman was Editor-in-Chief of the Journal of Bone and Mineral Research, is a past member of the Board of the International Bone and Mineral Society and of the Council of the American Society for Bone and Mineral Research. He is a co-founder and President of the Australia and New Zealand Bone and Mineral Society from 1993 to 1995.

Professor Eisman chaired the inaugural Australian National Health Priority Action Council's National Arthritis and Musculoskeletal Conditions Advisory Group and co-chaired its successor, the Australian Better Arthritis and Osteoporosis Expert Advisory Committee. He is currently co-chair of the NSW Health Agency for Clinical Innovation in Musculoskeletal conditions and chair of the American Society for Bone and Mineral Research (ASBMR) International Task Force on Osteoporotic Fracture.

The focus of Professor Eisman's research is the epidemiology and genetics of osteoporosis, encompassing population, family and twin studies as well as molecular and cellular mechanisms for gene effects. His major commitment and focus is translating osteoporosis research findings to real improvements in health care delivery to the general community through the education of patients and their doctors.

Professor Eisman's award was received at the 2018 ANZBMS Annual Scientific Meeting in Queenstown, New Zealand with a standing ovation.



CHRISTINE AND T.J. MARTIN RESEARCH TRAVEL GRANT 2018

Alexander J. Rodriguez

First of all, I wish to again express my profound gratitude to the ANZBMS for this extraordinary opportunity. Outside of the specific aims of the study tour undertaken, this Award has resulted in two important personal outcomes: (1) I fulfilled the initial motivation for my study in learning sophisticated epidemiological techniques and (2) I have cultivated valuable professional contacts and enhanced my research profile which will both contribute to future research success as I transition from student to professional. With the help of this award I undertook an extensive study tour of several European countries including a laboratory visit in Denmark to complete a specific project as well as attend a number of important bonefocussed conferences throughout the continent.

My project aimed to understand if use of the common anti-osteoporosis agent bisphosphonates was associated with increased risk of heart failure. Our present understanding is that fractures are associated with an increased mortality risk and that having low bone mineral density (BMD) is also associated with an increased risk of mortality. The causal nature of the relationship between fractures, low BMD and mortality remains controversial. Most individuals, particularly in developed countries, die as a result of cardiovascular diseases (CVD). Presently, it is uncertain if the excess mortality related to low BMD and fractures is due to a potential indirect mechanism that arises from the treatment

of osteoporosis. Bisphosphonates, a widely used anti-osteoporosis drug, have been previously linked to an increase in cardiovascular risk but causality remains controversial. Previous studies were limited in their investigation of prognostic factors for heart failure as the data capture was from insurance records and not clinical records. Therefore, taking into consideration important risk factors such as hypertension, renal function, body composition, smoking and other risk behaviours; it is anticipated that we may be able to potentially better characterise the risk of heart failure from bisphosphonate therapy and further, better identify specific patient subsets who may be at elevated risk levels.

I undertook this project at the University of Southern Denmark in Odense, Denmark. Here I worked with the Odense Patient data Exploratory Network (OPEN) under the guidance of Professor Bo Abrahamsen. The OPEN team consists of clinicians, statisticians, epidemiologists and academic scientists. This setting was ideal from a mentorship and also study design perspective. The cohort that I examined all had hip and spine BMD assessed by dual-energy x-ray absorptiometry (DXA) meaning that compared to previous investigations, patients and controls in this study were matched by indication. Other similar studies were confounded by control patients (those not receiving treatment) not having BMD information limiting the ability to independently examine the contribution of BMD to risks. Also, a unique aspect of the Danish health system is the centralised archiving of information through Statistics Denmark. All registries for the various confounders and outcomes we were interested in were complete in the sense that there were no missing data – phew!

There were approximately 7,500 patients who had a prescription for bisphosphonates and we matched these patients using a technique called propensity score matching, to approximately 20,000 controls who never used bisphosphonates. A propensity score is the conditional probability that an individual receives a treatment or exposure under study (in this case, a bisphosphonate prescription) given all measured confounders. Thus, by propensity score matching we are able to, as best we can, replicate the randomisation performed in clinical trials and limit bias by robustly accounting for differences between users and non-users. This was an unanticipated technique I picked up as part of my project.

The rate of atrial fibrillation and heart failure events amongst bisphosphonate users was approximately 60% that of non-users when assessing crude incidence rates. However, in Cox-proportional models bisphosphonate use was associated with an approximate 20% increased risk of atrial fibrillation and 10% increased risk of heart failure in an minimally adjusted analysis. After adjusting for multiple potential confounders these associations were attenuated: approximate 10% increased risk of atrial fibrillation and approximate 5% decreased risk of heart failure (non-significant). Employing the defined daily dosage (DDD) strategy to estimate cumulative drug exposure did not appear to change these findings.

These findings were surprising as during my study tour a very similar study to the one I was undertaking was published and

CHRISTINE AND T.J. MARTIN RESEARCH TRAVEL GRANT 2018

showed that bisphosphonate use was robustly associated with decreased risk of many cardiovascular events (including atrial fibrillation and heart failure) as well as atherosclerotic events and mortality [doi: https:// doi.org/10.1002/jbmr.3448]. We were fortunate that in our study all patients had BMD by DXA and thus we were able to investigate the independent contribution of low bone mass to event risks. Thus, we additionally adjusted our models for BMD and separately for T-score, but results remained unchanged. This led us to speculate that any risks associated with longterm bisphosphonate use on cardiac dynamics may be due to mechanisms independent of bone mass and may be more related to direct effects of bisphosphonates on cardiac tissue. Investigation of this hypothesis is informing my future work.

During my study tour I also had the fortunate opportunity to attend a number of national and international conferences throughout the continent. First, I presented some work from my PhD, which is being completed in collaboration with my host in Denmark at the World Congress of Osteoporosis, Osteoarthritis and Musculoskeletal Diseases in Krakow, Poland, I made a point of attending as many sessions as possible including the networking events to establish personal connections. This was because, subsequently at the European Calcified Tissue Society meeting in Valencia, Spain it became easier to interact with other researchers as by now that had only freshly met me a month or so ago.

At this particular meeting a proud moment for me occurred. One of my conference habits is to screen all the abstracts in the abstract book and then make a point of visiting the posters of interest. It was at one poster on a topic close to my research interest that I got speaking with the presenter. It was Dr Lise Sofie Bislev from the University of Århus, (Århus, Denmark). As we spoke about our research I showed her my conference lanyard with my name on it. She was aghast and then asked, "Are you the Alexander Rodriguez who wrote the metaanalysis on vitamin D and arterial stiffness?". "As a matter of fact, I am!". For the first time, I, me, had academic recognition! That was immensely satisfying.

As with many aspects of life it is the , what I like to call "Donald Rumsfelds" ("unknown-unknowns") that always seem to have the greatest positive impact you. It was learning the propensity score matching technique that has massively added to my epidemiological skillset and something that will be immediately applicable to my ongoing work. Another Rumsfeld I picked up was in how the data for the cohort is organised and managed. In my previous work I would usually compile all the data I need into the one dataset and get analysing. However, in wanting to keep to the OPEN model, the approach was instead to keep related information in separate datasets (eg. all prescription information in one, all DXA information in another etc.) and then at the time of analysis use some commands to "reach" into these datasets to use only the information I needed and created a temporary dataset that exists only at the time of analysis.

This made data management more streamlined, file sizes were smaller and also there was less chance of carrying forward any errors. I will certainly be employing this data management strategy in my future work.

Overall, this experience has been enormously rewarding. I have gained many new professional skills that I can immediately employ in my current research as I finish my PhD and also take into future research for which this study tour has sparked many interesting hypotheses. I have also made many new contacts, some that have been professional mentors and others that may prove to be potential collaborators for future work.

I wish to thank, most sincerely the ANZBMS for this incredible opportunity. I hope that my experience outlined here provides the Society with satisfaction that, yet another young researcher has benefitted from the generous and unique support offered through the Award.



Alexander J. Rodriguez

ANZBMS MID-CAREER FELLOWSHIP REPORT 2018

I would like firstly to sincerely thank ANZBMS for awarding me the 2018 Mid-Career Gap Fellowship. I feel honoured and fortunate to have had this award at the time when my NHMRC Early Career Fellowship came to an end. This fellowship, together with help from the Garvan Institute allowed me not only to continue my research into the role of bisphosphonates on mortality risk reduction in people at increased fracture risk, but also to develop a new research stream into the association of cognitive decline with bone loss and fracture risk in the elderly. During the tenure of this fellowship, I was able to finalise two first-author research manuscripts. The first manuscript on the association between bisphosphonate and mortality risk reduction is now submitted and in final stages of revision.

The second first-author manuscript describing the role of bone loss reduction in mediating the survival benefit of bisphosphonates is finalised and will be submitted once the first manuscript is accepted for publication. Importantly, this fellowship gave me the opportunity to expand my research interests. I started a novel project focusing on the association between cognitive decline and bone loss. I had the opportunity to present preliminary data from this study as an oral presentation at the 2018 ANZBMS conference in Queenstown and currently I am finalising the manuscript which will be submitted early next year. I was also fortunate to be able to initiate collaboration with researchers in the field of dementia research to progress this project further and explore the role of fracture event in cognitive decline and ultimately dementia development.

I feel fortunate and privileged for the opportunity provided by the mid-career gap fellowship to improve my track record and raise my chance of getting future funding.



Dana Bliuc

PHILIP SAMBROOK AWARD

Dr Feitong Wu

Menzies Institute for Medical Research, University of Tasmania

Area of research to be presented 'Associations of measured sedentary time and physical activities with muscle strength, balance and falls in Australian middle-aged women'



Feitong Wu

AMGEN OA-ANZBMS CLINICAL GRANT PROGRAM

Dr Vinicius Cavalheri, PhD Senior Lecturer and Evidence-Based Physiotherapy Projects Coordinator, School of Physiotherapy and Exercise Science, Curtin University

'Addressing the weakening of bones commonly seen in people with chronic obstructive pulmonary disease.'

Patients with chronic lung disease have weak bones and, when compared with healthy people, they have a higher chance of dying if they break their hip during a fall. Jumpingtype exercises may improve the strength of their bones, and this project will look to see if these exercises are possible. In patients with chronic lung disease referred to lung rehabilitation programs that include exercise training, we will add a prescription of jumping-type exercises such to be performed during the 8 weeks of the rehabilitation program and supervised by a physiotherapist. Following the end of the lung rehabilitation program, jumping exercises will also be performed at home, four times per week for 32 weeks.

The study will assess whether the jumping exercises can be tolerated by patients and investigate changes in bone strength and balance after the 40-week program.

This study will provide initial evidence on the effectiveness of incorporating jumping-type exercises into lung rehabilitation programs to improve bone health and balance in this patient group, thereby potentially reducing both the risk of breaking their hip/leg during a fall and subsequent risk of dying after breaking their hip/ leg.



Vinicius Cavalheri

Associate Professor Chris White Area Director of Research, South Eastern Sydney Local Health District

'Early Identification of Patients at risk from Osteoporosis'

The project addresses the issues associated with early identification of patients at risk of secondary fractures with undiagnosed osteoporosis. Early identification of such patients followed by appropriate investigations and therapy will reduce the burden of the disease to both individuals and society through reduction of the morbidity and mortality associated with the disease. The project will analyse over 3,000 radiology reports (originating from the Dubbo epidemiological study) by a tool designed to read radiology reports in real time and identify all reports in which a fracture is either directly or incidentally reported. Analysis of the reports from the epidemiological study, where fractures and their impact have already been identified, will provide an accurate and efficient methodology for verification of the specificity and sensitivity of this tool.

The aim is people suffering from osteoporosis at the highest risk of a second fracture will be identified early and appropriately investigated. Those diagnosed with the disease will be offered treatment regimes to reduce the progress of their disease, limit the rate of refracture and provide them with an improved quality of life.



Chris White

AMGEN OA-ANZBMS CLINICAL GRANT PROGRAM

Associate Professor Nigel Toussaint Deputy Director of Nephrology, Department of Nephrology, The Royal Melbourne Hospital

'NAB-CKD Study (Non-invasive Assessment of Bone health in Chronic Kidney Disease).'

Developing novel screening and management tools for osteoporosis and fracture risk in people with both chronic kidney disease (CKD) and osteoporosis assumes considerable importance given the global burden of kidney disease. This project uses an innovative non-invasive measurement of bone microarchitecture with magnetic resonance imaging (MRI) to assess osteoporosis and other bone diseases in people with CKD and evaluate its clinical usefulness to potentially reduce fracture.

This project aims to assess bone microarchitecture with magnetic resonance imaging (MRI) scans in patients with osteoporosis and chronic kidney disease (CKD) and compare bone microarchitecture with commonly used osteoporosis tests - bone turnover markers (from blood tests) and bone mineral density (from bone density scans). The MRI images will also be correlated with clinical outcomes. such as fractures, over 3 years, to improve the long-term management of osteoporosis and bone disease in patients with CKD.

Knowledge of the development and progression of osteoporosis (or other bone diseases) in chronic kidney disease (CKD) is relatively poor given difficulties in diagnosis. We endeavour to establish and validate the use of MRI scans for the determination of bone microarchitecture in CKD. This will support the clinical application of MRI in helping direct therapies towards the management of osteoporosis (and other bone diseases) in patients with CKD.



Nigel Toussaint

ANZBMS 2018 REPORTS

THE 10TH CLARE VALLEY BONE MEETING

On the weekend of March 23-26 we ran the 10th Clare Valley Bone Meeting at the Clare Conference Centre. This was an exceptional meeting focusing new developments in basic and clinical science of the skeleton. We were privileged to hear from Professor Tamara Alliston, from UCSF, on the actions of TGF-beta in bone homeostasis; Professor Anna Teti, from The University of L'Aquila in Italy, on lipocalin 2 actions in bone; Professor Xu Cao, from Johns Hopkins University in Baltimore, on his exciting work showing a causal role for

TGF-beta in osteoarthritis; and Dr Fintan Moriarty, from the AO Group in Davos Switzerland, on modelling bone infection. In addition, more than 20 speakers from around Australia presented their cutting-edge musculoskeletal research, in an environment that was crossdisciplinary, interactive and very stimulating. Numerous new connections were made as researchers became aware of work that is occurring outside of their immediate research domain, and emerging researchers were given a wonderful opportunity

to both present their work, as well as to meet with established investigators in a safe and friendly environment. Approximately half of the attendees identified as ANZBMS members. The meeting, co-badged with the ANZBMS, was supported by sponsorship from the Hospital Research Foundation, Zimmer Biomet, Amgen, Smith and Nephew and Global Orthopaedic Technologies.

David Findlay, on behalf of the organising committee.





2ND-5TH SEPTEMBER 2018, QUEENSTOWN



















2ND-5TH SEPTEMBER 2018, QUEENSTOWN











ANZBMS FUTURE MEETINGS

2018 RACP Webinar

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20 November 2018 –	Professor Emma Duncan - Topic POI, Pre-menopausal osteoporosis, excessive exercise and eating disorders
13 November 2018 –	Dr Donald McLeod - Topic - Update in Differentiated Thyroid Cancer: Concepts in risk stratifications and future directions
17 October 2018 –	Professor John Eisman - Topic - Stopping osteoporosis mediations- when, why and how.
22 August 2018 –	Associate Professor Carolyn Allan - Topic- Androgens and Androgen Deficiency
18 July 2018 –	Professor Peter Ebeling - Topic - Post-transplant Bone Disease
27 June 2018 –	Dr Ada Cheung - Topic - Transgender Medicine

Please find the link below to the recording that has now been published on the College website. Only fellows of the college can access the webinar.

https://www.racp.edu.au/fellows/resources/specialty-society-webinar-series/specialty-society-webinars/ australian-diabetes-society-australian-and-new-zealand-bone-and-mineral-society-and-endocrine-societyof-australia-webinars

FUTURE ASM

THE 29TH ANNUAL SCIENTIFIC MEETING OF THE ANZBMS



ANZBMS

29th Australian and New Zealand Bone and Mineral Society Annual Scientific Meeting **27th – 30th October, 2019** Darwin Convention Centre www.anzbmsconference.org

The 29th Annual Scientific Meeting of the ANZBMS will be held in Darwin from the 27th to the 30th of October 2019.

Chaired by Rachel Davey and Rory Clifton Bligh, together with members David Findlay, Brya Matthews, Anne Horne, Christian Girgis and Joshua Lewis, the POC have put together a varied program of cutting-edge science that will appeal to both clinician and basic scientists in the musculoskeletal field. Our scientific program includes invited international and national speakers, basic and clinical abstract presentations and young investigator awards including a mini-oral session.

The Early Career Investigator Committee will be hosting a Clinical Case Study dinner and an evening Bones and Brews networking event. There will be ample time in the scientific program for networking and discussion. The Darwin sunset experience prior to the conference dinner is not to be missed!

The local organising committee looks forward to seeing you in the tropical city of Darwin, Northern Territory, for a vibrant and informative meeting set in a stunning harbour location with warm weather all year round.

ANZBMS COUNCIL

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