



## **Research Theme** **DHB Research Profiles**

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### **1. DHBing Innovative and Involved**

In the first of a series of issues we are delighted to be profiling exciting examples of research initiatives being undertaken by DHBs, including research initiated in-house for DHBs to address their own research needs, often by innovative processes involving diverse collaborations.

DHB research managers were invited to share examples of key projects being carried out at their DHB, perhaps highlighting their unique focus areas or themes in which they have expertise. These may be projects that have recently been funded, are nearing completion, require participant recruitment, are planned but need other partnering DHBs, promotion of soon to be released RFPs, highlighting of a DHBs specific attributes for research facilitation e.g. rural, priority population, specialist areas etc.... **The brief was broad – as is the New Zealand health sector and expertise within it. Can we aid cross-sectoral collaboration and communication?**

If possible, DHBs were encouraged to highlight not just what they have been doing in the way of research, but also what they've achieved, or learnt from it, if they can share transferable advice/learning's regarding processes, methods of engagement, issues in the sector that need to be addressed in undertaking research... **Can we improve our efficiency and outcomes by sharing knowledge?**

DHBs were further invited to demonstrate how they may have addressed the DHBRF

translational research principles and research priorities (profiled in [April 2009 DHBRE eNews](#)).

Please keep in mind – we are always happy to consider contributions for the enews. If you are aware of DHB-related research that may be of interest to our readers please contact the relevant DHB research manager or let us know by emailing [mdowie@hrc.govt.nz](mailto:mdowie@hrc.govt.nz), or with any other ideas for including in this newsletter.

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## 2. Introduction to May eNews Contributors

In this issue, read about research from Capital and Coast DHB as part of two contrasting collaborations. One is a promising new phase one clinical trial with Malaghan Institute of Medical Research, testing a novel treatment for patients with recurrent glioblastoma multiforme, a highly aggressive brain tumour. Another is a recently completed study of cannabis use and the risk of lung cancer. A key success factor of this research was a strong collaboration between nine DHBs, the University of Otago, Medical Research Institute of NZ and Imperial College London.

A contribution is also included from Counties Manukau DHB and CCRep, the specialist research arm of Counties, identifying their commitment to research by becoming the first DHB to adopt a long term strategy for the development of research infrastructure and capability.

Waitemata DHB Knowledge Centre was formed to support and facilitate the development, dissemination and use of knowledge to enhance health benefit throughout the DHB. Their broad and expanding role in research support is introduced. An example of a very successful research initiative from the DHB is also profiled. The web-based decision support tool called GASP (Giving Asthma Support to Patients) was winner of the supreme award at the 2009 Waitemata Health Excellence Awards.

Finally, a segment from the Alcohol Drug Helpline identifies rising usage of the service, particularly in the Auckland and Waikato region.

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## 3. Phase One Glioblastoma Clinical Trial: Malaghan Institute of Medical Research and Capital and Coast DHB Collaboration

In late 2008 the [Malaghan Institute of Medical Research](#) and [Capital and Coast DHB](#) initiated a Phase One clinical trial to test the feasibility and safety of using dendritic cell vaccines in combination with temozolomide chemotherapy for the treatment of patients with recurrent glioblastoma multiforme, a highly aggressive brain tumour with a 100 % fatality rate.

The trial is being overseen by the Head of the Malaghan Institute's Vaccine Research Group, Dr Ian Hermans, in collaboration with Capital and Coast DHB neurosurgeon Mr Martin Hunn, and Dr David Hamilton from the Wellington Blood and Cancer Centre.



It is anticipated that the trial will involve 12-17 patients from the Central region that meet a strict set of eligibility criteria.

The custom-made vaccines used in the trial are created by loading dendritic cells isolated from the patient's blood with tissue from



their surgically-removed tumour. Dendritic cells are a rare group of immune cells in the body that can activate T cells, considered the foot soldiers of the immune response. It is hoped that the T-cells will be selectively activated to destroy the brain tumour cells.

The patients will initially receive three vaccine treatments at two-week intervals, before being given the chemotherapy drug temozolomide. Once chemotherapy has been started, the vaccines and the chemotherapy will then each be given to the patients monthly for up to six months.

The Trial has been made possible by a grant from the [Cancer Society of New Zealand](#). Visit the [Malaghan Institute](#) website.

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## 4. DHB Collaboration Key to Success of Study Showing Cannabis Smoking Increases Risk of Lung Cancer

A strong collaboration between nine DHBs, the University of Otago, the [Medical Research Institute of New Zealand](#) and the Imperial College London was key to the success of a study of cannabis use and the risk of lung cancer. Results of the study were recently published in the European Respiratory Journal, showing that cannabis smoking increases the risk of lung cancer.

When lung cancer cases and matched controls were assessed for possible risk factors cigarette smoking was confirmed to be the most important risk factor. However smoking cannabis also played a role, with lung cancer risk increasing progressively with increasing life time use of cannabis.



Download the [full article here](#).

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## 5. A DHB on the Move: Research at Counties Manukau

The DHB's commitment to continue supporting research was demonstrated clearly by the CMDHB Board on May 6th this year as it became the first DHB in NZ to adopt a long term strategy for the development of research infrastructure and capability. Entitled "*Te Kaupapa Rangahau Hauora o Counties Manukau District Health Board (Health Research Strategy for Counties Manukau District Health Board)*" it incorporates specific goals around CMDHB's Te Tiriti commitment and partnership with Maori as well as Pacific people who have a significant health impact in the Counties Manukau Region. However, this is a strategy which is intended to improve the health and well being of all the people of the Counties Manukau region by undertaking relevant health research and translating the findings of research into the delivery of health services to our communities and beyond.



This Strategy represents a significant step to further increase the breadth and scope of research at CMDHB. Initial planning is being undertaken to increase support for Maori research capability and further increase internal funding pools to support locally-developed research initiatives through the CCRep Innovation Fund. Longer term the CMDHB Research Strategy has positive implications for facilitating research with academic and industry partners.

Read the [full article here](#).

For more information, contact the CMDHB Research Officer [Alison Robertson](#) by Email, Telephone (09) 276 0044 ext 9124 or Cell (021) 943 784.

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## 6. Research Support within Waitemata DHB

support and facilitate the development, dissemination and use of knowledge to enhance health benefit throughout Waitemata DHB. Philosophically the brief has been wide – not only to support the institutional requirements for managing clinical trials, but to support audit, observational, evaluation and service improvement projects across the primary, secondary and tertiary provider environment.

With support manifesting in a number of ways, from involvement in compliance to ethical standards to providing innovation projects with methodological, statistical, regulatory, funding, legal and publication advice, to name a few.

Read more [by downloading the full article](#).

For more information, visit the [Knowledge Centre](#) website or Email [knowledgecentre@waitematadhb.govt.nz](mailto:knowledgecentre@waitematadhb.govt.nz)

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## 7. Web-based Decision Support Tool for Nurse-led Asthma Management

An innovative web-based decision support tool for the nurse-led management of asthma was the supreme winner of the 2009 Waitemata Health Excellence Awards.

In recent years Auckland respiratory care nurses have been attending an extension of the Asthma and Respiratory Foundation's Fundamentals Programme to formalise their competence in all areas of asthma management. A number of nurse-led asthma clinics have subsequently been established, but the paper-based assessment tools and calculators used was cumbersome, time consuming and difficult to audit.

Harbour Health have developed a first-of-a-kind web-based decision support tool called GASP (Giving Asthma Support to Patients). A six-month pilot of the tool across five GP practices was conducted in 2008 with resounding success. For those participants of the GASP clinics, there was a noticeable reduction in emergency visits, hospital admissions and use of oral steroids, and an improvement in peak flow measurements.

Download the [full article here](#).

Visit the [Harbour Health PHO](#) website for more information.



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## 8. Alcohol Drug Helpline: Calls for Help Rise Dramatically in Auckland and Waikato Regions

Calls for help to the national Alcohol Drug Helpline continue to rise, and in the Auckland and Waikato region the increase in the number of calls has been unprecedentedly high over the first three months of this year.

Cate Kearney, Chief Executive of the Alcohol Drug Association of New Zealand, which runs the national Helpline, says that there were just under 4,500 calls made to the Helpline



between January 1 and March 31 2009, 15% more than in the same quarter last year.

“But in the Auckland and Waikato regions, there was an increase of 35% in the number of calls, where the rise for the rest of the country was only 3%” Kearney says.

Download the [full article here](#).

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## 9 . Next DHBRF e-newsletter:

The next DHBRF eNews will continue to profile research being undertaken by DHBs.

We are always happy to receive contributions of relevance to our readership. If you have a proposed newsletter item please email [mdowie@hrc.govt.nz](mailto:mdowie@hrc.govt.nz)

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## 10 . About the purpose of the DHBRF e-newsletter:

- Provide DHBs with information relevant to DHB core business i.e. funding and planning activities
- Identify research that could inform planning for public health services
- Identify less relevant research which may have more of a biomedical focus
- Monthly communications are themed, focusing on priority health areas

**Information included represents highlights of findings of high-quality research, readily available at the time of writing**

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## 11 . Unsubscribe

To unsubscribe, send an e-mail containing your title, name, job title, organisation, mailing address, phone and fax number, with the subject line "Unsubscribe DHB eNewsletter" to [gmoore@hrc.govt.nz](mailto:gmoore@hrc.govt.nz).

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## 12 . Contact Us:

To contact us telephone Sharon McCook at the HRC on (09) 303 5224 or email: [smccook@hrc.govt.nz](mailto:smccook@hrc.govt.nz)

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Check out the HRC's website on [www.hrc.govt.nz](http://www.hrc.govt.nz)