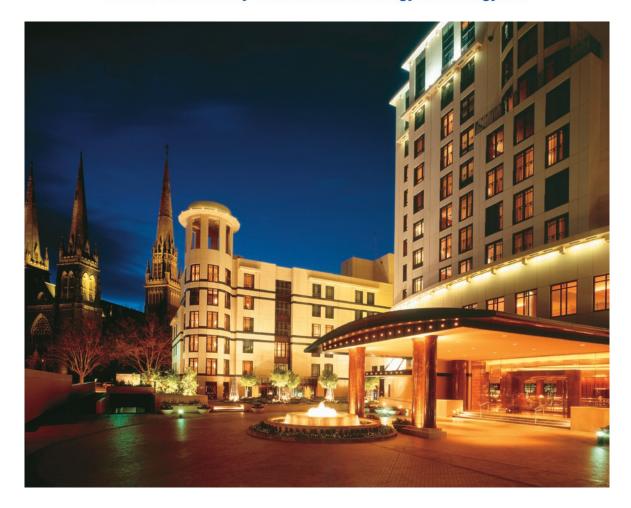


australasian society of clinical immunology and allergy inc.



annual report 2008

The mission of ASCIA is to advance the science and practice of clinical immunology and allergy, by promoting education and the highest standard of ethical medical practice.

ASCIA is the peak professional body of Clinical Immunologists and Allergists in Australia and New Zealand, and is a member organisation of the World Allergy Organisation (WAO).

www.allergy.org.au

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ASCIA 2008 ASM

CONGRATULATIONS to Dr Joanne Smart and her program advisors (Dr Karl Bleasel, A/Prof Jo Douglass, Prof Len Harrison, A/Prof Jennifer Rolland, Dr Robert Stirling, A/Prof Mimi Tang and Ms Debra Poole) for organising the highly successful 19th ASCIA Annual Scientific Meeting. Thank you also to ICMS Australasia (co-secretariat) and all the ASCIA 2008 sponsors and exhibitors.

With an impressive program including 8 international speakers and a superb location (see cover photo) it is not surprising that the meeting attracted a record number of delegates: 301 for the ASM; 75 for the Nurses Update; and more than 60 exhibitor delegates.

The social functions also had record attendances and it was great to see so many members enjoying the amazing views from the Eureka Tower (Welcome function) and up on the dance floor at the Melbourne Museum (Gala dinner).

We have received so much positive feedback from delegates regarding the meeting and look forward to welcoming you all to Adelaide in September 2009. ■



PRESIDENT'S REPORT

A/Prof Raymond Mullins

It is with pleasure that I am in the position to thank our outgoing President, Dom Mallon, the ASCIA Executive and Council. Dom has overseen what has been a very busy and productive two years, including the reintroduction of training meetings, educational material launches and engagement with the political process to advocate for our patients.

In a Society that has grown substantially in the last few years, Dom has overseen an important reform of governance of our Society, in the way our committees function, and as reflected in reforms to our Constitution. This democratisation is essential to ensure that all ASCIA members have a voice in the functioning of the various committees and working parties, a reform that will bear fruit as ASCIA continues to expand.

Perhaps the most important lesson I have learnt from Dom Mallon is wisdom; his ability to sit back, listen to opinion and reach consensus. Fortunately this wisdom will not be lost; the addition of a position of Immediate past President to Council will assist the corporate memory of Council and facilitate representation of ASCIA to external bodies.

It is therefore with great pleasure I take the opportunity to offer a personal vote of thanks for what has been many late nights, early mornings, interrupted weekends and Rugby tours and many hours on the "Red Eye" between the eastern and western states of Australia.

It is with some nervousness that I approach the next two years, humbled to be asked to serve in this position and hoping I can build on the hard work of my predecessors. Yet I am reassured when I realise that we have an active Society where at least a quarter of members are involved in committees and working parties, where a substantial proportion of our members are actively involved in world-class research and when I see the interest of our trainees, as evidenced by the enthusiasm shown in our training meetings.

I am often reminded that we are a small Society, but we are also one whose constituency comprises 1 in 5 Australians with immune and allergic disease, who do not have equitable access to proven therapies. There is an increasing divide between service demand and service availability, and the ability of some of our non-specialist colleagues to deal with more complex cases.

From time to time, our focus will be distracted by important short-term issues, such as those that have arisen in recent months, including supply shortages in the reagents we need for patient care.

However, our long-term challenges remain the same:

 Increase the number and security of training positions to meet the escalation of allergic and immune disease in our community.

- Education of our non-specialist colleagues and related health professionals.
- A focus on patient education as well, lest the vacuum be filled with nonevidence based testing and therapies.
- Remove the barriers to equitable access to proven testing and therapies, involving advocacy to reform Pathology Schedule tables, Medicare Item numbers and PBS availability for some treatments.
- Promote Australian and New Zealand based research on the costeffectiveness of therapies (such as immunotherapy) to facilitate affordable and early access.
- Ongoing engagement with the political process to advocate for our patients.

And all this will occur at a time of likely belt-tightening by our pharmaceutical sponsors and government.

To achieve these goals I encourage all members of our Society (including trainees) to become involved in the functioning of our committees and working parties. The strength of our specialty is in the breadth of our education and in the diversity of our interests. I look forward to working with all of our members over the next two years.





OUTGOING PRESIDENT'S REPORT

A/Prof Dominic Mallon

It gives me great pleasure to report the progress the Society has made over the past two years. The principal themes that have guided the activities of the Executive and Council over this time have been to ensure the sustainability of ASCIA and of our subspecialty. An efficient and well-organised ASCIA is vital to increasing our effectiveness and relevance as providers of expert advice and educational resources, and as advocates for ourselves and our patients.

Highlights of the past two years have included:

- Publication of the Access Economics Report 'The Personal and Economic Impact of Allergic Diseases in Australia: not to be sneezed at'
- Development and implementation of a process to ensure fair and transparent representation and leadership of ASCIA committees and working parties.

- Development and implementation of a process to ensure fair and transparent representation of ASCIA on external bodies and organisations.
- 4. Substantial updating of the Constitution to reflect the current operations of ASCIA.
- 5. Recommencement **ASCIA** of advanced training meetings. These, together with the Asia Pacific Primary Immunodeficiency (APPID) Summer School and the Westmead **Immunopathology** workshop provide our advanced trainees with the opportunity to receive additional education in all aspects of Clinical Immunology and Allergy from local and international experts. An added benefit has been a doubling in the number of trainee members of ASCIA.



Advanced Training Meeting – Blue Mountains

- 6. Successful negotiation of access to alternative products for skin testing at a time of recent shortage.
- 7. Expansion of the non-medical associate membership of our Society to allow the development of active sub-committees of craft groups integral to our clinical practice, including dietitians, nurses and diagnostic immunology laboratory scientists.

Thanks must go to Executive Officer Jill Smith and her very able assistant Michelle Haskard, the ASCIA Executive, and in particular Ray Mullins whose intellect and productivity has been responsible for delivering the Access Economics Report, our most important advocacy tool. I must also thank all the Members of Council who have provided me with sensible and relevant advice as we have developed and implemented our Agenda. I would also like to thank all the members of ASCIA who have participated as Chairs and members of committees. committees and working parties over the past two years, and all members who have represented ASCIA on the many external bodies that seek or require our representation and participation.

THE FUTURE

Although I am proud of what ASCIA has achieved in the past two years, these have been small steps towards meeting the substantial challenges that face us in the coming years including:

- Joining with our Specialist Colleges to lobby Government to provide a sufficient workforce to meet the rising burden of disease in our sub-specialty.
- Creation of partnerships with other Specialist Colleges and the Royal Australasian College of General Practitioners as well as Universities to up-skill our clinical colleagues in managing this increased burden of disease.
- 3. Maintenance of a strong public position against unproven tests and therapies (I would like to again acknowledge the efforts of Ray Mullins in this area).
- Advocacy for our patients. In a resource rich country our patients have the right to timely and accurate diagnosis of their immunologic and

allergic disorders and access to a reliable supply of diagnostic materials supplied treatments competitive market, including access to cutting edge treatments in the form of clinical trials that offer the hope of more efficient and effective therapy. The current regulatory environment does not encourage investment by multi-national companies in our market and we need to assist industry in their negotiations with our regulatory authorities in order to deliver the best treatment for our patients.

- The Global Financial Crisis.
 Cautious stewardship of the nest egg provided to us by the ICACI 2000 meeting in Sydney will be required to maintain the wealth of the Society, that sustains many of our activities.
- 6. The enemy within. In a sub-specialty as diverse as ours there is always the danger that conflicts will arise that have the potential to divide our Society. In reality there is much more that unites us than divides us as each of us meets the challenges of caring for our patients. It is therefore important for us to acknowledge we are all here for the same purpose, to support each other in our efforts and treat each other with respect.

I am grateful to the Society for the opportunity to serve as President of ASCIA. I hope that I have helped ASCIA become better prepared to meet these challenges than we were two years ago.

I wish Ray, the Executive and Council all the best for the next two years. ■



TREASURER'S REPORT

A/Prof Jo Douglass

Whilst the financial position of the society was very strong in the 2006 to 2007 financial year, ASCIA investments have been significantly affected by the economic downturn in 2008, with a substantial loss and reduction in equity, both being mostly due to investment income and capital losses. However, it is important to note that ASCIA does not have any debt, which is important in these uncertain economic times.

OPERATING STATEMENT (\$AU)			
	07-08	06-07	05-06
Revenues	1,138,145	1,059,725	915,457
Expenses	1,375,453	926,509	978,355
Profit (Los	s) (237,308)	133,216	(62,898)

The loss in the 2007 to 2008 financial year was due to several factors:

Significant loss of income from investments

- Prior commitment to substantial expenses including grants and the economic report, based on the previous year's profit and a strong investment market
- An unexpected almost two fold increase in airfares for international speakers, particularly those from the US, thus reducing the profitability of the ASCIA 2007 Annual Scientific Meeting (ASM).

FINANCIAL POSITION (\$AU)			
	07-08	06-07	05-06
Assets	1,214,928	1,679,829	1,574,988
Liabilities	229,232	206,312	268,627
Ret'd Profit	283,879	521,187	387,971
Equity	985,996	1,473,517	1,306,361

Although the reduced equity is a far from ideal situation, to put this in perspective we should compare the equity of ASCIA over the past 8 years. There was a large increase in 2002, due to the ICAACI 2000 proceeds, followed by strong investment market returns from 2002 to 2007 and more profitable ASCIA ASMs from 2005 onwards.

YEAR	EQUITY (\$AU)
2000	218,737
2001	264,887
2002	1,072,530
2003	1,192,064
2004	1,291,556
2005	1,255,546
2006	1,306,361
2007	1,473,517
2008	985,996

The ASCIA ASMs have been run by ASCIA since 2006, with some assistance from conference organizers (ICMS Australasia) as reflected in increased cash flow.

CASH FLOW STATEMENT (\$AU)		
	Start of year	End of year
07-08	582,980	480,892
06-07	567,332	582,980
05-06	332,321	567,332
04-05	1,227,302*	248,478

^{*}Funds were held in cash prior to being invested with MPPM.

ASCIA INVESTMENTS AND GRANTS

Since 2004 the ASCIA investment with Macquarie Private Portfolio Management (MPPM) has provided a high return on investment, enabling ASCIA to spend \$497,000 on grants, awards and endowments in the last 4 years.

For a relatively small organisation this represents a very large commitment to funding. Grants funded by ASCIA have always depended on the continuity of a strong investment market and profit from the ASCIA ASMs.

With the loss in capital and income this year, a decision was made in May 2008 to temporarily cease future funding of ASCIA grants and awards, until the investment market recovers.

The only exceptions are the annual commitment of \$50,000 for the CHW Chair endowment, the ASM travel scholarships and the ASM awards for posters and clinical grand rounds.

Once there is a recovery in the investment markets ASCIA will need to reconsider its

investment strategy to maximise return and minimise risk.

FUTURE SOURCES OF INCOME

With the reduction in capital and income from investments ASCIA is now dependent on income from its Annual Scientific Meetings (ASMs) and annual membership fees.

As a result, some changes will be made to the ASMs (as detailed in the ASCIA Executive Officer's Report).

In 2008 the profit from the ASCIA Annual Scientific Meeting is estimated at approximately \$150,000 and it will be important for ASCIA to sustain a similar level of profit in future years.

There will also need to be an increase in annual membership fees, for the first time in several years.

C	OLD FEE* (\$AU)	NEW FEE* (\$AU)
Retired	\$71.50	\$99
Associate	\$88	\$121
Associate (Me	d) \$110	\$154
Full (Overseas) \$137.50	\$198
Full (Ordinary)	\$220	\$308
		*GST inclusive

The increases shown in the table above (of approximately 40%) in annual membership fees were approved at the ASCIA Annual General Meeting on 12 November 2008.

These fees will apply to the 2009 Tax Invoices for ASCIA Annual Membership fees. ■



EXECUTIVE OFFICER'S REPORT

Jill Smith

This year has presented even more professional challenges than usual. However, at the same time it has also resulted in some significant improvements in process, operations and development of resources.

It has once again been invaluable having Michelle Haskard as an administrative assistant and I thank Michelle for her support. I would also like to thank ASCIA members and particularly the Executive and Council members, who have been a pleasure to work with.

HIGHLIGHTS OF 2008

- ASCIA 2008 ASM It has been great to work with Dr Joanne Smart and her team, in conjunction with ICMS Australasia. We had a record number of delegates, keynote speakers and profit for this event. Thank you in particular to all the sponsors for their continued support.
- ASCIA 2008 Allergy advanced training meeting – Organising this event, held on 10 May at the Blue Mountains, also helped to increase the number of Advanced Trainees becoming ASCIA members, which is extremely important, given they are 'THE FUTURE'!

Educational resources - Development of several new and revised documents, working in conjunction with the hard working ASCIA committees and working parties, resulted in several new resources becoming available on the ASCIA website There are also several other in 2008. documents which are currently under review. Development of these documents not only helps patients and health professionals, they also increase the opportunities for ASCIA to liaise with government and other organizations such as patient support groups, Colleges, FSANZ and NHMRC.

ASCIA Anaphylaxis WP

Action Plans for Anaphylaxis
(3 revised versions)
Action Plan for allergic reactions
Action Plan FAQ
Travel Plan for people at risk of
anaphylaxis
Adrenaline auto-injectors in first aid kits

ASCIA Clinical Practice CommitteeSkin Prick Testing Manual (revised)

ASCIA Education Committee

Eczema Action and Care Plans Food allergy (revised) Peanut, tree nut and seed allergy Is it allergy?

ASCIA Paediatrics Committee

Infant Feeding Advice (this document has recently been submitted to FSANZ and NHMRC)

- Health Report Looking at Allergies
 ASCIA assisted with compiling the Pfizer
 Australia report for consumers, based on
 a survey which we also helped to develop.
- Substantial increase in ASCIA members – ASCIA now has 348 members, compared to 280 last year.
- Access to skin prick test (SPT) allergens – ASCIA provided templates for

Full ASCIA members (FRACP or FRCPA) to gain TGA Authorised Prescriber access to SPT allergens after product withdrawals. This was a huge team effort, with significant contributions by Dr William Smith, A/Prof Dominic Mallon and A/Prof Ray Mullins.

- Development and implementation of several new policy and procedure documents – These include a new public inquiries policy, terms of reference and nomination forms for ASCIA committees and working parties.
- Substantially increased visitors to the new ASCIA website - Since its launch in November 2007, the new ASCIA website has attracted an average of around 2,300 visitors per day.

PROPOSED ASCIA ASM CHANGES - 2009 ONWARDS

- Date Revert to early to mid September for future years, where possible.
- Venue Convention Centres are now necessary, rather than hotels, due to the large numbers of delegates and exhibitors at ASCIA ASMs.
- numbers it will now be necessary to hold themed Welcome and Closing functions at the ASM venue, to keep the events within budget and remove the logistical problems of transporting large numbers of delegates offsite. We will still be able to host the Gala Dinner offsite, due to the lower number of delegates that attend this event.
- Program We will schedule less (if any) breakfast sessions and finish earlier, to allow for AGMs and ASCIA committee and working party meetings to be scheduled at these times, so that they don't clash with the program.

 Satellite meetings – The Nurses Update on the day prior to the ASM will be renamed the ASCIA Allergy Update for Nurses, Dietitians and other health professionals. The Immunopathology Update will become an annual event, held on the day immediately after the ASM. Due to the large number of competing meetings for General Practitioners we will not be holding a specific event for GPs.

ASCIA ASM SCHEDULE – 2009 ONWARDS

- 2009 Adelaide Convention Centre 16-18 September.
- 2010 Gold Coast Convention Centre
 2-4 September
- 2011 Sydney, NSW
- 2012 Auckland, New Zealand
- 2013 Perth, Western Australia
- 2014 Melbourne, Victoria

ASCIA SPONSORS & EXHIBITORS

ASCIA is extremely grateful to our 2008 sponsors, who are listed below (and on the ASCIA website.

We look forward to your continued support in 2009 and beyond. ■

ASCIA 2008 SPONSORS

DIAMOND sponsors

CSL Bioplasma Octapharma

PLATINUM sponsors

Abacus ALS
Abbott Nutrition
AstraZeneca
Nutricia
Schering Plough

GOLD sponsors

CSL Biotherapies GlaxoSmithKline Ilhan Foundation Nestle Nutrition Stallergenes

CONSTITUTION AMENDMENTS

The following amendments to the ASCIA Constitution were approved at the ASCIA Annual General Meeting on 12 November 2008.

These amendments include wording in bold italics, which was modified since the September 2008 amendments, based on legal advice obtained by ASCIA.

PAGES 2, 7 Rule 5(10)c, Rule 12(1)

Delete the need to hold the ASCIA ASM with the ASI ASM on a regular basis (which has not occurred for many years).

PAGES 3, 6 Rule 5(14); Rule 9(3)

Delete state branches having their own constitution and collecting funds (this has not been possible since the introduction of GST in Australia in 2000).

PAGE 4 Rule 7

Replace Rule 7(1)c with the following text;

(c) not be engaged (either personally or on behalf of another person or organisation) in commercial activity involving the sale or marketing of allergy and/or clinical immunology related products (except as an incidental or minor subsidiary activity to clinical practice, teaching or research activities).

Delete the membership category of corporate/sustaining membership as it is incompatible with a professional organization (this has not been in practice for many years) - Rule 7(2)b.

Minor changes (see underlined text) to Full (ordinary) non medical membership requirements (which were already in place).

- Rule 7(2)a(ii) to read;
- (ii) non-medical graduates with a postgraduate <u>doctoral</u> research degree, <u>and at</u> <u>least ten years post graduate experience</u> <u>in clinical immunology and/or allergy.</u>

PAGE 5 Rule 7(2)c

Include the three different Associate member categories (which were already in place).

PAGES 6, 8, 13, 14, 15 Rules 11(c), 14(1), 32(9), 33, 38

Replace 'certified or prepaid mail' with 'email or mail' to reflect current practice.

PAGE 9 Rule 24

Amend the period of notification to change the constitution, from 2 months to 1 month prior to the AGM.

PAGES 10, 11 Rule 27

Restrict Council voting rights to elected members (Executive and Area Representatives).

List current Council positions and delete old positions.

Addition of an advanced trainee representative and immediate past President on Council, as non-voting members.

Include JSAC Coordinator of advanced training as ex officio member.

PAGE 11 Rule 28

Specify that voting for Area Representatives should be amongst members who reside in that area.

PAGE 12 Rule 28

Include the ASCIA Executive Officer in Annual Scientific Meeting organization process.

PAGE 13 Rule 30

Replace Rule 30(2) with:

2) With the consent of Council, the Honorary Secretary may by instrument in writing appoint the Executive Officer of the Society (or such other person approved by the Council) to perform any or all of the functions of the Secretary under these Rules. The Honorary Secretary may, and must at the direction of Council, revoke such an appointment at any time.

Rule 31

Include the ASCIA Executive Officer in maintaining financial accounts.

Rule 32

Delete the requirement of holding a Council meeting at the ASM – Rule 32(1).

PAGE 14 Rule 32

Add the ASCIA subcommittees and working parties to be covered by terms of reference.

Add the new Council process of calling for nominations for ASCIA representation on external organisations.

PAGE 15 Rule 35

Include the requirement for two bank cosignatories from the ASCIA Executive (which has been in practice for many years).

PAGE 16 Rule 45

As ASCIA is incorporated in Victoria there is requirement of the ASCIA Public Officer to reside in Victoria so this cannot be changed as previously proposed.

A revised copy of the ASCIA Constitution including these changes is now available on the ASCIA members (password restricted) section of the ASCIA website.

COUNCIL

This following list is correct as of December 2008.

The positions shown in bold were confirmed at the ASCIA Annual General Meeting Council elections on Wednesday 12th November 2008.

EXECUTIVE

President A/Prof Ray Mullins
President Elect A/Prof Jo Douglass
Secretary (Hon) Dr Tiffany Hughes
Treasurer (Hon) Dr Melanie Wong

AREA REPRESENTATIVES

New South Wales
New Zealand
Queensland
South Australia
Victoria
Dr Louise Evans
Dr Jan Sinclair
Dr David Gillis
Dr Patrick Quinn
Dr Gary Unglik
Western Australia
Dr Richard Nolan

ASSOCIATE REPRESENTATIVE

Ms Deryn Thompson

OTHER REPRESENTATIVES

Clinical Practice Committee Chair Dr William Smith

Education Committee Chair Dr Carolyn Hawkins

Laboratory Practice Committee Chair Dr Peter Hollingsworth

Paediatric Committee Chair A/Prof Mimi Tang

Primary Immunodeficiency Committee Chair Dr David Gillis Anaphylaxis Working Party Chair Dr Rob Loblay

GP Liaison Representative Dr Victoria Smith

Joint Specialist Advisory Committee (JSAC) for Clinical Immunology & Allergy Training Dr Tiffany Hughes (also on Executive)

Immediate Past President A/Prof Dominic Mallon

Advanced Trainee Representative To Be Confirmed

THANK YOU to the outgoing Council members who have served as area representatives for the last 2 to 6 years:

Dr John Bandouvakis (Western Australia)

Dr Marianne Empson (New Zealand)

Dr Jane Peake (Queensland)

Dr Jo Smart (Victoria).

ASCIA COMMITTEES & WORKING PARTIES

Nomination forms for ASCIA Committee and Working Party membership were sent out (by email and mail) to all ASCIA members in November 2008.

A call for nominations for Chairs and Deputy Chairs was sent out to ASCIA members in December 2008 and these positions shall be confirmed by the end of January 2009.

ASCIA 2009 ASM

20th ASCIA Annual Scientific Meeting Wednesday 16 to Friday 18 Sept 2009 Adelaide Convention Centre, SA www.ascia2008.com

Celebrating 20 years of Clinical Immunology and Allergy in Australia and New Zealand



On behalf of the Australasian Society of Clinical Immunology and Allergy (ASCIA) it is a pleasure to invite you to participate in the 20th ASCIA Annual Scientific Meeting (ASM).

The Adelaide Convention Centre is the venue for ASCIA 2009 and this was selected for its size and unique location on the banks of the Torrens, adjacent to several hotels and the city centre.

In 2009 the ASCIA ASM will run for three days, from **Wednesday 16 to Friday 18 September**, in conjunction with the following events:

- ASCIA 2009 Allergy Update for nurses, dietitians and other health professionals Tues 15 Sept
- ASCIA 2009 Immunopathology Update Sat 18 Sept

The program and themes of the ASCIA 2009 ASM have been developed around the expertise of keynote speakers:

Insect Allergy

Professor David Golden (US)

Allergy Prevention / Paediatric Allergy Professor Adnan Custovic (UK)

Rhinosinusitis

Professor PJ Wormald (AU) A/Professor Simon Carney (AU)

Immunotherapy

Professor Gianni Passalacqua (ITALY) Supported by ALK

Primary Immunodeficiency

Professor Lennart Hammarstrom (SW) Supported by CSL Bioplasma

Mast Cells / Anaphylaxis

Professor Lawrence Schwartz (USA)

ASCIA 2009 will include three social functions:

- Wed 16 Sept 18.00-20.00
 ASCIA 2009 Welcome Function
 'A TASTE OF SA', Adelaide
 Convention Centre (sponsored by Abacus ALS)
- Thurs 17 Sept 19.00-23.00
 ASCIA 2009 Gala Dinner
 Adelaide Town Hall (a magnificent and historical venue which is a short walk or tram ride from the Adelaide Convention Centre)
- Fri 18 Sept 17.00 to 18.00
 ASCIA 2009 ASM Closing
 Function & ASCIA 2009
 Immunopathology Welcome
 Function 'A TASTE OF SA #2'
 Adelaide Convention Centre.

We look forward to welcoming you to Adelaide in September 2009 to celebrate 20 years of Clinical Immunology and Allergy in Australia and New Zealand.

Dr Patrick Quinn Chair, ASCIA 2009

NEW MEMBERS

ASCIA welcomes the following 87 new ASCIA members, approved in 2008.

ASCIA now has 359 members in total.

FULL MEMBERS

Dr Suran Fernando BSc(Med) MBBS PhD FRACP FRCPA Dept of Clinical Immunology Royal North Shore Hospital, NSW

Dr Ralf Heine MBBS FRACP Senior Staff Specialist, Dept of Allergy Royal Children's Hospital Senior Lecturer, University of Melbourne Senior Research Fellow, MCRI, VIC

Dr Andreas Lopata MSc PhD Senior Lecturer RMIT University, VIC

A/Prof Angel Lopez MBBS PhD MRCPath FRCPA Head, Cytokine Receptor Lab, IMVS Clinical Professor, Faculty of Medicine University of Adelaide, SA

Prof Els Meeusen PhD Prof and Head, Animal Biotechnology Research Laboratory, Dept of Physiol, Monash University, VIC

Dr Thorsten Stanley MBChB DCH DObstRCOG MRCPUK Senior Lecturer in Paed, Univ Otago, NZ

Dr Andrew Williams BSc(Hons) PhD Principal Hospital Scientist and Laboratory Manager, Dept Allergy and Immunology Children's Hospital at Westmead, NSW

ASSOCIATE MEDICAL MEMBERS

Dr Wendy Allen BSc(Med) MBBS(Hons) DCH FRACP, Fellow in Allergy Children's Hospital at Westmead, NSW

Dr Domenic Cincotta MBBS FRACP General Paediatrician Royal Children's Hospital, VIC

Dr Nicholas Cooling BSc(Hons) DipND BMBS DRACOG FRACGP General Practitioner, Newtown, TAS

Dr Alison Cunningham MBBS General Practitioner, Sippy Downs, QLD

Dr David Cutting MBBS FRACP Paediatrician, Dept Allergy Royal Children's Hospital, VIC

Dr Anna Day BMBCh Medical Registrar Sir Charles Gairdner Hospital, WA

Dr Alan Evans MBBCh ENT Surgeon, NSW

Dr Henning Johannsen MD Medical Registrar, Northern Regional Paediatric Unit, Port Augusta SA

Dr Stefanie Marcella MBBS Immunology Resident Royal Melbourne Hospital, VIC

Dr Roger Morris MBBS FRACGP GP, Maroochydore, QLD

Dr Genevieve Ostring MBChB DCH Allergy & Immunology Fellow Children's Hospital at Westmead, NSW

Dr Kim Robertson MBBS Clinical Fellow in Immunology and Allergy Royal Children's Hospital, Brisbane, QLD

Dr Narinder Singh MBBS FRACS Consultant ENT Surgeon Westmead Hospital, NSW

Dr Christopher Smith MBBS FRACP Paediatrician, VIC

Dr David Tye MBBS General Practitioner, SA

Dr Justin Wilde MBChB Consultant General Paediatrician Tauranga Hospital, NZ

Dr Gregory Williams BSc MBChB DCH Chief Resident, Starship Children's Hospital, Auckland, NZ

Dr Harry Zehnwirth MBBS(Hons) Consultant Paediatrician VMO Ballarat Health Services & Private Practice Paediatrician, VIC

ASSOCIATE TRAINEE MEMBERS

Dr Ghsoon Abdulrasool MD BSc Immunopathology Registrar Westmead Hospital, ACT

Dr Mahmood Al Kindi MD BHSc Advanced Trainee Immunology Dept IMVS, SA

Dr Jalila Al Shekaili MD BSc Immunology Registrar The Canberra Hospital, ACT

Dr Sara Barnes MBBS Registrar, The Canberra Hospital, ACT

Dr Julian Bosco MBBS BSc Med(Hons) FRACP, Immunology Registrar Royal Melbourne Hospital, VIC

Dr Maia Brewerton MBChB Immunopathology Registrar Wellington Hospital, NZ

Dr Paul Gray BA(Hons) MedSc MBChB MRCHB MRCPCH(UK) Registrar in Paediatric Immunology and Infectious Diseases, Sydney Children's Hospital, NSW **Dr Meilyn Hew** MBBS Immunology Registrar Fremantle Hospital, WA

Dr Winnie Ip BHB MBChB DipPaed Immunology/Respiratory Registrar, Starship Hospital, Auckland, NZ

Dr Alisa Kane MBBS(Hons)
BSc(Med)(Hons 1)
Immunology Registrar
South Western Sydney Area Health, NSW

Dr Mahila Namasivayam MBBS DCH Paediatric Immunology & Allergy Advanced Trainee & conjoint lecturer, University of NSW

Dr Michael O'Sullivan MBBS(Hons) Immunology Registrar Sir Charles Gairdner Hospital, WA

Dr Paul Russo MBBS Advanced Trainee The Canberra Hospital, ACT

Dr John Tan BSc MBBS DCH Clinical Fellow & Advanced Trainee, Children's Hospital at Westmead, NSW

Dr Dean Tey MBBS
Paediatric Immunology Fellow/ Allergy
Royal Children's Hospital, VIC

Dr Rebecca Werther MBBS Advanced Trainee Royal Children's Hospital, VIC

Dr Virginia Wootton MBChB Immunology Fellow Starship Children's Hospital, NZ

Dr James Yun MBBS Advanced Trainee Campbelltown Hospital, NSW

ASSOCIATE MEMBERS

Ms Charlotte Allen RN

Asthma Nurse, Princess Margaret Hospital, WA

Mr John Bahnisch BAppSc Directorate Manager of Immunology IMVS, SA

Ms Jan Belcher DipHlthSc Paediatric Liaison Nurse John Hunter Hospital, NSW

Ms Linley Bielby BN DipAppSc

Transfusion Nurse Australian Red Cross Blood Service, VIC

Mr Paul Bolger BAppSc Immunology Scientist, Primary Health (Western Diagnostic Pathology) WA

Ms Sacha Callaghan BN

Nurse, Royal Children's Hospital, QLD

Ms Marilyn Clark BAppSc

Scientist in Charge, Immunology Laboratory Royal Children's Hospital, VIC

Ms Christine Collins RN

Associate Nurse Unit Manager Dept of Clinical Immunology & Allergy Royal Melbourne Hospital, VIC

Ms Patricia Cuthbert RN

Princess Margaret Hospital, WA

Ms Diana Dilisio RN

Royal Melbourne Hospital, VIC

Ms Elizabeth Fisher BSc

Medical Scientist, PathWest Immunology Princess Margaret Hospital, WA

Ms Deanne Harris BSc MNutDiet

Dietitian in charge, Tamworth Hospital Conjoint Lecturer, University of Newcastle, NSW Ms Felicity Healy RN

Research Nurse Royal Melbourne Hospital, VIC

Mr Sandip Kamath MSc BPharm Research Student RMIT University, VIC

Ms Jacqueline Kaye BSc MNutDiet Paediatric Dietitian, Gold Coast Health Service District, QLD

Ms Monica Kemp MSc BSc (Hons) Medical Scientist, Dept of Immunology Princess Margaret Hospital, WA

Ms Jennifer Koplin BSc (Hons)
PhD Student, University of Melbourne
Dept of Paediatrics & MCRI, VIC

Ms Jacinta Lenehan BN GCertNurs(All) Nurse, Royal Children's Hospital, VIC

Ms Evania Marlow BSc GradDipDiet Senior Dietitian, Joondalup Health Campus, WA

Ms Pamela Martin BBiomedSc(Hons)
PhD Scholar, Murdoch Childrens
Research Institute and Dept of
Paediatrics, University of Melbourne, VIC

Ms Sandra Marulli MAppSc

Scientist, Immunology Royal Melbourne Hospital, VIC

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