



# Nursing

**HSANZ-NG**  
 Haematology Society of Australia and New Zealand  
 AML National CLL CML APML Haemophilia  
 Paediatric Sickle-Cell Victoria BMT New-Zealand  
 Blood Myeloma Education South-Australia Update Survivorship Trials Northern-Territory Supportive-Care  
 Platelets Metropolitan Lymphoma Thrombophytic Regional Queensland Neutrophil Clinical Research Western-Australia Newsletter  
 Myelodysplasia Thalassaemia MDS Tasmania Haematology  
 Leukaemia Packed-Cells

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## SYDNEY WOULD LIKE TO WELCOME YOU TO HAA 2017.

**David Collins**  
 President HSANZ NG  
[david.collins@health.nsw.gov.au](mailto:david.collins@health.nsw.gov.au)

Being held in the new conference centre at Darling Harbour. This year's conference is shaping up to be a good one with all the speakers locked in, and we look forward to welcoming our international speaker, Beth Faiman. Beth is a nurse practitioner in haematology and will be joining us from Cleveland Ohio. She will be presenting several sessions and workshops, during the conference and will be joined by several Australian speakers. Many of the local speakers are nurses working in haematology, as well as some influential doctors and allied health professionals. All will add a great depth to the program, that we hope will make the program of interest to everyone, no matter what your area of interest is.

We have seen around 30 abstracts entered for the nurse's stream of the conference, 13 of these will be presented during the free communications sessions, with the remainder being presented as posters. This year we will also have four posters presented as mini orals in the theatrettes situated in the exhibition hall, so make sure you look out for them.

If you haven't been to the conference before, we shall be running a session how to get the best out of HAA at 8 am on the Sunday morning. This session will help you to plan your conference and get the most out of your attendance.

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InspireHCP Pty Ltd.



We will also be going through how to use the conference app which, as well as allowing you to plan your day, also give you the opportunity to post questions to the speakers in each session.

The annual general meeting of the HSANZ NG will be held on Sunday lunchtime at the conference, so if you are a financial member, or you want to know more about the group make sure you come along. The myeloma and MDS Special Practice networks will also be holding meetings during the conference, so listen out for details.

If you are coming to the conference dinner, remember to bring your best beachwear, and be ready to relax with friends and dance the night away Sydney beach style.

The local organising committee is looking forward to seeing you in Sydney, so see you soon.



## IS THIS YOUR FIRST TIME AT HAA?

### Feeling overwhelmed?

Don't be. Read our survival guide to HAA 2017 in Sydney!

1. When you register for a full registration a ticket to the Welcome Function on Sunday and Gala Dinner on Tuesday are complimentary. This is a great way to meet new colleagues.
2. Book into the Masterclass on the Monday evening. Pick the brains of the International Speaker.
3. Check out the programme before you arrive - <http://www.haa2017.com/program/program-schedule/> - I always highlight all the sessions I want to go to. HAA is a big conference so you might be running from room to room to see everything you want to. This year I am keen to learn more about geri-oncology.
4. Make sure you visit all the trade stands when having morning and afternoon tea.
5. Talk to people. Everyone is friendly. Then next year in Brisbane you will be meeting up with old friends.
6. If you are coming alone contact Nicole and Elise who will show you around  
[nicole.gavin@health.qld.gov.au](mailto:nicole.gavin@health.qld.gov.au) [elise.odell@health.qld.gov.au](mailto:elise.odell@health.qld.gov.au)





## A WORD FROM THE PRESIDENT



I sit and write this as I look out at my garden with spring just around the corner and HAA2017 fast approaching. With HAA comes the end of my term as president of the nurse's group, so this will be my last address before I step down as my term of office ends and I pass on the baton to Sam Soggee in Victoria. I have been a member of HSANZ since 2004 and have seen many changes in that time. I have seen our nurse membership continue to grow over the years, with approximately 400 members now.

The first HAA I attended was in Melbourne, and the nurses had a half day specifically for nursing issues. We now have three days; it has been great to see how the group has grown over this time. I often get asked, "why should I join HSANZ NG?" or, "What's in it for me?". A group is only as good as its membership, and over the years, I have got many things out of being a member. I have many friends and colleagues from haematology across Australia and New Zealand. My knowledge continues to grow; there is always something new to learn! In NSW, we have an active group running education dinners meetings in Sydney, Wollongong, Gosford and Newcastle, and I know that in other States similar meetings happen. We only have this occur in NSW because of committed members. So, don't sit back and wait for things to happen, contact your local group and see how you can help.

Haematology is a changing field to work in, whether you be in outpatient treatments, inpatient care, malignant or non-malignant, there is always something new. In my 30 years in haematology, I have seen many changes, innovations and treatments. Patients are surviving longer, disease control is better, and the toxicity of treatments are less. However, every day as nurses we face new challenges in caring for our patients as we deal with the pressures of delivering the care within the confines of the health service. Nonetheless, we do make a difference to the lives of our patients and their carers; these are themes that we will be exploring during HAA this year.

I ask that you give Sam and her new Vice President support as she takes on the role and works with the team of local chairs to promote the nurses group, create educational opportunities and above all lead the membership.

I would also like to thank all the local chairs for their support during my presidency, and special thanks to Rosie Hoyt who produces the newsletter; to Sally Taylor, the national secretary for her support, and to Gill Sheldon Collins for her time as treasurer.

Hope to see you in Sydney for HAA 2017

Best Wishes

**David Collins**

President HSANZ NG  
david.collins@health.nsw.gov.au



# New and improved website

Delivering the same evidence-based cancer treatment information in a more user-friendly way.

- Improved navigation
- Enhanced functionality
- Video streaming
- Optimised for use on tablets and smart phones
- New-look patient and carers section

**No login required**

For more information or feedback on the new eviQ site email [eviQ@feedback.org.au](mailto:eviQ@feedback.org.au)

[eviQ.org.au](http://eviQ.org.au)



Working together to lessen the impact of cancer



## ISBT 128 LABELLING – THE COUNTDOWN IS ON

**Helen Kish**

Communications Project Officer, Transfusion Policy and Education  
Australian Red Cross Blood Service

Work on the implementation of the Information Standard for Blood and Transplant (ISBT) 128 labelling standard is underway and you can expect to see the new ISBT Transition Label on blood products by June 2018.

ISBT 128 is a global standard for the identification, labelling and information transfer of medical products of human origin.

The National Blood Authority (NBA) has directed the Australian Red Cross Blood Service to move to this standard in order to meet international benchmarking standards for product identification.

It will create a unique identifier for Australian blood products and will prevent duplicate donation identification numbers within a 100-year period worldwide.

The standard has been designed to ensure the highest levels of accuracy, safety, and efficiency for the benefit of donors, patients and health providers.

ISBT 128 will also help blood services and health providers across the world link consistent products in an international database, eliminate the need for re-labelling products used internationally, and reduce costs by allowing instrument manufacturers to build to a global standard.

Hospitals, blood centres, tissue and cellular therapy facilities and plasma fractionators in more than 75 countries have adopted the ISBT 128 standard.

The ISBT 128 Transition Label design is very different to the current product label – and the following are a few things that will change with the new label compared to the current Codabar release label.

1. Increased release label size: From 100mm x 75mm to 100mm x 125mm. This will change the placement of the label on blood packs.
2. Barcodes are in different positions on the label: This may impact how you store inventory.
3. Increased number of barcodes and different symbology: Transfusion nurses, scientists, specialists and anaesthetists should be notified and trained to ensure they're aware of and understand the ISBT 128 Transition Label and which area will be used in your facility.
4. New function for phenotypes: Introduction of a new ISBT 128 special testing barcode for phenotype and CMV information which is barcoded for scanning into configured IT systems.

You can find further technical information about the transition label in the Australian Guidelines for the Labelling of Blood Components using ISBT 128.

The Blood Service will continue to provide ISBT 128 updates throughout the coming months.

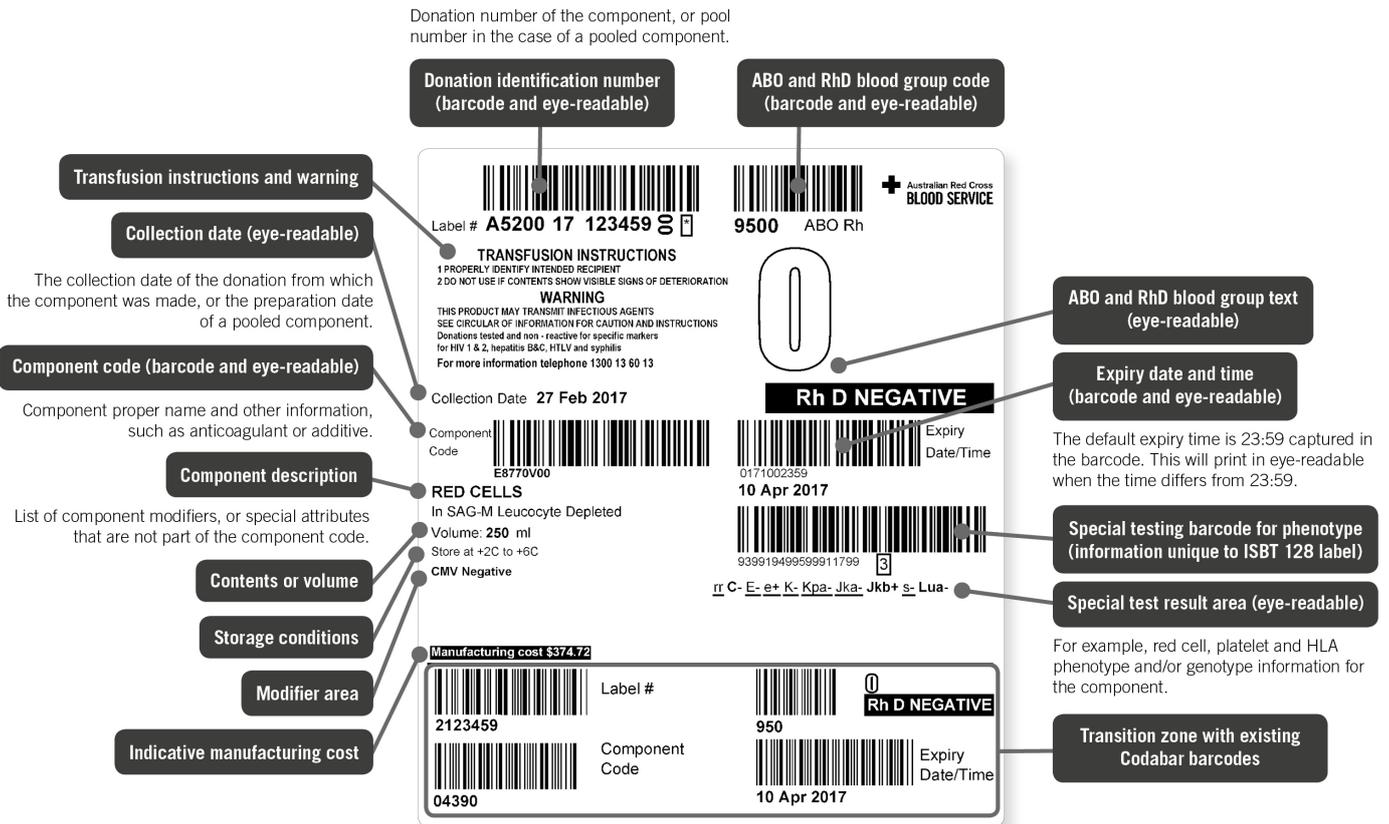
# ISBT 128 LABELLING

## COMING IN 2018





# EXAMPLE OF A BLOOD COMPONENT LABEL TRANSITION TO ISBT 128 LABELLING





## NEW TECHNOLOGY: ALCOHOL NEEDLELESS CONNECTOR DECONTAMINATION CAP

A cap containing 70% isopropyl alcohol is now available for decontamination of the needleless connector. The cap is screwed on to the needleless connector and remains insitu, effectively bathing the connector in alcohol. It is believed this method may be more effective in maintaining a clean connector and decrease the risk of infection to patients. This product is currently used in the USA. It was approved by the Therapeutic Goods Act approximately two years ago but is not used widely in Australia.

Julie Flynn is currently completing her PhD and is comparing the alcohol decontamination caps with standard practice, which is 2% chlorhexidine in 70% isopropyl alcohol wipes. The primary aim of the research is to determine the most effective method for needleless connector decontamination.

Julie's work will inform clinicians and policy makers about infection prevention strategies that may need to be modified. These changes will significantly influence the prevention of central line associated bloodstream infections, and optimise healthcare services.

Julie Flynn is a registered nurse working on the Royal Brisbane and Women's Hospital Haematology and Bone Marrow Transplant Unit, and is a PhD candidate at Menzies Health Institute Queensland, Griffith University.



If you want more information about CVADs try visiting either CNSA (<https://www.cnsa.org.au/>) or EVIQ (<https://www.eviq.org.au/>) where guidelines, patient information, and updates are available.

If you want to be more involved check out the Vascular Access Device & Infusion Therapy Specialist Practice Network (VAD&IT SPN) via CNSA (<https://www.cnsa.org.au/memberbenefitsandservices/specialist-practice-networks-spns/vascular-access-device-infusion-therapy-specialist-practice-network-spn>).



## MASCC 2017

Washington DC 22-24 June 2017

Elise Button

A/Nurse Researcher - Cancer Care Services  
Royal Brisbane & Women's Hospital



I attended the Multinational Association of Supportive Care in Cancer (MASCC) annual meeting in Washington DC from the 22-24 of June 2017. This is a joint meeting with the International Society of Oral Oncology. Almost 1000 people attended the meeting from over 50 countries. The meeting is truly multidisciplinary with delegates from medical, nursing, dental, pharmacy, physiotherapy, psychology and other disciplines.

The meeting is focused on holistic supportive care along the illness trajectory for people with cancer.

Some of the key themes from the meeting were financial toxicity, immunotherapy side effects, precision medicine, palliative care, opioid side effects and misuse, oral health, and geriatric oncology. The meeting also featured a patient seminar on smell and taste perception in people with cancer.

The quality of the international speakers was very high and the content presented was cutting-edge and relevant to a wide range of clinicians. I thoroughly enjoyed the conference and would recommend it to nurses interested in supportive care. MASCC 2018 will be held in Vienna, Austria 28-30 June 2018.



## WHAT IS NEW FOR LYMPHOMA AUSTRALIA



In 2017, Australians facing a Lymphoma diagnosis have access to more clinical trials and new treatments.

#WLAD #EverythingChanges



LYMPHOMA COALITION  
Worldwide Network of Lymphoma Patient Groups



**Sharon Millman**  
CEO, Lymphoma Australia

**Sharna Moloney**  
National Nurse Manager, Lymphoma Australia

### Lymphoma Care Nurses Update

We are very pleased to welcome Donna Gairns as a new member to our team this month! Sharna Moloney will be going on maternity leave until February 2018 and Donna will be covering her role during this time. Donna brings with her a wealth of haematology experience with an expertise in caring for young patients with lymphoma and survivorship care. Donna has also recently commenced in the AYA Nurse Consultant role at The Epworth Hospital in Richmond and we wish Donna all the very best in her new roles.

Our Lymphoma Care Nurses continue to support patients and their families along their lymphoma journey by providing expert advice, support, resources, and information days as well as provide professional development for other nurses and health care teams across Australia. The Lymphoma Care Nurse Hotline has also commenced this year and this has been very successful seeing many patients, carers and health professionals calling through from around the country for advice. The Lymphoma Care Nurse Hotline will continue to provide expert advice to help support patients and their families throughout their lymphoma journey by

assisting them to understand their diagnosis, treatment options, clinical trials and survivorship care.

We also have dedicated closed groups on Facebook that patients and their families can join by searching ‘Lymphoma Down Under’ on Facebook which has grown to over 600 members. We have flyers and business cards to promote these free support services for your patients so please get in contact with our team if you would like us to send you any of these for your work place by emailing [enquiries@lymphoma.org.au](mailto:enquiries@lymphoma.org.au)

### Lymphoma Care Nurses Specialist Interest Group (SIG) is now online on our website

The Lymphoma Australia Specialist Interest Group(SIG) for nurses has been developed for anyone working in lymphoma care to keep professionals who are like minded connected around Australia and we have launched an online closed portal you can go to on our website to register.

In addition to our commitment to support all nurses working with patients and their families with lymphoma the Specialist Interest Group has the following objectives;

- To provide peer support and an environment in which nurses can network, exchange knowledge and seek information to strive for best practice in their workplace



- To facilitate professional development within the group by organising guest speakers, seminars and workshops in your local areas for nurses
- Conduct meetings at annual conferences where the group can meet face to face
- Provide national updates on current research and advocacy for medicines for our lymphoma patients
- Alerts on new and updated information including clinical trials
- Exclusive e-newsletters for members

We have only just launched this closed portal on our website and already we have over 50 nurses registered and we would love to see more across Australia.



### Lymphoma/CLL Patient Education Day

In August Lymphoma Australia was privileged to host international speaker Professor Mathias Rummel at a patient/carer education day at the Peter Mac Callum Cancer Centre in Melbourne. **Professor Mathias Rummel** focussed on new treatments that are now available for lymphoma and local speaker **Amanda Piper** from the Australian Survivorship Centre presented on survivorship after a lymphoma diagnosis. Professor Mathias Rummel specialises in indolent lymphomas and is the principal investigator on many lymphoma clinical trials in Europe.

Lymphoma Australia has patient/carer education sessions happening on a regular basis throughout the year and health professionals are always welcome to attend.

### Lymphoma Patient Resources

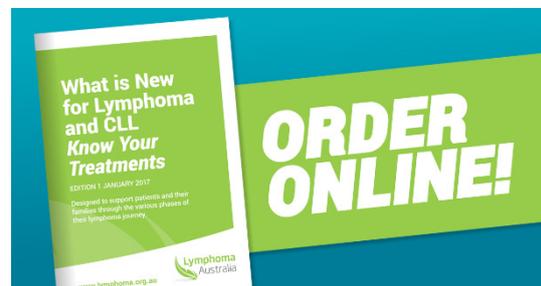
Lymphoma Australia has developed a range of new booklets and fact sheets to help support patients with lymphoma and their carers through various phases of their lymphoma journey. These booklets and fact sheets are FREE to order on our website and can be delivered anywhere around Australia.

‘Know Your Treatments – What is New for Lymphoma and CLL’ is a guide to some new medicines for lymphoma and how they work. As these medicines become more widely available and more information is available on how best to use them, they will be used more to treat lymphoma. Some of the new medicines discussed in the book are Bendamustine, Ibrutinib, Lenalidomide, Venetoclax and Idelalisib just to name a few; there is also a section about clinical trials and where to find them in Australia as well as what people can do to have their say in Australia about what medicines are listed on PBS through the PBAC process.

We will also be releasing our new booklet ‘Lymphoma – What You Need To Know’ this month as well as a list of fact sheets for different subtypes of lymphoma as well as supportive care topics.

If you would like a copies of these new resources you can order online at Lymphoma Australia [www.lymphoma.org.au](http://www.lymphoma.org.au) or email [enquires@lymphoma.org.au](mailto:enquires@lymphoma.org.au) and we will send out the information to you.

### World Lymphoma Awareness Day (WLAD)



September is Lymphoma Month and this year Lymphoma Australia will be joining countries across the world in a social media campaign - The Small Things Make the Biggest Difference. #WLAD#everythingchanges.

World Lymphoma Awareness Day (WLAD) was on Friday 15<sup>th</sup> September and you would have likely seen our green coffee cups in your hospital, clinic or local café nationally on this day. This coffee cup campaign featured a green coffee cup with the signs and symptoms of lymphoma listed as well as our #noonelikesalump television commercial to increase awareness and raise much needed funds for our Lymphoma Care Nurses. You can still order these for any event you wish to utilise them for by contacting us on [enquiries@lymphoma.org.au](mailto:enquiries@lymphoma.org.au).

Patients, carers and health professionals will be sharing the small things that made the biggest difference for them during the lymphoma journey. If you would like to know more please contact Lymphoma Australia [www.lymphoma.org.au](http://www.lymphoma.org.au).



## REPORT FROM THE MYELOMA SPECIAL PRACTICE NETWORK (M-SPN)

Tracy King

Chair M-SPN

[Tracy.king@sswahs.nsw.gov.au](mailto:Tracy.king@sswahs.nsw.gov.au)

### Myeloma in Melbourne

Following on from the success of our 1<sup>st</sup> M-SPN seminar last year at the Alfred in Melbourne, our 2<sup>nd</sup> annual M-SPN seminar was hosted this year in collaboration with Myeloma Australia's Myeloma Scientific Advisory Group (MSAG). The opportunity to partner with our medical colleagues and Myeloma Australia enabled us to participate in a multidisciplinary 'Myeloma Clinical Education Workshop' held at the fabulously impressive Victorian Comprehensive Cancer Centre (VCCC) in Melbourne. Over 130 clinicians attended the workshop and enjoyed a day of lectures and case study presentations on a broad range of MM related topic areas. Program development was led by A/Prof Simon Harrison, lead Haematologist at the VCCC and myself representing the M-SPN. Speakers covered a range of topics from updating us to the International Myeloma Working Group Response Criteria (IMWG) (Dr Grigoriadis); new imaging guidelines (Dr Hofman) and the focus on minimal residual disease (MRD) monitoring and its relation to treatment outcomes (Dr Blombery). Dr Bergin updated us to the output from the Myeloma and Related Disease Registry (MRDR) demonstrating an association with our real world clinical practice and the MSAG Clinical Practice Guidelines. Always good to see our local real-world data for clinical practice and outcomes being reported. Drs Khot and Quach had an unenviable task in presenting treatment algorithms for intensive and non-intensive pathways in MM with the treatment options / combinations, growing in number.

Attendees had the opportunity to 'Pitch (a case) to the Panel', which gave us all an opportunity to apply what we had learnt during the day, to real cases. It was lovely to be able to invite Prof M King, Cancer Australia Chair in Cancer Quality of Life (QOL) to present on health related QOL in MM and its measurement. As Madeleine noted, QOL was mentioned in every presentation during the day and with increased focus on the importance of delivering patient centered care, it was refreshing to have a presentation dedicated to QOL. An increasing amount of health policy requires clinicians to effectively measure HRQoL so as to further improve patient outcomes. Prof King was able to

share best practice in QOL assessment and the 'MyPOS', myeloma specific QOL tool that provides us all with an effective way to do so in the clinical setting. The day ended with Dr Kalf presented an excellent session, 'Mother of all Bombs (MoAbs) and other immune therapies in MM'. Dr Kalf updated us to the new monoclonal antibodies showing excellent responses in MM as well as the Alfred's experience with allografting and finally the CAR-T approaches beginning trialed in MM after the success in leukemia's.

Particular thanks must go to the supporters of the day, Abbvie, Amgen, Celgene, Janssen and Takeda. Also to Myeloma Australia and their staff who tirelessly worked to organize and deliver an excellent meeting.

Our group was lucky to have been able to award X 2 M-SPN members travel grants to attend the meeting thanks to the generous support of Celgene. Congratulations to Jacqui Jagger (Gosford, NSW) and Petra Stolz Baskett (Nelson, NZ), the grant winners.

#### Further reading and resources relating to the day include:

Myeloma and Related Disease Registry (MRDR)

<https://mrd.org.au>

International Myeloma Working Group (IMWG) Publications & Guidelines

[www.imwg.myeloma.org](http://www.imwg.myeloma.org)

Myeloma Scientific Advisory Group Guidelines

<http://myeloma.org.au/for-health-professionals/>

MyPOS – Myeloma specific HRQoL Tool

[www.pos-pal.org](http://www.pos-pal.org)

King, T., King, M., White, K. Patient Reported Outcomes in Optimizing Myeloma Patients' Health-Related Quality of Life Article reference: Seminars in Oncology Nursing 33 (2017) pp. 299-315 DOI information: 10.1016/j.soncn.2017.05.006

The following article link is valid for 50 days, until October 23, 2017

<https://authors.elsevier.com/a/1Vfk92gMQRiSo~>



## Myeloma in Auckland

I've been a fan of the work of the Leukaemia and Blood Cancer NZ (LBC) since first working with them at patient seminars over a decade ago. This passionate, hard working group of professionals host a national haematology patient forum every year or 2 and I was lucky enough to be invited back to speak. I was asked to talk about myeloma (not surprisingly!) but also spoke to the whole forum on 'Living well with a blood cancer, learning to manage and building resilience'. Julija Sipavicius, another M-SPN member, also presented at the forum, 'Long term effects of BMT'. Congratulations to LBC NZ for another excellent patient forum, your efforts and work to help those living with a blood cancer, including MM, in your region, is to be applauded.

Thanks also go to Janssen who heard I would be in Auckland and hosted an excellent dinner meeting for nurses and allied health, the night before the forum. I was invited to present on supportive care in MM with a focus on toxicities of therapies, and Dr Hilary Blacklock provided the medical focus perspective of MM in NZ showing the local data from the registry (MRDR).

## Myeloma in Dallas

Networking with our international myeloma nursing colleagues has been a focus for our group from the start. As an affiliate member of the IMF Nurse Leadership Board (NLB) I was excited to present our myeNURSE App to the board at a recent meeting in Dallas. We were able to test the 'myeNURSE IMF NLB' and play around with some in-meeting polling and social Q & A. The group hope to utilize 'myeNURSE NLB' to access a range of resources and publications and are looking at ways to use myeNURSE to deliver content at its Oncology Nursing Society (ONS) Satellite Symposium in 2018. Thanks to Mike and Sally from MyINTERACT Technology for continuing to partner with our group to bring myeNURSE to a wider group of nurses.

The NLB members have been working hard on a series of publications, building on previous best practice in nursing care of myeloma papers. Special thanks to Beth Faiman and the team for driving this initiative forward, its not been easy coordinating so many papers and authors and we thank her for your strong leadership. Watch out for the Clinical Journal of Oncology Nursing (CJON) Multiple Myeloma Edition due October 2017.

NLB members were also involved in the recent Seminars in Oncology Nursing Multiple Myeloma edition, editors Beth Faiman and Tiffany Richards, once again, such strong leaders in myeloma nursing globally.

You can access the HRQoL paper I authored in this edition as per the link at the start of this report. To see the full content of the Multiple Myeloma Special Issue (SON) and access other papers via your usual access routes.



*IMF NLB Members Dallas 2017.*

## Myeloma in Sydney – HAA 2017

Dr Beth Faiman is our guest at HAA this year and you'll get the opportunity to hear her present during conference and engage with her at our lunchtime M-SPN meeting. Please see program nearer the time to find out day and location of the meeting.

With over 50 members now, our M-SPN always welcomes new members. If you have an interest in myeloma and would like to get access to the myeNURSE App and share experiences with like-minded colleagues, please do get in touch.

**M-SPN lunchtime meeting during HAA is on Monday in room C4.9.**



**myeSupport Patient Support Program is open to all patients in Australia currently prescribed KYPROLIS® (carfilzomib).**

MyeSupport is exclusively available online ([www.myeSupport.com.au](http://www.myeSupport.com.au)). Once registered, patients can access a range of articles on topics, including fitness, nutrition, relaxation, and wellbeing, all designed specifically with multiple myeloma (MM) patients in mind. The website includes a series of brainteasers and puzzles, along with the articles, these can be downloaded and printed so that patients can read and complete these during hospital or infusion appointments. All this content is designed to address a specific gap in patients and their carers information needs, support for holistic aspects of their self-care management. Over the coming months, we will showcase articles from expert contributors, including international clinicians specialising in MM patient management, dietitians with oncology nutrition expertise, exercise physiologists who design MM patient specific plans, chefs experienced in developing recipes suitable for oncology patients, and holistic health advisors. Along with written articles, there are a series of videos to accompany these articles.



The MyeSupport program is designed to support the information needs of patients and their carers throughout their treatment journey. The MyeSupport program was developed with MM patients' needs in mind, and with the support and involvement of patient advocacy organisations, such as Myeloma Australia and the Leukaemia Foundation. The myeSupport webportal also offers patients links to the websites of these organisations to enable them to access additional help and support services.

**What will patients receive when they join?**

<p>Welcome pack containing information about KYPROLIS® and myeSupport</p> 	<p>Information about how to access the website <a href="http://www.myeSupport.com.au">www.myeSupport.com.au</a></p> 	<p>Email updates with links to new articles and content</p> 	<p>myeSupport patient pack (includes patient goal diary, water bottle and resistance band)</p> 
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**Nurses and clinicians can join the program**

As a healthcare professional involved in the management of patients with MM on KYPROLIS® treatment, you can also access the MyeSupport program website and receive regular email updates on new content available, that may be relevant to your patients. If you are interested in learning more about the program and how it might help your patients contact the program administrator at [myeSupport@inspirehcp.com.au](mailto:myeSupport@inspirehcp.com.au) to register your interest or contact your local Amgen representative for more information.



# NEWS FROM THE MYELOMA AND RELATED DISEASES REGISTRY

## RECRUITMENT UPDATE

We have now reached over 1700 patients registered on the MRDR thanks to the support of all participants and staff at participating hospitals. We have 25 sites approved, with ICON Cancer Care the most recent addition. Monash Medical Centre is now active, ICON Cancer Care has 4 private clinics in Brisbane which will soon be registering patients, and Royal Darwin and Sunshine Hospitals are obtaining approval to participate. We would be delighted to receive photos of the teams from participating MRDR sites to include in our updates.

**Takeda, Janssen and Celgene Australia support the MRDR which enables this important research to continue.**

The Myeloma 1000 Project, a blood biobank substudy of the registry now has over 180 patients enrolled. This project is supported by Amgen Australia, Bristol Myers-Squibb & Janssen-Cilag.

## MRDR RESEARCH

Three MRDR-related projects will be presented at HAA in Sydney this year, 29 October – 1 November.

The projects are:

- Renal impairment in myeloma – patient & disease characteristics, treatment, stem cell transplant & outcomes from the Australian and New Zealand Myeloma & Related Diseases Registry
- Polynesian Ethnicity and Outcomes for Multiple Myeloma in New Zealand: a single centre study from the Australia and New Zealand Myeloma and Related Diseases Registry
- Patient reported outcome measures in multiple myeloma: real-time reporting to improve care (methodology of the My-PROMPT study)

The diversity in these projects gives an indication of the research potential in the registry and the breadth and use of registry data. It is pleasing to see registry data maturing and questions being asked of the registry and we welcome ideas and proposals.

## MRDR AT HAA

The Transfusion Research Unit at Monash University, which administers the MRDR amongst other registries, will have a booth in the trade area at HAA this year. We look forward to seeing you there. HAA promises an interesting program this year with a high calibre of international speakers and a fun beach-themed gala dinner.

## MRDR GROWTH

The registry is growing with a recent proposal to expand to 4 countries in the Asia-Pacific region approved for funding by Janssen. A MRDR proposal to improve national immunoglobulin stewardship and outcomes for myeloma patients has also been successful in receiving funding from the National Blood Authority. With this expansion the MRDR team has also grown. This includes staff at the Transfusion Research Unit (TRU), Monash University, which administers the registry (see image).



*R-L: Dr Zoe McQuilten (TRU Deputy Director), Mr Neil Waters (TRU Senior Projects Manager), A/Prof Erica Wood (TRU Head of Unit), Prof Andrew Spencer (MRDR Coordinating Principal Investigator & Steering Committee Chair), Dr Krystal Bergin (PhD student & Steering Committee member), Dr Elizabeth Moore (MRDR Project Manager & Research Fellow), Prof John McNeil (Steering Committee member), Dr Cameron Wellard (TRU Data Manager), Ms Gordana Kel (MRDR Research Assistant).*

## MRDR: HOW CAN YOU BE INVOLVED?

Ask your treating specialist if your hospital contributes data to the MRDR and if you are eligible to participate. If so you will receive a patient information sheet about the registry including how to opt out if you change your mind.

## TO CONTACT THE MRDR:

Phone: 1800 811 326  
 Email: [sphpm-myeloma@monash.edu](mailto:sphpm-myeloma@monash.edu)  
 Website: [mrd.net.au](http://mrd.net.au)



## FREE ONLINE LEARNING

- Can't leave the house?
- Need to increase CPD hours?
- Cost a barrier
- Can't find the time?

All are good reasons to try some free online courses....



### Myeloma UK: Support and resources for healthcare professionals

Working with healthcare professionals to ensure patients receive the best treatment and care.

Myeloma is a complex and rare cancer and the pace of change in research and treatments is rapid. This makes it especially important that healthcare professionals have access to information on best practice. We provide unique resources and tailored information for doctors, nurses, and other clinicians.

Designed and delivered in conjunction with myeloma experts and a multidisciplinary team from around the world, our accredited, easily-accessible, education programs are designed to fit around busy work schedules.

Access via: <https://academy.myeloma.org.uk>

**Bloodwise**  
The blood cancer research charity



### About the course

A free RCN accredited training module for ward nurses and new starters on the haematology ward on basic haemato-oncological concepts to support a foundation of nursing practice for caring with blood cancer patients.

Over the 10 chapters in this course, you will:

- Gain a foundation knowledge of basic haemato-oncological principles
- Improve your ability to effectively identify common complications and efficiently respond to emergencies; and
- Learn the importance of providing high quality holistic care throughout patients' stay in hospital and beyond.

We estimate the course will take 4.5hrs to complete, but you can stop and start at any point and pick up where you left off.

This resource can be used for Continuing Professional Development (CPD) and Written Reflective Accounts for NMC revalidation.

Access via: <https://nurseeeducationresource.bloodwise.org.uk>

Tailored to professionals just starting their career through to advanced scientists and clinicians, the calendar is offered through a combination of face-to-face workshops and seminars, self-paced eLearning and recorded webinars.

Continuing professional development points are awarded for all completed sessions.

Don't forget: The Australian Red Cross Blood Service's comprehensive transfusion education sessions



# Everything you need to know about blood and transfusion.

Learn about blood products and transfusion practice through the Blood Service’s comprehensive range of educational resources and tools.

## WEBSITES

**transfusion.com.au** is a website for health professionals. It’s a gateway to product and practice information, online learning and transfusion tools and resources.

**mytransfusion.com.au** is a website for patients who might need to have a transfusion. It includes information about iron deficiency anaemia, risk and consent.

**learn.transfusion.com.au** is the home for transfusion education for health professionals. Attend webinars, listen to recorded sessions, and undertake elearning to improve your practice and gain CPD points.

## PUBLICATIONS

**BCI** is our blood component information booklet. The March 2015 BCI is the current edition.

**Pack Check** teaches correct practice for checking a blood component pack before transfusion.

**Patient Blood Management Committee Handbook** is a guide for PBMC members that suggests the format and activities for meetings and is rich with resources.

[transfusion.com.au/publications](http://transfusion.com.au/publications)

## APPS FOR HEALTH PROFESSIONALS

**Adverse Events** puts diagnosis and next steps at your fingertips. Select symptoms to receive instant advice on management and further investigation of adverse events.

**Blood Typing** explores the world of red cell agglutination, antigens and antibodies in a game environment, making transfusion science fun.

**High Ferritin** lets doctors seamlessly refer patients for therapeutic donation with the Blood Service.

**How Much Blood?** lets you calculate how much blood you have, then breaks this down into components and explains their function.

**Q&A** tests your transfusion knowledge with a series of question banks you can tackle online or have sent straight to your mobile.

**Red Cell Prescriber** assists with evidence-based red cell prescription.

[transfusion.com.au/mobile\\_applications](http://transfusion.com.au/mobile_applications)

## SELF-PACED ONLINE LEARNING

**Adverse events** supports your learning in diagnostics, management and the prevention of transfusion adverse events.

**Antibody Club** gives an overview of antibody investigation techniques, exclusions, and prescribing appropriate red cells for patients with antibodies.

**Blood basics** gives an overview of donor selection, processing and testing at the Blood Service.

**Hepatitis B – diagnosis and testing** supports you to investigate and diagnose different stages of hepatitis B infection.

**Irradiated blood components** aims to increase your awareness of transfusion-associated graft versus host disease and its prevention.

**RhD immunoglobulin clinical modules** support the safe and appropriate administration of RhD immunoglobulin.

[learn.transfusion.com.au](http://learn.transfusion.com.au)

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## CNSA UPDATE



### Samantha Gibson

The growth and development of CNSA as a Society has continued through 2017. April saw the appointment of the Inaugural CNSA CEO, Samantha Gibson RN, MN, NP. Samantha brings extensive experience in cancer care, having worked as a clinician in the Oncology and Haematology fields for nearly 30 years and having contributed to CNSA in a number of leadership roles over the past 11 years. In June this year after extensive member consultation, CNSA members voted at the AGM in Adelaide to support a change in company structure from an Incorporated Association to a Company Limited by Guarantee. The support to change was almost unanimous with members voting to support a change in constitution underpinned by principles of contemporary governance.

### CNSA Annual Congress

The CNSA 20th Annual Congress in Adelaide was a resounding success with 94% of delegates reporting that the CNSA Annual Congress met or exceeded their professional development needs. This level of satisfaction confirms that the CNSA Annual Congress format is well-pitched and diverse based on delegate evaluations from a broad cross section of cancer nurses with varied levels of experience.

Plans for the 2018 CNSA Annual Congress are well under way. In celebrating our 21st birthday, we expect the 21st Annual Congress to be the biggest and the best yet. Annual Congress 2018 will be held in Brisbane from the 21-23rd June, the theme is 'Science, Symptoms and Service Delivery'. We have already secured a number of highly acclaimed key note speakers including; Professor Christine Miaskowski, an internationally renowned expert in the science of cancer related symptom management, Professor Mei Krishnasamy who holds a dual appointment as the Chair of Cancer Nursing at the University of Melbourne and the VCCC Education and Research Lead for Cancer Nursing and Professor Dorothy Keefe who is the Clinical Ambassador, Transforming Health Professor of Cancer Medicine, University of Adelaide and a Senior Medical Oncologist, Royal Adelaide Hospital Cancer Centre. They will be joined by many other cancer experts from across

the country who will share the latest updates on research and clinical practice. The program will offer something for all nurses from novice to expert with a broad selection of targeted professional development offerings. We look forward to seeing you in Brisbane in 2018.

Abstract submissions for Congress opens on 1 November 2017 and closes on February 2, 2018. Support for writing a quality abstract is available through contacting Research Standing Committee Chair, Associate Professor Kim Alexander, or Education Standing Committee Chair, Dr. Elisabeth Coyne, whose contact details are available on the CNSA website.

### CNSA Research Grant applications are NOW OPEN

CNSA offers a Research Grant Program to support the development of cancer nursing. The purpose of the program is to provide financial assistance to nurses to facilitate research in the area of cancer nursing that will contribute to improvements in the care of people with cancer. Click here to download an application form. Applications close on September 30, 2017.

Do you need assistance to write a research proposal? CNSA has an article that can provide you with tips and tricks to writing a successful research proposal. Download a copy here for your reference today.

CNSA is proud to announce in 2016 there were two successful recipients of a CNSA Research Grant. These CNSA members have received funding to assist their research in the following areas:

- Understanding cancer pain management experiences and needs of Chinese migrants in Australia: a mixed method study (2016) Study 1 - Focus group to Chinese migrants cancer outpatients

#### Xiangfeng Xu (NSW)

- Evaluating current methods for effective decontamination of needleless connectors: A pilot randomised control trial (2016)

#### Julie Flynn (QLD)



## CNSA UPDATE CONT.

### CNSA Education Standing Committee Update

Following award of a Special Project Grant, the CNSA Education Committee are in the process of updating the Cancer Nurses Society of Australia Position Statement on 'The Minimum Education and Safety Requirements for Nurse Administration of Antineoplastic drugs'. The special project team has developed a protocol for completion of the integrative literature review, to ensure the new position statement uses current evidence, collated and critiqued for inclusion when the project is published. The updated position statement is planned for publication in 2018.

### Expansion of Professional Development Offerings and Resources for CNSA members

CNSA are pleased to offer members with a suite of high quality, relevant webinars made available through a memorandum of understanding between the Canadian Association of Nurses in Oncology and CNSA. The webinars are diverse and enable members to access professional development without geographical barrier.

Webinars available include:

- Breast Cancer 101: Understanding Pathology Treatment; the Basics
- Prostate Cancer 101
- The 50 Shades of Sexuality in Oncology

- Writing for Publication
- Survivorship Module 5 - Complimentary and Integrative Medicine
- Survivorship Module 10 – Risk Reducation Activities
- Teaching Patients About Cancer-Related Fatigue
- Refining Value – How Much is a Nurse Worth?
- Oncology and Palliative Care Partnership: Whole Person Care Inspiring an Innovative Treatment
- Hypersensitivity Reactions – The Essentials

Furthering our commitment to the professional development of members, CNSA have made available all presenters slides (where speaker consent has been provided) to delegates attending the 20th Annual Congress in Adelaide in June. As a new initiative, these slide sets will be added to the Member Hub in the coming weeks to boost the professional development offerings for all CNSA members.

CNSA members have access to new and updated practice resources through the Member only Publication and Resource section of the CNSA website. New resources include Practice Principles for the Care of Patients Undergoing Radiation Therapy, providing specialist guidance for nurses caring for patients undergoing radiotherapy. The Breast Seroma Management Nursing Principles have been updated and provide specialist guidance for safe and effective breast seroma management.



BRISBANE CONVENTION AND EXHIBITION CENTRE  
21 - 23 JUNE 2018

**CANCER NURSING**  
SCIENCE, SYMPTOMS AND SERVICE DELIVERY



## CONFERENCE UPDATE 2017

Compiled by Peter Haywood

DATE	CONFERENCE	DETAILS
<b>OCTOBER 2017</b>		
29 Oct–1 Nov	HAA 2017	Sydney, Australia <a href="http://www.haa2017.com">www.haa2017.com</a>
<b>NOVEMBER 2017</b>		
13–15 Nov	COSA: Clinical Oncology Society of Australia Annual Scientific Meeting	Sydney, Australia <a href="http://www.cosa.org.au">www.cosa.org.au</a>
14–17 Nov	ALLG Scientific Meeting	Sydney, Australia <a href="http://www.allg.org.au/events.html">www.allg.org.au/events.html</a>
<b>DECEMBER 2017</b>		
9–12 Dec	59th ASH Annual Meeting: American Society of Haematology	Atlanta, USA <a href="http://hematology.org/Annual-Meeting/">hematology.org/Annual-Meeting/</a>

## CONFERENCE UPDATE 2018

DATE	CONFERENCE	DETAILS
<b>JANUARY 2018</b>		
<b>FEBRUARY 2018</b>		
21–25 Feb	BMT Tandem Meetings American Society for Blood and Marrow Transplantation	Salt Lake City, USA <a href="http://asbmt.org/event/2018-bmt-tandem-meetings">asbmt.org/event/2018-bmt-tandem-meetings</a>
<b>MARCH 2018</b>		
18–21 Mar	EBMT: European Society for Blood and Marrow Transplantation Annual Meeting	Lisbon, Portugal <a href="http://www.pr-medicevents.com/congress/ebmt-2018/">www.pr-medicevents.com/congress/ebmt-2018/</a>
<b>APRIL 2018</b>		
<b>MAY 2018</b>		
17–20 May	ONS: Oncology Nursing Society Annual Congress	Washington, USA <a href="http://www.ons.org/congress">www.ons.org/congress</a>
<b>JUNE 2018</b>		
1–5 June	ASCO 2018: American Society of Clinical Oncology Annual Meeting	Chicago, USA <a href="http://asco.org/2018-asco-annual-meeting">asco.org/2018-asco-annual-meeting</a>
21–23 June	CNSA: Cancer Nurses Society of Australia Winter Congress	Brisbane, Australia <a href="http://cnsa.org.au/congressevents/cnsa-annual-congress">cnsa.org.au/congressevents/cnsa-annual-congress</a>
14–17 June	EHA: European Hematology Association Congress	Stockholm, Sweden <a href="http://ehaweb.org/congress-and-events/22nd-congress/future-congresses/">ehaweb.org/congress-and-events/22nd-congress/future-congresses/</a>
28–30 June	MASCC/ISOO: Annual Meeting on Supportive Care in Cancer	Vienna, Austria <a href="http://mascc.org/annual-meeting">mascc.org/annual-meeting</a>
<b>JULY 2018</b>		
<b>AUGUST 2018</b>		
<b>SEPTEMBER 2018</b>		
23–26 Sept	ICCN: International Conference on Cancer Nursing	Auckland, New Zealand <a href="http://isncc.org/news/355766/">isncc.org/news/355766/</a>



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## TRAVEL GRANT TO EBMT 2018

Be on the look out for calls for applications for the 2018 HSAZ nurses group travel grant to attend EBMT 2018. It will formally announced at HAA 2017. Preference will be given to those who have submitted an abstract to the EBMT meeting.

So start planning, thinking about an abstract and of course update your passport and Portuguese.

**EBMT 2018**

European Society for Blood and Marrow Transplantation

**44<sup>th</sup> Annual Meeting of the European Society for Blood and Marrow Transplantation**

*18-21 March 2018 - Lisbon, Portugal*

**FIRST ANNOUNCEMENT**

- 44<sup>th</sup> Meeting of the Physicians
- 34<sup>th</sup> Meeting of the Nurses Group
- 17<sup>th</sup> Meeting of the Data Management Group
- 12<sup>th</sup> Patient, Family & Donor Day
- 10<sup>th</sup> Meeting of the Quality Management Group
- 7<sup>th</sup> Cell Therapy Day
- 7<sup>th</sup> Paediatric Day
- 3<sup>rd</sup> Pharmacists Day
- 2<sup>nd</sup> Psy Day

[www.ebmt2018.org](http://www.ebmt2018.org)



## EDITOR'S NOTE

Rosemary Hoyt

Dunedin Hospital, New Zealand

It is hailing outside and the temperature has not yet reached 5 degrees. I am working on the newsletter, trying to gather up the contributions as well as contemplating going to HAA 2017.

I have left this a bit late as I had decided I was not going. Work is busy, I have assignments for Uni to do, Ruby, the dog is aging and I do not know if I can face the amount of work it takes to hand over the patients I have been working with and have everything sorted out for them before I leave. I always feel guilty leaving work for some one else. I have also been feeling despondent with work, life stressors and did I mention it was hailing? So, while making all these excuses, two things happened.

A nursing colleague is doing a project trying to introduce an innovative care intervention for haematology patients. She was keen to make contact with nurses in other centres to seek their experience. However, she had not had much luck with people replying. So along came me, having attended numerous HAA meetings, coordinating the newsletter and having worked in various hospitals I was aware of several nurses who might be able to assist. So, I did some 'match-making' and it worked out very well. All only achievable though, through HSANZ membership and networking during conferences.

I was reading the HAA 2017 programme to see what highlights I could mention in this edition of the newsletter. I had not really looked at the programme previously as I had decided not to go. However, I then saw that as well as Beth Faiman, the local speakers include Professors' Meinir Krishnasamy and Kate White. Wow what great nurse researchers, both who have inspired me in the past and I am a bit of a fan of both their work.

Suddenly the above excuses are fading away and surprisingly it has also just stopped hailing.

I know not everyone can go to HAA 2017. I am still not sure what to do with Ruby (the elderly dog) or how I am going to fund the trip to Sydney. Having not planned to go I have not applied for any funding. Nevertheless, hopefully these obstacles for me can also be overcome.

For others, unable to make it I will endeavour to collate as much conference reports and feedback for newsletter readers so you do not miss out on practice updates and inspiring presentations. Anyone else wanting to help out with post HAA 2017 news please make contact with me. I would really love to hear from you.

P.S. The sun is out and the daffodils in the garden are coming up. The temperature has hit 5 degrees now. Spring is here!



RUBY, THE DOG