

Newsletter

October 2006

In this Issue

	Page		Page
Editorial Comment	2	Postgraduate Training Course 2007	4
President's Message	2	Travel Grant Reports	5
Secretary's Report	2	Membership	14
Treasurer's Report	3	Society Awards & Grants	15
Clinical Training & RACP Liaison	3	Other Awards Available	15
Standing Committees Report	3	Calendar of Events	15
Postgraduate Education & Society		TSANZ Council	16
Liaison Report	4	Standing Committees	16
Annual Scientific Meeting 2007	4		



EDITORIAL COMMENT

The readers will note the extra length of this edition of the TSANZ Newsletter, which is due to the large number of travel grant reports from our Members. I would like to re-state Philip O'Connell's recommendation to read these reports, since they underscore the high standard of science and clinical transplantation in Australia. Amongst the regular reports by Council members, various meetings are highlighted, which include the 2008 International Transplant Meeting in Sydney, the TSANZ Annual Scientific Meeting in 2007, the Postgraduate Course (which is being continually developed) and the 2006 AHMRC. Numerous key issues are raised in each report. Some of these include: TGA regulation issues, Clinical Performance Indicators, promotion of the TSANZ Postgraduate Course, NHMRC guidelines on organ donation and the ongoing important work of our Standing Committees. Finally, Jeremy Chapman's achievement as the President of the International Transplantation Society has been acknowledged, and is clearly an outstanding achievement. Importantly, we want feedback from our members on any aspect of our newsletter or our Society's performance.



MESSAGE FROM THE PRESIDENT

Philip O'Connell

It was good to see many of you at the recent World Transplant Congress in Boston. Even more pleasing was the outstanding Australian representation at this meeting. Congratulations to Matthew Vitalone who received an ITS young investigator award which were handed out to only a handful of young investigators worldwide. Matthew had the impressive achievement of being awarded two oral presentations at the meeting. He was one of a record number of Australian young investigators who presented their research work at this international meeting and it was pleasing to see that the future of the society is in excellent hands. What made this achievement even more impressive was that this was a combined meeting between the American Transplant Societies and the International Transplant Society and hence the quality of the abstracts was of higher standard than usual. The meeting was outstanding, if somewhat overwhelming in scope, and certainly has set a high standard for the Transplant Society Meeting that will be held in Sydney in 2008. During the meeting, members of TSANZ Council met with the Transplant Society Council and gave an outline of our preparations for the 2008 meeting. The challenge for us will be to keep abreast of recent advances and create a program that is both innovative and relevant to the international

transplant community. Already many members of the society are contributing their time to make the 2008 meeting a success and I would like to thank them for their contributions thus far.

On the local front, TSANZ has been in ongoing liaison with the TGA regarding their proposed regulatory framework for organs and tissues. The negotiations have become more complex as the State Departments of Health are now involved. At this stage it is still not clear what the final outcome and final model will be. However I think it is fair to say that the days of no regulation have passed and we need to negotiate on this basis. The TSANZ's view has always been that whatever scheme is in place, it needs to be national, affordable and workable and have no impact on organ donation. Certainly I will plan to keep you abreast of ongoing negotiations with the TGA and the states.

Finally, I would like to congratulate Jeremy Chapman on his election as President of the International Transplant Society. Although other Australians have been elected President of this prestigious society, they were all working overseas at the time. Jeremy is the first Australian to achieve this honour whilst performing his research and clinical work here in Australia. It is a fitting testament to what he has achieved in the past 20 years in transplantation and is a tremendous accolade for Australian medicine.

I hope you take time to read the rest of the newsletter; in particular the reports from those members who were successful in receiving a travel grant to attend the World Transplant Congress.



SECRETARY'S REPORT – Frank Ierino

Since the last newsletter, the World Transplant Congress in Boston has passed and the meeting was successful from the point of view of the Australian Transplant community. We would like to thank all those who helped Aviva at the Australian stand for the 2008 Transplant Congress in Sydney. The promotion attracted significant attention and interest, and we hope that this translates to an excellent attendance at the meeting in Sydney.

Australian investigators were well represented at the Boston meeting and, as outlined in the previous newsletter, there were a record number of travel grants awarded to support members to attend this meeting. The presentations were a high standard and the reports from the awardees are presented in this issue of the TSANZ newsletter. We now countdown to the 2008 meeting and will no doubt be continually updated by Jeremy Chapman and Phil O'Connell.



The next item is the Australian Health & Medical Research Congress, which runs from November 26th to December 1st 2006 at the Melbourne Convention Centre. TSANZ are organising a symposium as part of this meeting entitled "Gene Therapy in Transplantation" with one International speaker, John Iacomini from the Harvard Medical School in Boston, and two local speakers Keryn Williams and Shane Gray. TSANZ will also co-run a symposium on immunosuppression with ASCEPT. Alex Sharland is the liaison person for TSANZ and has been closely involved with the organization. You will be hearing from Alex Sharland regarding the meeting and I would encourage all members to consider attending this meeting, which has diverse symposium topics.

The last item is our membership. This continues to be healthy and expect that the 2008 meeting will help to consolidate the numbers. The membership benefits and awards are being reviewed and suggest that everyone regularly visit the TSANZ website for any updates. We will also notify everyone as these changes appear.



TREASURER'S REPORT – Jonathan Fawcett

The financial standing of the society remains sound through increased membership, continued (and much appreciated) support from the pharmaceutical industry and stable investments (growth was a little slower in the last quarter but not worryingly so). The cost of the annual scientific meeting is, however, likely to be more expensive in the future. In the short term this is because we will continue to use electronic abstract submission and electronic posters which have to be paid for. The feedback from this year's meeting, though, was that these were well received. Likewise, the marquee was deemed to be a success and may even be larger next year. In the longer term, we are going to have to address the issue of the venue of our annual meeting because the Academy of Science is really beginning to feel too small. This will be sad for many members who associate the building with the TSANZ meeting but from a treasurer's perspective, there is the additional consideration of the greatly increased cost of going anywhere else. Of course, our annual meeting in 2008 will be in Sydney as part of the world congress, so no change will be made before then but it may become an issue in 2009. If we do move, the added cost will likely result in higher registration fees and increased annual subscription fees as well. For now, though, no hike in subs.



CLINICAL TRAINING & RACP LIAISON

Steve Chadban

Performance Indicators

The RACP is seeking to document performance according to key performance indicators, collectable annually. For transplantation services, 1 year graft and patient survival are collected by all and would seem to be the most relevant and also the most easily collected PIs. I would appreciate your feedback if this is NOT the case. If all are in agreement, I will make this suggestion to the RACP.

SAC in Nephrology

The annual meeting for advanced trainees in nephrology was held during the recent ANZSN meeting in Melbourne. As has been common in recent years, the meeting was poorly attended by trainees. As the TSANZ rep I reiterated the importance of trainees receiving adequate training in both the theory and practice of transplantation, ideally by attending the post-grad course of at least 1 TSANZ ASM to supplement clinical exposure to acute and maintenance phase kidney transplant recipients. Furthermore, the numerous opportunities for post-grad research in transplantation were highlighted. Centralised attempts to increase participation rates in the trainees meeting and post-grad education courses are in train. We urge consultants/supervisors to promote such attendance.

Kidney School

A program of monthly presentations followed by dinner has been established for the advanced trainees in Nephrology in NSW. Following the success of this program, moves are underway to make this an Australia-wide program using video-conferencing facilitated by the RACP. The agenda will be made available via Aviva and all TSANZ members/trainees are welcome to join in, particularly for transplant-related topics.



STANDING COMMITTEES REPORT

Peter Macdonald - Chair

The number of standing committees has grown to twelve with the splitting of the Cardiothoracic Committee into separate Heart and Lung Committees. The Lung committee will be chaired by Keith McNeil and the Heart committee by Peter Macdonald.

Active issues that affect all committees include the proposed TGA regulations for organ and tissue donations. Discussions are ongoing between the TGA, TSANZ, ATCA and other stakeholders. The overall aim of the proposed regulations is to develop a framework that will enable instances of transmission of specific



infections (eg Hep B and Hep C) between donor and recipient to be identified in circumstances where there is known to be an increased risk. The framework will also enable the outcomes of these patients to be audited.

An NHMRC working party which includes Peter Macdonald and Deborah Verran as TSANZ representatives is currently revising the Ethical Guidelines for Organ & Tissue Donation from deceased and living donors. Four separate documents for health professionals and the general public have been developed. The draft documents for deceased donation have been through one round of public consultation (with mixed feedback) and the documents for living donation have recently been released for public consultation. It is expected that the four documents will be completed by the end of 2006.

Current issues for individual committees include the recent development of an Urgent Category for patients awaiting Heart Transplantation and the development of clinical guidelines for Living Donor Liver Transplantation by the Liver committee.



POSTGRADUATE EDUCATION & SOCIETY LIAISON - Alex Sharland

Third AHMRC Congress - MELBOURNE CONVENTION CENTRE rapidly approaching - 26th November - 1st December 2006

The upcoming AH&MR Congress is on track to be the biggest ever, with more than 1000 registrations already. The program is outstanding in calibre and breadth, there are over 200 invited speakers, including 60 internationals and more than 100 sessions. Plenary speakers include: Richard Flavell, Rudolph Jaenisch, Joe Nevins, John Bergeron and Jean-Paul Theiry. Full registrants can attend all of the week, regardless of their society interests. "Cytokines, Inflammation & Disease" is one of the main themes of the congress, and there is also a strong focus on stem cells and matrix biology, with an underlying emphasis on emerging technologies and translational research.

The TSANZ Symposium on Gene Therapy in Transplantation will take place at 1pm on Monday 27th November, after the opening plenary session featuring Richard Flavell. Speakers at the symposium will be John Iacomini, Shane Grey and Keryn Williams. Following on at 3:30pm will be the TSANZ/ASCEPT joint session on transplantation and immunosuppressive agents with Teun Van Gelder, Paul Taylor, Graeme Russ and Greg Snell. Day registration is available for those unable to attend the whole meeting.

Visit and bookmark www.ahmrccongress.org.au now! – To register, click on the TSANZ logo on the right hand panel.

The postgraduate course in Transplantation will run again this year on 26th-27th March, immediately prior to the ASM on March 28-30. Course convenors Karen Dwyer and John Kanellis have put together an excellent programme, which will include international speakers Xian Li, Steven Sacks and Ed Cole as well as a distinguished local faculty.



ANNUAL SCIENTIFIC MEETING 2007 **Shane Grey & Martin Gallagher**

Preparations are well advanced in developing an exciting program for the 2007 Annual Scientific Meeting. International guests for the meeting include Professor Ed Cole (Toronto), Professor Stephen Sacks (London) and A/Professor Sean Li (Boston) who will bring an interesting mix of the clinical and laboratory to the meeting.

Abstracts for the meeting will need to be submitted by COB Friday December 8 2006 using the electronic submission web portal as in previous years. It is likely that greater use will be made of electronic means of review and presentation of posters at this meeting, and clear instructions will be provided to poster presenters. The meeting starts on Wednesday 28 March 2007, preceded by the Postgraduate Revision Course (Monday 26th and Tuesday 27th) coordinated by Dr. John Kanellis and Dr Karen Dwyer.



POSTGRADUATE EDUCATION COURSE 2007 **Karen Dwyer & John Kanellis**

The postgraduate course in transplantation will be held immediately prior to the 2007 Annual Scientific meeting in Canberra (26-27 March). A broad range of scientific (transplant immunobiology, molecular and cellular mechanisms of rejection etc) and clinical aspects of transplantation will be covered over the 2 day course. Invited international and local speakers will contribute to the programme. More specific details will be provided in the next few weeks via the TSANZ website.

We recommend the course to all clinical specialty trainees, young scientists embarking on a career in transplantation, physicians, surgeons, nurse specialists and pharmaceutical industry representatives wishing an update on transplantation in Australia and New Zealand.





TRAVEL GRANT REPORT - 8th International Meeting of the Cell Transplant Society

The Cell Transplant Society recently held its 8th international meeting in Milan, Italy in May of this year. I wish to thank the TSANZ committee and Novartis for allowing me the opportunity to attend and present at this congress. The meeting provided an excellent opportunity to hear of the latest research in islet transplantation and the specific area of cell encapsulation, directly related to my PhD project. Being a smaller meeting, it enabled me the advantage to meet with international researchers in the field and discuss their work.

A great deal of the meeting was dedicated to islet transplantation, both clinical studies and in animal models. This presented invaluable opportunities to hear from leading scientists at the forefront of this research such as from the Edmonton group, Camillo Ricordi's group in Miami and several others. The presentation by Riccardo Calafiore was of special interest to me, highlighting the results of his clinical trial with encapsulated human islets into type 1 diabetic recipients. I was also able to gain further insight into methodologies adopted by Gordon Weir's group in Boston in their very successful small animal transplantation studies, demonstrating advantages of microcapsules in preventing both allo - and xenograft rejection.

I am particularly grateful to have met colleagues in Professor Gudmund Skjåk-Bræk's laboratory in Norway. I learned of different techniques carried out in their lab and they provided very useful feedback on my work, including measurement of some additional properties on microcapsules similar to those I am currently using. In addition to enhancing my scientific awareness in the field, the meeting offered a nice opportunity to taste delightful Italian cuisine and explore an ancient city! It was a memorable visit and thanks again for allowing me the opportunity to attend this international forum.

Jayne Foster



REPORT FROM THE WORLD TRANSPLANT CONGRESS (WTC) – BOSTON 2006 **Andrew Peters – The Meeting Planners**

Australian and New Zealand registrants especially the Local Organising Committee for the 2008 TTS Congress in Sydney were to the fore at the recent world Transplantation Congress in held Boston.

The Australian delegation led by Andrew Peters and Aviva Rosenfeld on the Sydney 2008 stand, ensured that all 6400 attendees left the Congress with: an invitation to

attend Sydney in 2008, an updated knowledge of Australian facts and figures, a suite of tourism and Congress information brochures, a famous clip-on koala! and, for one lucky person a bottle of Penfolds Grange!

Located in the main thoroughfare/foyer of the Boston Convention Centre the 2008 Sydney Congress stand became a "must visit" stand for delegates once word had spread that they had an opportunity plan a visit to Australia and of course borrow a clip-on Koala or two. Importantly many delegates were genuinely interested in the opportunity to attend the Sydney Congress and present a paper, while combining a family holiday 'down under.'

The direct awareness campaign was most successful with over 5000 clip-on kolas and 5000 congress and tourism brochures distributed complimented by a number of roving Australian delegates eager to reinforce the message of visiting the Congress in Sydney 2008.

Particularly pleasing was the positive feedback and reinforcement received from the TTS Council who gave their imprimatur and acknowledgement of the planning that had already occurred for the Congress in Sydney. A presentation by the LOC to key sponsorship supporters was also very well received with this group of companies agreeing to a site visit to Sydney in 2007.

Special thanks is extended to all involved in the Boston Promotion, especially those Australian delegates to the Congress who made time to assist Aviva and Andrew on the promotional stand.

The work has only just begun to convince the transplantation community to support Sydney 2008, however given the positive reinforcement and willingness of delegates in Boston to embrace the Sydney Congress a large positive step has been taken.

As the large sign said to visitors leaving the Congress on the final day -

We look forward to seeing you in Sydney in 2008

If you would like the Sydney 2008 logo and advertisement slide to put on the end of your lectures – please contact Aviva tsanz@racp.edu.au or Felicity fkent@meetingplanners.com.au



TRAVEL GRANT REPORTS FROM THE WTC

I would like to thank TSANZ and Novartis for supporting my attendance at the 2006 World Transplant Congress held in Boston Massachusetts, USA. It was a pleasurable meeting with numerous research leaders presenting overviews in a range of different fields in transplantation. The conference continuously presented



research that was relevant to my recently completed PhD project (which focused on the transcriptomics of transplant tolerant models) and to my post-doctoral project (which involves the molecular analysis of the immunological synapse with a particular interest in inhibitory phosphatases). The presentations were all of high quality, in particular the sunrise symposiums were outstanding I found the plenary session, "What's Hot" (presented by Dr. Laurence Turks), particularly interesting as well as the state-of-the-art-symposia on B-cell immunology where Dr. John Monroe presented research on the differential cholesterol composition of membranes from B-cell subpopulations. It would be interesting to observe this effect in other subpopulations of T and B-cells as well as an in depth analysis of lipid composition in regulatory T-cells and memory B-cells to observe whether membrane fluidity is a function characteristic of these cells. I found the poster sessions very enjoyable and relevant to my PhD project, in particular the work presented by Dr. Steven Sacks' group on C3 involvement in transplant tolerant models. Attendance and presentation of my research at this meeting has given me an excellent overview in the field of transplant immunology, and will be invaluable in my scientific career.

Once again, I would like to thank the TSANZ and Novartis for their support.

Shaun Cordoba



Thank you to TSANZ for the opportunity to attend the World Transplant Congress (WTC) in Boston. The conference was well organised and a great experience with some excellent presentations relevant to my PhD research. It was great to have the opportunity to meet international delegates as well as mixing with the good showing of Australian delegates. The meeting program was extensive, and covered wide-ranging aspects of transplantation. My main interest was in the fields of xenotransplantation and ischaemia reperfusion injury (IRI), the main focus of my PhD. The highlight was having the opportunity to hear experts in the field namely Habib Rabb, and Dr Steven Sacks who provided excellent updates on IRI. There valuable insights assisted my oral presentation at ANZSN annual scientific meeting that followed shortly after the WTC meeting. Meeting other researchers in the same field and to receive feedback on my own work including advice to help with the future direction cannot be obtained in any other setting. As usual, one of the highlights was the, "What's hot and new in transplantation" presentations that covered basic science and clinical transplantation separately.

On the lighter side, the opportunity to hear Hilary Clinton speak was of interest. She spoke on the politics of stem cell research and research funding in the US. I also had an opportunity to visit Harvard to contemplate the possibility of post-doctoral research. I also enjoyed

encouraging foreign delegates to come to our shores in 2008 for the next WTC at our TSANZ booth that was diligently managed by Aviva.

Once again I would like to thank the TSANZ for the support in providing the opportunity to present my research at an international conference, to expand my knowledge of transplantation research, and to meet key speakers involved in this research. I look forward to completing my PhD thesis next year as I contemplate my future.

Sandra Crikis



I would like to sincerely thank TSANZ for providing me with a travel grant to participate as an oral presenter in the World Transplant Congress, held in Boston, USA in July this year. It was an unforgettable experience for me as it was the first international conference of organ transplantation I attended since I started my research work in the area of organ transplantation. Attending this conference has given me a good opportunity to present works I have done together with my colleagues here in Australia and, most importantly, I have learnt a lot from communicating with so many experts in this field.

One of the highlights during the conference that I was most interested of is ischemia reperfusion (IR) injury during organ transplantation. Particularly, novel therapeutic approaches against IR injury during organ preservation and transplantation procedure have been the topics of a lot excellent works presented at the conference. The fact that IR injury sustained by the donor organs during transplantation remains one of the determinants of early or later outcome of the transplanted organs has made it one of the most popular research targets in both animal model and clinical settings. Such is the complexity of the mechanisms that mediate IR injury, a better understanding of the molecular and cellular mechanisms of IR injury during organ transplantation will certainly benefit the development of treatment strategies targeting key issues in IR injury and therefore optimise outcome of organ transplantation.

Impressive achievements have been made in this area as were suggested by the works presented during the conference. Specifically, the importance of intracellular signalling pathways in the process of I/R associated organ damage has been studied extensively and the group of mitogen activated protein kinases (p38, JNK, ERK) has been found to play critical roles as were shown by results presented by Robert Sucher and his colleagues from Austria (Medical University Innsbruck). This may represent promising targeted therapeutic approaches against IR injury in the near future.

I presented at the conference the most recent work by our research group which is about the cardioprotective



effects of a specific PARP inhibitor DP264 during donor heart preservation in heart transplantation. I received very helpful comments and advices from the audiences which certainly will benefit our future work.

Ling Gao



I wish to thank the Transplant Society for the opportunity to attend this meeting. It was by far the largest Conference that I have attended. It had many concurrent sessions which gave a good choice of specialist areas to attend. I was pleased to be able to present our work on “Fetal pig pancreas fragment transplantation provides long-term normoglycaemia in adult Westran pigs”.

There were an impressive number of speakers from all areas of the fields of transplantation, which allowed for a varied and interesting program. Australia was strongly supported by a large number of attendees.

For me the highlights of the meeting were not only in the field of pancreatic and islet transplantation but included the Workshop sessions prior to the meeting held on Saturday and Sunday and the early morning Sunrise Symposia sessions during the meeting.

The Saturday Satellite symposia entitled “Advances in Xenotransplantation: Is the GAL Knock out pig essential to clinical success”, was a who’s who in Xenotransplantation with strong representation from Australia with Mauro Sandrin and Phil O’Connell giving two of the five presentations.

Mauro provided a most in depth and interesting talk on alpha Gal and its role and how that alpha Gal is in fact only one of five transferases that transfer galactose and he described their role in causing Hyper acute rejection in transplantation of pig tissue. Phil presented some impressive work from our collaborative NH&MRC/JDFI program grant on the role of alpha Gal in pancreatic islet cell Xenotransplantation and there were some interesting discussions following this. Bernard Hering from the University of Minnesota Diabetes Institute for Immunology and Transplantation gave an eloquent talk on the differences between solid organ versus cellular transplants. He once again discussed the issues of differential expression of alpha Gal on different aged pig donor tissue and emphasised the fact that older pig tissue has less alpha Gal expression and so is less prone to hyper acute rejection. Chris Larson from Emory University spoke about their xenotransplant studies performed at the Yerkes primate centre that were performed on Rhesus Macaques which received porcine neonatal islet cell clusters. They achieved long-term function by giving >50,000IEQ of NICCs/kg of recipient body weight using a novel immunosuppressive protocol.

Sunday’s workshop on New and Novel Surgical Techniques was also interesting and very informative. Santiago Horgan from the Uni of Illinois, Chicago spoke on laparoscopic robotic surgery. He described how there is an increase in the number of surgeons now using these devices to assist in surgery especially for donor nephrectomies. There are more than 450 surgical assist robots in USA operating theatres (they cost US \$1.2million each). They are predominantly in urology theatres. At his institution they perform two living donor kidney operations per day they had done 204 so far this year.

Rainer Gruessner from the Uni of Minnesota spoke on laparoscopic distal pancreatectomy for living donation in combination with a kidney for patients that are awaiting an SPK. The reason they suggested that can justify the use of such a technique is because of the large increase of patients on their SPK waiting list. This is increasing at a rate of 15% per year every year. The technique uses a hand assisted 6-8cm midline incision with a vacuum seal port. The technique is not without complication and they have had up to 10% of the donors that lose their spleens and some donor patients become diabetic! They perform ~140 pancreas transplants per year of the donors for these 140 transplants they had 4 that required insulin as a result of becoming diabetic from the procedure.

Another impressive talk was from Olivier Soubrane from Cochia Institute for the Liver, Paris. He presented on Laproscopic donor left lateral segmentectomy following significant work up of donor patients using ultrasound, MRI and CT mapping to produce computer 3D modelling. He presented the case study on 29 donors 19 male, 10 female to transplant 16 girls, 13 boys of approximately 18 months of age suffering form biliary atresia. The donor procedure takes up to 7 hrs to perform. They have had minimal complications in the donors but did have 5 biliary duct leaks which were corrected.

The Sunrise symposia were of major interest to a number of people including myself. I felt that these were the most informative sessions of the meeting. That was apart from the time I spent on the Australia stand handing out Koalas and meeting new and old friends.

The “Islets- Basic” session was one such session. Olle Korsgren from Stockholm gave a very evocative talk on Islet engraftment: beyond activation of complement and coagulation. His talk focussed on the potential of islet cell engraftment rather than being in the portal sinusoids they end up in the larger vessels of the liver such as in the portal vein where they cause backflow and vascular remodelling occurs. He postulated that the liver was potentially the wrong site for transplantation of islets. He quoted a number of papers including his own on alternate sites such as the muscle, kidney capsule, parathyroid, omentum and the spleen.



Ron Gill from the Colorado Islet Centre provided an insight into Allo versus autoimmunity in islet transplantation. Luca Inveradi presented on cytoprotective strategies in transplantation.

The largest islet transplant units presented their data which was a little disappointing in terms of long-term outcomes. James Shapiro from Edmonton showed that of the 90 patients now transplanted on average they required more than 12,000IEQs/kg recipient weight to gain insulin independence and then the patients on average only stay insulin free for a mean of 15 months. On the positive side more than 70% of the patients maintained C-peptide for more than 2-3 years.

The ITN islet trial had transplanted 36 patients with islets. Only 44% of patients (16/36) became insulin free even after 3 islet cell infusions.

Jose Corbualan from the Nordic Network demonstrated that the use of PFC was of no benefit in shipping of pancreata for islet isolation. He presented data on 214 donor pancreata. 107 in PFC and 107 in just UW solution and showed that UW alone had better static incubation results and larger islet yields.

In all this meeting was very enjoyable and I was able to gain a number of useful contacts through being able to network with people at the gaps between sessions whilst giving out Koalas and hats. The meeting was well organised and very informative but the lack of organised lunches and refreshments made the length of the days a little tedious. I am sure we will be able to organise an even more impressive meeting in 2008.

Wayne Hawthorne



WTC 2006 was the first joint international transplant meeting of the American Association of Transplant Surgeons, the American Society of Transplantation and The Transplantation Society, and was held in Boston, Massachusetts. With the generous support of a TSANZ Travel Award, I was able to attend this meeting and present two abstracts: one examining the use of hormone resuscitation in the organ donor and its effects on transplantable solid organs and the other on the use of cariporide and glyceryl trinitrate to reduce ischaemic-reperfusion injury in heart transplantation.

In a jam-packed meeting over four days, there were presentations that covered every conceivable aspect of transplantation. Over 6 000 people from the international transplant community attended the meeting that included 4 pre-meeting postgraduate courses, 8 pre-meeting symposia, 2 plenary sessions, 30 sunrise symposia, 34 state-of-the-art symposia, 100 concurrent sessions, 4 poster sessions (show-casing 1 840 posters) and numerous satellite symposia. Given the immense volume of work being presented at the meeting, it would be difficult to do justice to the depth and variety of the

presentations at the meeting but I will attempt to outline some of the highlights of the meeting from my perspective.

The meeting kicked off with Senator Hillary Clinton and NBA World Champion Alonzo Mourning addressing the opening ceremony. Alonzo's address was particularly interesting as he discussed his experiences with kidney disease (diagnosed after he won the gold medal at the Sydney 2000 Olympics with the US basketball team), resulting in having a kidney transplant in 2003, and his subsequent campaign to raise awareness and funding for kidney disease, along with his successful return to basketball.

There were many presentations during the meeting that had direct and indirect relevance to my areas of research such as donor brain death, organ preservation, the mechanisms of ischaemic-reperfusion injury and new therapies to combat these injuries, and a symposium on whether donor pre-treatment affects transplantation outcome. This symposium examined the ethical aspects of pre-treating donors, the mechanisms and experimental models for the effects of brain death and ischaemic-reperfusion injury in transplantation, the use of aggressive donor management protocols, the use of ex-vivo resuscitation of donor organs with warm blood prior to transplantation, and the role of donor pre-conditioning on transplant outcomes. Other topics presented at the meeting included: composite tissue transplantation (which included the scientific and clinical aspects of transplantation of the hand/s, face and larynx/trachea); organ donation after cardiac death and the use of extended criteria donors; the use of genomic and proteomic technology to identify "biomarkers" of rejection; waiting list and organ allocation issues; stem cells in transplantation; the role of the innate and the adaptive immune system, and T- and B- cells in ischaemic-reperfusion injury; and xenotransplantation. Also of interest were various presentations discussing the history and evolution of transplantation – both the scientific aspects of transplantation and clinical practice, some of which were presented by the "pioneers" of the field.

The final plenary session of the meeting was a very topical and thought-provoking session. There was a lively debate over whether donors should be paid for their organs. This was followed by a talk on the potential benefits and dangers of transplant tourism and the economic reality faced by donors in countries where paid donation is permitted. The concluding presentation of the meeting was about the World Health Organisation's perspective on transplantation.

Finally, I would like to thank the Transplantation Society of Australia and New Zealand for providing me with a Travel Award to attend this international meeting, and giving me the opportunity to present my work in an



international arena as well as to attend an intellectually stimulating and educational meeting.

Alfred Hing



I would like to thank the TSANZ for supporting me in attending the WTC in Boston, July 2006.

I was pleased to present photopheresis outcomes in what is, to my knowledge, now the longest and equal largest series of patients treated with photopheresis in renal transplantation. The questions after the presentation reflected a growing interest in photopheresis as an immunomodulatory therapy for solid organ transplantation. Further evidence on the possible tolerogenic properties of photopheresis was presented at the conference by the Rome group. Their clinical research showed T regulatory cells are induced by prophylactic photopheresis in renal transplantation and persist for at least 12 months. Further investigations of the role of photopheresis in solid organ transplantation are ideally performed with renal transplant recipients who, as a group, have established vascular access.

Tolerance continues to be an area of intense interest. The basic scientific research continues at a rapid pace. I appreciated the opportunity to present my work on phenotypic and functional aspects of CD4+25+ cells sourced from tolerant and naive models. Recent developments in translational research are particularly exciting and I especially appreciated the opportunity to hear preliminary reports from the Immune Tolerance Network and its components.

An overview of the aetiology of hypertension on graft outcomes as well as observational correlates of hypertension and poorer graft outcomes was presented. The intriguing question of cause and effect remains to be answered and hopefully the Australian-New Zealand trial designed to answer this question will be underway soon.

A recurrent theme throughout both the conference and the preceding post-graduate course was the aetiology and management of chronic allograft nephropathy (CAN) and the long term graft outcomes of calcineurin inhibitors. Frequent mention was made of the Australian contributions to this field, notably Martin Gallagher's work on outcomes associated with randomised withdrawal of cyclosporine and Brian Nankivell's seminal NEJM paper on the natural history of CAN. We also heard much on prednisone-free immunosuppression protocols. The use of steroid-free protocols in the US has risen exponentially over the past 3 years. Unlike the calcineurin story, most of the data presented was on short to medium term outcomes.

The initial plenary on angiogenesis presented by Professor Folkman provided a fascinating overview of a lifetime of work and was a great introduction to a successful conference. I would like to thank the Society

for their support in enabling me to participate in the meeting.

Meg Jardine



The Society generously provided a travel grant to fund my attendance at the World Transplant Congress held at the Haynes Convention Centre in Boston at the end of July 2006. This was a joint meeting of the American Society of Transplant Surgeons, the American Society of Transplantation and The Transplantation Society. The conference was attended by over 6000 delegates with in excess of 1200 oral and 3000 poster presentations. The venue and organization of the conference were of the highest standard and it was a genuine pleasure to have the opportunity to travel to such an event. The meeting was preceded by an excellent postgraduate course. This was not only an opportunity to refresh my knowledge of topics within my field of interest but also gain an introduction into new areas within transplantation sciences.

Each day of the conference began with a number of sunrise symposia which were a particular pleasure to attend despite the early start. I benefited greatly from attending the symposium on gene therapy in transplantation, which is a topic of relevance to my PhD. Of note was the presentation of Ignacio Anegón regarding the application of gene therapy technology to solid organ transplantation.

The plenary sessions were excellent, particularly the sessions highlighting the interplay of ischemia and reperfusion injury and subsequent alloimmunity. On that note a number of very interesting abstracts were presented indicating the protective effects of the inducible heat shock protein Heme Oxygenase-1.

The Congress was an excellent opportunity to cement relationships and collaborations with those working in my areas of interest and to identify new ideas and perspectives on my research. In conclusion, I wish to express my gratitude to the Society for providing me with a Travel Award to attend this international meeting and for the opportunity to present my work in an international arena.

Jerome Laurence



The WTC 2006 was an historic meeting in many respects, not least of which was the sheer number of attendees. The meeting began on a high and I particularly enjoyed the opening speeches by Senator Hilary Clinton and living-donor renal transplant recipient and basketball star, Alonso Morning.

I am very grateful to the Society for the opportunity to attend this meeting and present my findings on the role of IL-4 in the activation and maintenance of regulatory/suppressor T cells. Attending such a meeting



where the presentations and ideas are cutting-edge provides an incredible opportunity to get an overview of the current state of the field and new directions in research.

Among the more interesting talks was the plenary session by Dr Lawrence Turka on his assessment of "What's Hot" in Basic research. His predictions included Th₁₇ cells, Treg cells and innate immunity. The Sunrise sessions were among the most relevant and interesting in relation to my work, in particular the talk by Dr Randy Noelle on Negative Regulators. He described the involvement of mast cells in tolerance, findings which were recently published in Nature (Lu, L. *et al* 2006 Nature 442:997).

Other highlights of the meeting included the talk by Ran Toa from Wayne Hancock's laboratory on histone deacetylase inhibitors, which when combined with sub-therapeutic doses of Rapamycin led to the development of highly robust, Treg-dependent donor-specific tolerance. I also enjoyed the active discussions on the effect of different immunosuppressives on Treg number and function. I believe the bottom line was that Cyclosporine may, at certain doses, negatively affect the function of Tregs and this should be considered in protocols attempting to induce tolerance. CD4⁺CD25⁺ T regs could still be detected in patients treated with this immunosuppressive, however a key question raised and not fully answered was whether these cells were functionally impaired. I look forward to a continuation of this debate in the literature.

My sincere thanks for this wonderful opportunity.

Karren Plain



The TSS-Roche Award for outstanding achievement in Transplantation (Basic) was presented to Prof Lucienne Chatenoud for her development of humanised anti-CD3 antibodies for use in the clinic. Interestingly Prof Chatenoud's research has focused on the capacity of anti-CD3 mAb to prevent autoimmune diabetes in the NOD mouse, to rescue recent onset diabetic NOD mice from disease progression and to restore normoglycaemia. In that model, anti-CD3 mAb treatment resulted in long-term remission of diabetes, temporary loss of insulinitis followed by the eventual return of only non-destructive insulinitis and the restoration of immune regulation via TGFb-dependent regulatory T cells. In addition, anti-CD3 mAb-treated diabetic NOD mice demonstrated prolonged islet isograft function and protection from disease recurrence. Prof Chatenoud has recently undertaken a Phase 2 clinical trial in which 80 patients with Type I diabetes (T1D) and who had received insulin therapy for < 4 weeks, were treated with humanised anti-CD3 ab (ChAgly CD3;); six consecutive non-mitogenic, aglycosylated recombinant ab (human IgG injections of 8mg Ig/day) or PBS as a placebo. The anti-CD3 treatment resulted in transient T cell depletion and rapid

remission from clinical diabetes. In contrast to anti-CD3 ab-treated patients, the insulin requirements for the placebo group increased; by 18 months the mean insulin dose for the anti-CD3 treated patients was 0.22 IU/kg/day, compared to control patients who received a mean insulin dose of 0.61 IU/kg/day. Short-term treatment with anti-CD3 ab therefore preserved residual beta cell function up to 18 months in recent-onset diabetic patients. Re-activation of EBV was a transient side effect of the treatment which appeared 2-3 weeks after commencement of ab therapy. Ansari *et al* reported that treatment of NOD neonates and prediabetic NOD adult mice with anti-ICOS mAb prevented the development of autoimmune diabetes. However, anti-ICOSmAb therapy did not prevent recurrence of autoimmune disease in islet isografts or allografts in diabetic NOD hosts (in contrast to prolonged islet allograft survival in non-autoimmune recipient mice). In contrast, Zhang *et al* showed that isografts of islets from transgenic donor NODscid mice overexpressing M3 (a viral chemokine-binding protein) and transplanted to diabetic NOD mice survived better than control NODscid isografts; similar protection, was observed for transgenic islet allografts in allogeneic non-autoimmune hosts (\pm Rapamycin). Chemokine blockade therefore appears to be effective in providing moderate protection against both autoimmune and alloimmune islet damage.

Another focus of the congress was the role of regulatory T cells, particularly their localisation, for the induction of transplant tolerance. Bortecen *et al* reported that $1-4 \times 10^5$ *in vivo* generated CD4⁺CD25⁺ Tregs (post-DST + anti-CD4 mAb therapy) administered at the site of islet allotransplantation was approximately 4-fold more effective in prolonging graft survival, than systemic administration of Tregs; islet allografts survived for > 100 days when the lowest dose of Tregs were given at the graft site, but survived only for 19 days when the Tregs were administered systemically. Similarly, Zhang *et al* found that adoptively transferred naturally occurring Tregs marginally prolonged islet allograft survival and this effect was dependent on their capacity to express P-selectin ligand and to migrate to the allograft. Failure of Tregs from CD62L^{-/-} mice to enter host LNs did not inhibit graft prolongation. Taken together these studies indicate that Treg compartmentalisation determines their suppressive activity *in vivo*. Elpek *et al* reported that naturally occurring Tregs (which constitutively express 4-1BB, a member of the TNF receptor superfamily) can be expanded *in vitro* using anti-CD3, 4-1BBL and IL-2. This treatment also results in increased expression of Foxp3, GITR and membrane-bound TGFb. Adoptive transfer of syngeneic Tregs resulted in survival of 67% islet allografts for > 80 days. A reliable method for Treg proliferation *in vitro* may help to promote the feasibility of generating Tregs for clinical transplantation.

Charmaine Simeonovic





The World Transplant Congress 2006 was held at the Haynes Convention Centre in Boston and was attended by over 6,000 delegates from 85 nations. This was the first opportunity I've had to present at an international congress, which I found highly stimulating and fulfilling. However, with in excess of 1200 oral presentations in 14 concurrent sessions I found myself exhausted in efforts to attend every talk on my long list, particularly because we were not fed the usual 5 meals a day that we've been accustomed to at the TSANZ ASM.

The meeting was preceded with an excellent postgraduate course and opened by the former first lady and Senator Hillary Clinton, who gave an inspirational talk to rally support for a vote to overturn the president's recent veto on stem cell research. The opening sunrise symposium was particularly interesting for me, which focused on the recent advances in xenotransplantation biology. I was particularly impressed with the strong representation of Australian researchers in this field. This session was chaired by Ian McKenzie and opened with an interesting talk by Mauro Sandrin about non-Gal epitopes, and followed by an overview of the role of NK cell receptors in delayed xenograft rejection by Jorg Seebach. Jorg is a leading researcher in NK cell mediated cytotoxicity against porcine cells and I not only had the pleasure meeting the man behind the research, but was able to form strong collaborations. Peter Cowan concluded the session with an update on advances in transgenic CD39 expression and current issues in coagulation. The plenary sessions were excellent and I was impressed with the number of fellow TSANZ members presenting excellent work and having an impact on their field.

I would like to thank TSANZ for providing with a Travel Award to attend this meeting. It has been immensely beneficial by allowing me the opportunity present my work in an international arena, and the chance to meet and collaborate with world class researchers and I look forward to attending the next International Transplantation Congress in Sydney 2008.

Peter Tran



I would like to offer my sincere thanks to the *Transplantation Society of Australia and New Zealand (TSANZ)* for their generous support in the form of Travel grant, which enabled me to attend *'World Transplant Congress'* at Boston, Massachusetts from July 24-July 27, 2006. This was the 1st Joint International Transplant Meeting, a joint venture of *'American Society of Transplantation'*, *'American Society of Transplant Surgeons'* and the *'Transplantation Society'*. The meeting provided me an opportunity to exchange the ideas and appreciate the exciting discoveries in laboratories around the world. In addition to its academic relevance it also provided me an opportunity to visit this historic city of Boston.

I presented a paper entitled *'CD4⁺CD25⁺T suppressor cells induced by short-term culture with IL-2 or IL-4 and specific alloantigen have increased specific suppressive capacity both in vitro and in vivo'* in poster session.

Being a joint venture, the meeting covered a range of topics including both basic Sciences and clinical trials. Of particular interest to me were sunrise symposia on *'New co-stimulatory pathways'*, *'Gene therapy in transplantation'*, *'Novel mechanism of allograft rejection and tolerance'* and *'Harnessing T regulatory cells for in vivo immunotherapy'*. The talk given by Prof. Lauerence Turks on *'What's hot-Basic'* was very informative and interesting, I have learnt a lot in the sessions on *'Tolerance and T regulatory cells'* and *'Molecular basis of Treg induction and function'*, which have provided me new ideas and awareness to new techniques to incorporate in my studies. Other relevant sessions were *'Leukocyte trafficking'*, *'T cell activation and memory'* and *'lessons from autoimmunity'*. Presidential address and Awards session gave me an invaluable opportunity to witness the moments of honour the great scientists had for their contribution in the development of transplantation field.

Attendance and presenting my work at this meeting provided me a good opportunity to improve the knowledge in the transplantation field and to meet experts in the field. This will help me in planning future studies.

Once again I thank TSANZ for providing me this valuable opportunity to attend the meeting.

Nirupama Verma



I would greatly like to thank the Transplantation Society of Australia & New Zealand for providing me with travel support to attend the 1st World Transplant Congress, held in Boston, Massachusetts, USA in July 2006. This meeting was the first joint international transplant meeting, which encumbered the annual meetings of the American Society of Transplant Surgeons (ASTS) and the American Society of Transplantation (AST) along with the biyearly The Transplantation Society (ITS) meeting. As expected this was a huge meeting attracting approximately 6,500 delegates and almost as many abstracts. This meeting drew together experts from all disciplines relating to transplantation from across the globe. The meeting covered quite a diverse arrangement of topics from islet tolerance to microarrays in protocol biopsy to organ procurement to experimental liver transplantation. My interests were microarrays, but particularly in human kidney transplantation and general data analysis strategies.

There were two main reasons why I wanted to attend this particular meeting. The first was to present original work that is being generated during my PhD in the form of two oral abstracts, to a specific international audience. Both of these were on microarrays in human kidney



protocol biopsy. For one of the abstracts (Epithelial-Mesenchymal Transition and Chronic Allograft Nephropathy) I was awarded the TTS-Astellas International Young Investigator Award. The second and more important reason was to network, interact and learn from other expert scientists and clinicians in the field. This wealth of knowledge was quite evident by the quality of the posters and oral presentations at the meeting.

The meeting was held over four days, with a quite diverse arrangement of topics on each day. The main highlights for me from the conference proceedings were the symposiums on Acute Graft Rejection: New Insights, Immune Profiling and Molecular Diagnosis and Genetic Engineering, Genomics and Proteomics. These concurrent sessions consisted of molecular approaches and techniques used to investigate the various biochemical pathways and characteristics of transplantation. I found the presentations involving microarrays especially useful. These presentations gave me some new ideas and confirmed previous conceived ones on how to analyse and interpret genomic microarray data in the context of transplantation. They also helped me to make sense of some the anomalies in my own data that was causing many sleepless nights! I also found quite a bit of the work from Phil Hollaran's laboratory quite useful in relation to my own.

Another highlight, not usually mentioned in these reports, was the 'quick chats' in corridors and over a meal at the conference events which were quite useful. These intimate discussions were just as informative as the presentation themselves. I was able to discuss specific details and get little 'hints and tips' that make the research process smoother. I was also able to meet and discuss ongoing contacts and small collaborations with laboratories in Barcelona, Spain, and Basel, Switzerland.

In conclusion, I thoroughly enjoyed my time at the World Transplant Congress of 2006 in Boston, USA. The experience and knowledge gained from presenting and discussing my work and the work of others was priceless for the advancement of my career and PhD in research. Coming back from this meeting I now have many new ideas and better approaches on the old ones that will generally improve the quality and efficiency of my research, which is quite important for a young researcher. Thank you to the TSANZ and the committees for your funding support that had made it possible to attend this meeting.

Matthew Vitalone



I very much appreciate the Council of the TSANZ providing me the Travel Award, which has enabled me to attend the World Transplantation Congress held from 22nd to 27th July 2006 in Boston USA.

The World Transplantation Congress was well organized and more than three thousand abstracts had been collected for oral or poster presentation. In attending this conference, my abstract "Examination of the immune mechanism of spontaneous tolerance of renal allografts in a mouse model" was oral presented. Our study showed that the mechanism of spontaneous mouse kidney transplant tolerance is different from that of spontaneous rat liver tolerance which is depend on donor leucocytes and involves activation-associated deletion of recipient alloreactive T cells. The most likely basis of our mouse tolerance mechanism is the rapid appearance of Tregs in the kidney that does not appear to depend on classical Tregs that express CD25 and produce TGF- β . In addition to our mouse work, there were two posters those showed the mechanism of mouse organ transplantation tolerance, it allowed me a useful opportunity to exchange ideas with these investigators.

In addition, it was interesting to observe developments in an area in which I have been involved for some time, which is the effect of immunosuppressive drugs on transplant tolerance. There is an increase in research focusing on the study of optimizing immunosuppressive drug treatment in tolerance induction to obtain the optimal timing, concentration and type of immunosuppressive drug. Their findings are consistent with our previous study showing the effect of corticosteroid immunosuppression on rat liver allograft tolerance and rejection. A major focus of the meeting was on the role of immunoregulatory cells CD4+CD25+ T cell, as well as dendritic cells, and NK1.1 cells in tolerance. These areas, as well as blockade of costimulatory molecules with specific monoclonal antibodies to induce tolerance appear to be the main areas for transplant tolerance study. Gene therapy, stem cell transfusion also appears to be gaining acceptance in animal models as new strategies for transplant tolerance induction.

Finally, I would like to again thank TSANZ for the travel award, which made attendance at these conferences possible and has suggested new directions for my future study.

Chuanmin Wang



I am writing to express my appreciation in being able to present my research at the WTC meeting in Boston.

My abstract was part of the regulatory T cell oral symposia. My work covered Foxp3 transduced cells in transplant models. The work was well received with many questions related to the outcomes. The Hancock group also presented data on retroviral transduction with Foxp3 in a heart transplant model with results consistent with our data.



I was able to attend the basic science training course and heard excellent talks on mechanisms of regulation, memory, and co-stimulation.

I attended the basic science symposia with my main focus on talks presenting work related to regulatory T cells and dendritic cells.

I was able to see work from several key groups in this area including the Strom, Sayegh, Hancock and Turka laboratories that were relevant to my ongoing studies.

Of particular interest was the data on regulatory cell function and the role of co-stimulatory molecules and cytokines. New data was presented by the Strom laboratory on the use of the IL-15 agonist and IL-2 antagonist with very promising results in primate islet transplants. Other interesting talks included the role of mast cells and IL-9 in transplant tolerance by Randy Noelle.

I was also able to interact with a number of scientists in my area and this was of great benefit. Thank you for giving me this opportunity.

Debbie Watson



Congress 2006 in Boston Massachusetts. This was the first Joint International Transplant meeting involving the American society of Transplant Surgeons, The Transplantation Society and the American Society of Transplantation. My trip was facilitated by a travel grant from the Transplantation Society of Australia and New Zealand. Some of the highlights in the meeting were the opportunity to interact and exchange ideas with transplant professionals from all over the world. The post graduate course was of a high standard and good educational value, this gave me a broad update on what's happening in the rapidly evolving field of renal transplantation. Of special interest to me were the presentations on Chronic antibody mediated rejection and its role in the pathogenesis of transplant glomerulopathy. Papers presented included work done on the contribution of donor specific antibodies to this condition and the use of C4d staining as a diagnostic marker for antibody mediated rejection. These talks enabled me to better understand my area of research which is pathogenesis of transplant glomerulopathy.

I am grateful to the Transplantation Society of Australia and New Zealand for this opportunity.

Moses Wavamunno



Thanks to all TSANZ members, whose support, through the offering of a TSANZ travel award, enabled me to attend the World Transplant Congress in Boston this July. As the first joint international transplant meeting of The Transplant Society, the American Society of Transplantation and the American Society of Transplant Surgeons, it was the largest meeting of transplant

professionals ever held, with more than 6,000 delegates. This was also the first opportunity I had had to attend a US meeting to present my work, and my first time visiting the US, so I was really looking forward to the congress.

My first oral presentation was on the updated systematic review of IL2 receptor antagonists for renal transplant recipients, and was in the main auditorium, an enormous room, and certainly the largest I had ever spoken in. As the last presentation of the day, the crowd had thinned somewhat, but I was received well and faced several challenging questions before the meeting broke up for the day. Two days later I presented my poster on the validation of ANZDATA cancer data through audit and comparison with the NSW cancer registry. As the project was more far removed from clinical practice than the IL2Ra review I was sceptical it would draw much interest, but I arrived at the session to find 2 messages from interested delegates pinned to the board next to my poster, and had several more visit to question me about it.

The opening address by Senator Hilary Clinton was made to a packed auditorium: she was impressive and her vision of and commitment to supporting both biological and clinical medical research came through strongly. The rest of the congress program was wide ranging, and the symposia diverse. I particularly enjoyed the session on defining success in renal transplantation, and the debates on the ethics of organ trade. The latter was brought into even sharper relief by the week long presence of demonstrators at all doors of the conference centre who were members and supporters of Falun Gong, the spiritual organisation. The protesters alleged persecution of Falun Gong members, through incarceration and subsequent execution in prisons across China. The relevance to the conference was the use of these executed prisoner's organs to supply the domestic transplantation program and also, allegedly, the "transplant tourism" black-market. The WTC coincided with the release of a report by Canadian human rights attorney David Matas and former Canadian Minister of State David Kilgour entitled "Report into allegations of organ harvesting of falun gong practitioners in china"(see <http://www.davidkilgour.ca/>) which prompted global media coverage and subsequent statements from concerned societies and foundations across the world.

As a city, Boston didn't disappoint. The conference social program gave opportunity to network and to extend conversations beyond a snatched exchange in the conference hall corridors. We experienced the Boston harbourside with an evening at the aquarium, and the congress gala event was at the beautiful Quincy market, Faneuil hall, where among the packed food stalls, barbershop quartets serenaded the delegates. Two months after moving across the world back to the UK,



the familiar Australian and New Zealander faces and the prominent TSANZ presence at the stall promoting the next WTC meeting brought a smile to my face. Judging by the prevalence of small furry koalas clipped onto delegates name badges, I wont be the only one looking forward to Sydney 2008! Thank you TSANZ for supporting me.

Angela Webster



I would like to thank the TSANZ for supporting my travel to Boston for the First Joint International Transplant Meeting of the American Transplant Society and the International Transplant Society – World Transplant Congress 2006. This was a great opportunity for me to learn more about “cutting edge” research in transplantation.

The meeting program was extensive, and covered a broad range of topics in transplantation, both scientific and clinical aspects. In the basic science session, the role of the innate immune system in rejection, a link between innate and adaptive immunity, mechanisms of tolerance induction, and new therapeutics in transplantation were of particular interest for my current research. I also enjoyed the “what’s hot and new in transplantation” session in basic science presented by Laurence Turks, as a summary of areas.

My project involves investigating the link between innate and adaptive immunity in kidney ischemia reperfusion injury and kidney allograft rejection, particularly TLRs and NKG2D. This conference gave me the opportunity to present my research entitled “TLR4 activation mediates kidney ischemia reperfusion injury” in the session of linking innate and adaptive immunity, which was one of several sessions looking at the role of innate immunity in transplantation. I was pleased to be able to meet and discuss with so many experts in the field related to my current research.

Attendance and presentation of my work at this meeting has hugely improved my knowledge of transplant immunology. Once again, I would like to thank the TSANZ for their support.

Huiling Wu



I would like to thank TSANZ for providing me with a travel grant to attend the first joint meeting of TTS, ASTA and AST in Boston, USA in July 2006.

This was a magnificent conference with more than delegates attending the meeting. There were a lot of interesting presentations and lectures, and certainly to my research interest, one of hot topics was regulatory T cells (Treg cells). 2 symposiums, 6 oral concurrent sessions and 4 poster concurrent sessions were for Treg cells and Treg cell related research.

It is well understood that the key goal in clinical

transplantation is the induction of donor-specific tolerance to minimise the morbidity and mortality associated with long-term immunosuppression. It has been shown that Treg cells play a crucial role in the prevention of autoimmunity, and appear to mediate transplantation tolerance. However, harnessing Treg cells for potential adoptive cell therapy is hampered by their lack of antigen-specificity and their very limited number in peripheral blood. A number of studies to look for solutions to these drawbacks were presented at this conference, demonstrating promising data on expanding Treg cell and inducing them becoming antigen-specific Treg cells ex vivo for allotransplantation research. The ex vivo expanded and induced Treg cells showed great potential for clinical application in allotransplantation. Interestingly, no presentations on Treg cells in xenotransplantation research were given at the conference. This would provide us a big chance to achieve good results from our current Treg cell research for induction of tolerance to islet xenografts, which we have been carrying on for more than 12 months with some exciting results from both in vitro and in vivo models.

Attendance and presentation of my work at this meeting has extended my knowledge and vision in islet transplantation and transplantation immunology fields. It was also a great opportunity to be able to meet and talk with so many experts in the whole transplantation field.

Shounan Yi



MEMBERSHIP



New Members

Council welcomed the following new members:-

Dr Ananthkrishnapuram Narayanan Aravindan, Dr Swasti Chaturvedi,, Dr Suet-Wan Choy, Miss Melissa Craft, Ms Linda Goding, Dr Jessica Greenall, Dr Christopher John Hood, Dr Arlene Lamdan, Dr Niruj Obeyeseliere, Professor William David Rawlinson, Dr Parthasarathy Shanmugasundaram, Dr Ramyasuda Swaminathan and Dr Mirna Vucak-Dzumhur .

Council also welcomed the following new ATCA/TSANZ members:-

Ms Vanessa Jones, Ms Bronwyn Lloyd and Ms Francesca Rourke

Resignations

Resignations were received and accepted from:-

Dr Shafiqul Chowhury, Dr Erin O’Neill and Professor Barrie Vernon-Roberts.





SOCIETY AWARDS AND GRANTS

The Society, together with the generous support of Society sponsors, offers a number of awards and grants to attend the Annual Scientific Meeting and to attend relevant international meetings.

The awards currently available are:

- ❖ President's Prize at the ASM
- ❖ Kidney Health Australia Awards for the best clinical & laboratory presentations at the ASM
- ❖ Novartis and Wyeth Young Investigator Awards at the ASM
- ❖ Amgen Young Investigator Book prizes at the ASM
- ❖ Janssen-Cilag Travelling Fellowship
- ❖ Novartis, Roche and TSANZ Travel Awards to attend International Meetings



OTHER AWARDS AVAILABLE

Juvenile Diabetes Foundation Australia

The Juvenile Diabetes Foundation coordinates its research efforts through several types of funding grants, each contributing to the overall goal of eradicating diabetes and preventing its complications. Information regarding Program Project Grants, Research Grants, Career Development Awards, Postdoctoral Fellowships, Innovative Grants, Travel Grants and JDRF Summer Student Grants can be found on the JDRF Website www.jdrf.org.au or by contacting Chanelle Stowers - Ph: (02) 9966 0400 ext 201; Fax: (02) 9966 0172 or by email: cstowers@jdrf.org.au



Kidney Health Australia

Kidney Health Australia provides a variety of grants and scholarships to support individuals and groups in Australia undertaking research into the causes, prevention and treatment, including transplantation, of diseases of the kidneys and urinary tract. For information on all Grants and Scholarships contact Teresa Taylor Ph: (08) 8334 7555 Fax: (08) 8334 7540 Email: teresa.taylor@kidney.org.au Website: www.kidney.org.au

Free Information Line

Kidney Health Australia hosts a free information line for people with kidney disease. The free call number is 1800 682 531. For further information, please contact Janine Bevan – National Health Programs Unit Manager.



CALENDAR OF EVENTS

TSANZ MEETINGS

26 – 28 March 2007

Postgraduate Training Course of The Transplantation Society of Australia and New Zealand. University House, Canberra, ACT, Australia. The convenors of this course are Dr Karen Dwyer and Dr John Kanellis. For further information contact Aviva Rosenfeld

Phone: (02) 9256 5461 Email: tsanz@racp.edu.au

28 – 30 March 2007

25th Annual Scientific Meeting of The Transplantation Society of Australia and New Zealand. Australian Academy of Science, Canberra, ACT, Australia. The convenors of the meeting are Dr Shane Grey and Dr Martin Gallagher. For further information contact Aviva Rosenfeld

Ph: (02) 9256 5461 Email: tsanz@racp.edu.au

OTHER MEETINGS

28 October – 2 November 2006

ESF-EMBO Symposium on Stem Cells in Tissue Engineering – Isolation, Culture, Characterisation and Applications. Sant Feliu de Guixols, Spain.

Website: www.esf.org/conferences/lc06213

20 – 24 November 2006

Advanced Training Course on Transplant Coordination. Barcelona, Spain.

Phone: +34 93 403 7687 Fax: +34 93 403 9920

Email: tpmproject@fbg.ub.es Website: www.tmp.org

26 – 29 November 2006

Xth World Congress of the Middle East Society for Organ Transplantation. Kuwait.

Email: info@mesot2006.com

Website: www.mesot2006.com

26 November – 2 December 2006

The 3rd Australian Health & Medical Research Congress (AH&MRC)

Melbourne Convention Centre

Website: www.ahmrcongress.org.au/

25 – 26 April 2007

27th ISHLT (International Society for Heart and Lung Transplantation) Annual Meeting and Scientific Sessions.

San Francisco, CA, USA.

Phone: + 1-972-490-9495 Fax: + 1-972-490-9499

Email: lisa.edwards@ishlt.org Website: www.ishlt.org

5 – 9 May 2007

The American Transplant Congress 2007.



San Francisco, CA, USA. Phone: + 1 856 439 986
 Fax: +1 856 439 9982 Email: atc@ahint.com

15 – 20 September 2007

Joint Meeting with IXA, IPITA, CTS.

Minneapolis, MN, USA. Phone: +1-514-874-1998
 Fax: +1-514-874-1580 Email: info@fa-events.com
 Website: www.cts-ipita-ixa-2007.org

29 September – 3 October 2007

13th Congress of the European Society for Organ Transplantation (ESOT). Prague, Czech Republic.

Phone: +420-284-001-444 Fax: +420-284-001-448
 Email: esot2007@guarant.cz Website: www.esot2007.cz

9 – 12 April 2008

28th ISHLT (International Society for Heart and Lung Transplantation) Annual Meeting and Scientific Sessions.

Boston Marriott and Hynes Convention Center, Boston, MA, USA.
 Email: lisa.edwards@ishlt.org Website: www.ishlt.org

30 May – 4 June 2008

The American Transplant Congress 2008.

Toronto, ON, Canada. Phone: +1 856 439 9986
 Fax: +1856 439 9982 Email: atc@ahint.com

9 – 14 August 2008

International Congress of The Transplantation Society 2008. Sydney, Australia.

For further information contact The Meeting Planners
 Phone: +61 3 9417 0888 Fax: +61-3 9417 0899
 Email: tts2008@meetingplanners.com.au
 Website: www.transplantation2008.org

30 May – 3 June 2009

The American Transplant Congress 2009.

Boston, MA, USA. Phone: +1 856 439 9986
 Fax: +1 856 439 9982 Email: atc@ahint.com



TSANZ COUNCIL

President

A/Professor Philip O'Connell
philip_oconnell@wsahs.nsw.gov.au

President Elect & 2008 Meeting Coordinator

A/Professor Josette Eris
jeris@renal.rpsa.cs.nsw.gov.au

Honorary Secretary

A/Professor Frank Ierino
frank.ierino@austin.org

Treasurer

Dr Jonathan Fawcett
j.fawcett@mailbox.uq.edu.au

Clinical Training & RACP Liaison

A/Professor Steve Chadban
Steve.chadban@cs.nsw.gov.au

Chair, Standing Committees

A/Professor Peter Macdonald
pmacdonald@stvincents.com.au

Postgraduate Education, Society Liaison & TSANZ Representative on SAC

Dr Alex Sharland
asharland@med.usyd.edu.au

ATCA Representative & Communications Officer

Mr Adrian Sheridan
asheridan@arcbs.redcross.org.au

Executive Officer

Mrs Aviva Rosenfeld
tsanz@racp.edu.au

STANDING COMMITTEE MEMBERS

Chairperson – Peter Macdonald

Cardiac: Peter Macdonald
pmacdonald@stvincents.com.au

Cellular Transplantation: Kerry Atkinson
Kerry.atkinson@mater.org.au

Cornea: Steve Wiffen
wiffen@cyllene.uwa.edu.au

Liver: Stephen Munn
Smunn@adhb.govt.nz

Lung: Keith McNeil
Keith_McNeil@health.qld.gov.au

Paediatrics: Stephen Alexander
stephena@chw.edu.au

Pancreas: Jeremy Chapman
Jeremy_Chapman@wsahs.nsw.gov.au

Renal: Graeme Russ
Graeme.Russ@nwahs.sa.gov.au

Tissue Banking: Lyn Ireland
lyn@vifp.monash.edu.au

Transplant coordinators: Adrian Sheridan
asheridan@arcbs.redcross.org.au

Transplant Surgery: Richard Allen
rallen@med.usyd.edu.au

Xenotransplantation: Bernie Tuch
b.tuch@unsw.edu.au