

# Annual Report

## 2019-2020



# PATRONS



THE HONOURABLE  
KIM BEAZLEY, AC  
GOVERNOR OF  
WESTERN AUSTRALIA



PROF. GEORGE YEOH,  
BSc, PhD.  
PRESIDENT WA  
CANCER COUNCIL

I am proud to be Patron of the Lions Cancer Institute Inc – a project of the Lions Clubs in Western Australia delivering much needed support to health services in our State.

Since 1993 the Institute has screened over 75,000 patients for skin cancer. These important, and free, screenings have helped to detect significant numbers of life threatening lesions found for referral to the GP's of those respective patients.

The majority of these screenings are conducted in country areas by volunteer medical professionals where such services are few, or non-existent.

In addition to this on the ground work, the Institute also contributes to ongoing education with funding for PhD students in cancer studies at universities in Western Australia.

The Lions Cancer Institute has proven to save lives in our communities and will continue to do so with our support.

I see connecting members of the Lions Cancer Institute with cancer researchers as an important role I can play as a Patron of the organisation. In this regard I was pleased to initiate the initial contact between Phil Chinnery (Chairman) and Garry Irvine (Executive Director) and Associate Professor Nina Tirnitz-Parker that has resulted in the establishment of The Lions Lotus Scholarship that will support a postgraduate research student to work on liver disease and especially in relation to liver cancer. This is an area of research that will gain increasing prominence as lifestyle practices of excessive alcohol and caloric consumption damage the liver and commensurately increase the incidence of liver cancer.

I also communicated findings reported by a researcher Michael Philips from the Harry Perkins Institute and the Royal Perth Hospital to LCI staff who oversee the melanoma screening programme. Dr Philips has validated a pattern recognition application that utilises artificial intelligence and deep learning. Interestingly, this application DERM (Deep Ensemble for Recognition of Melanoma) detects melanomas using a smart-phone app. This has significant implications for delivery of screening to remote areas in Western Australia. The research is funded by the NHS in the UK.

Overall, my intent is to promote and enhance the good work that the LCI performs for the community at large and especially cancer researchers. It is an organisation of the people of Western Australia that works for the people of this state.

◀ COVER PHOTO:  
SCREENING EVENT CBH  
SILOS PINGRUP, 2019.

## BOARD OF DIRECTORS

### ELECTED MEMBERS

Lion Phil Chinnery	Chairman
PDG Pamela Baird	Vice Chairman
PDG Garry Irvine	Director PR / Business Development
Lion David Baird	Director Assistant Treasurer
Lion John Osborne	Director Screening Events Manager
Lion Mary Austin	Director
Lion Stephen Berry	Director
Lion Michael Wainwright	Director
Lion June Walker	Director

### APPOINTED MEMBERS

William (Bill) Crosthwaite	Secretary
PDG Neil F. Saunders	Treasurer
Dr Rob Fitzpatrick FRCS, FRACS	Chair Medical & Scientific Advisory Committee

### EX OFFICIO MEMBERS

DG Daniel Stevens	District Governor 201W1
DG Frank Camarri	District Governor 201W2
1 <sup>st</sup> VDG Michael Wainwright	1 <sup>st</sup> VDG 201W1
1 <sup>st</sup> VDG Dot Jacobs	1 <sup>st</sup> VDG 201W2
Lion Leonie Getty JP	District Chairman 201W1
Lion Dora Bushe-jones	District Chairman 201W2

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**Lions Cancer Institute Inc.**

ABN: 26 521 960 054



The Lions Cancer Institute Inc. is a "Not For Profit" medical research institution. The Institute holds an Endorsement from the Australian Tax Office as an income tax exempt charitable entity (ITEC) and is a deductible gift recipient (DGR).

The Institute holds a licence issued under the provisions of the Charitable Collections Act.

Auditor/Accountant is Dharam Ghandis, Auditax Accountants, North Perth WA.

Institute website: [www.lionscancerinstitute.org.au](http://www.lionscancerinstitute.org.au)

# CHAIRMAN'S REPORT



It is my pleasure to provide this report on the status and progress of the Lions Cancer Institute Inc. over the preceding 12 months.

## SKIN CANCER SCREENING

The Lions Cancer Institute Inc. commenced its screening program in 1990 and has conducted skin cancer screenings continuously, operating as the Lions Cancer Institute Inc. It has screened in the order of 90,000 people in that time, all over Western Australia.

The Project is going from strength to strength with an increasing number of requests by both Lions Clubs, other community organisations and businesses seeking skin screening services. The support of the Western Australian Chapter of Dermatology and several GP's combined with our fully trained Dermoscopists and Nurses has once again allowed an increase in the number of screening this year.

The Institute has a formal agreement in place with HealthCert Queensland, which is University based to provide a Certificated course in Assessment and Diagnosis of skin cancer lesions. By having newly trained Screeners able to go out on screening events relieves those that have carried the load over many years.

You will read more about our work on screening in Screening Event Manager Lion John Osborne's report elsewhere in this document.

## RESEARCH

The Institute is continuing to support through the Karen & Joshua Chinnery Scholarship, two PhD students attending Curtin University. Jade Newton is part funded by the scholarship for a further 2 years, Lelinh Duong will complete her studies this year. Medical Director Rob Fitzpatrick will maintain contact with them during their time under the scholarships.

The Lions-Lotus PhD Scholarship, fully funded by The Lions Cancer Institute is based in the Curtin Health Innovation Research Institute (CHIRI), at Curtin University.

A successful candidate has been selected and will commence a three-and-a-half-year course from August this year in the study of prevention and treatment of liver cancer. This association with Curtin means Lions Clubs in WA will now be able to visit the CHIRI by appointment and see firsthand the work being undertaken by researchers.

## PATRONS

I am pleased to advise we have now a second Patron, The Honourable Kim Beazley AC, Governor of Western Australia. The Governor joins Patron Professor George Yeoh, a distinguished researcher having spent most of his professional life in the study of cancer, most particularly seeking a cure for liver cancer.

## INSTITUTE MANAGEMENT

Throughout this annual report you will also read reports from our Treasurer, PDG Neil Saunders, PR & Business Development Director PDG Garry Irvine, Skin Cancer Screening Events Manager Lion John Osborne, Medical Director Rob Fitzpatrick FRCS, FRACS -Plastic Surgeon (Retired) and our current PhD students.

The Institute is well served by a Board consisting of Lions Club members and willing Volunteers, both in the administration of the Institute and on our skin cancer screening events throughout the State of Western Australia. To you all I offer my sincere thanks for your dedicated involvement.

■ Lion Phil Chinnery—Chairman



▲ LIONS CANCER INSTITUTE MOBILE SCREENING VAN EN ROUTE TO PINGRUP, 2019



▲ LIONS CANCER INSTITUTE MOBILE SCREENING VAN SETUP AT MINGENEW, 2019



▲ LIONS CANCER INSTITUTE MOBILE SCREENING COACH EN ROUTE TO CARNAVON, 2017



▲ LIONS CANCER INSTITUTE MOBILE SCREENING COACH SETUP AT LEDGE POINT, 2019



It is my pleasing duty to report on the progress of the Board in respect of my portfolio of Business Development Director and despite the challenges of a pandemic our time spent has produced a number of benefits.

## PHD SCHOLARSHIPS

With business closures around the nation our fundraising team has still been able to keep income flowing, albeit reduced heavily but sufficient for us to meet our commitment to the Lions-Lotus Scholarship involving research into liver cancer and to the Karen & Joshua Chinnery Scholarship supporting research into selected areas of the disease including melanoma, undertaken by very talented Students at Curtin University.

## NATIONAL SCREENINGS EXPANSION

It is the intention of our Board wherever possible in Australia to encourage Lions Districts to expand the free skin cancer project and we are encouraged very much by the developments in Victoria where they will launch their programme in 2021. This now expands the existing screenings beyond WA, SA & NT to Victoria with the added excitement of having recently received interest from a Qld Club to establish a service there.

## NEW ZEALAND LIAISON

We are very fortunate to have the enthusiasm of Paul O'Connor MBE who is currently the District Governor of his District in the South Island of NZ as our contact and he has produced a document outlining his goals for other Districts to join him to get NZ to become involved. A Report to their Council of Governors on that progress will be submitted in November. We will continue to offer every request for assistance to help with getting free skin cancer screenings for all New Zealanders.

## PR & MARKETING

Regular articles are produced for the Farmers Weekly which keep our regional communities informed around our activities and direct them and others to our website for updates on locations and dates of our screenings within the State. Another event which will be repeated on October 21st will be a screening at Parliament House, this has allowed us to focus media support towards the important challenge of skin cancer and its early detection.

## CORPORATE INVESTORS

The Board has progressed a plan to seek an Investor/ Investors to enable the replacement of ageing Units, our Coach is the urgent challenge as it was born in 1987 so it is obvious that with more considerations arising around needs to have this service available to all community groups we intend to have the most modern facilities within any screening unit's design.

## ANNUAL KIDS DAY OUT

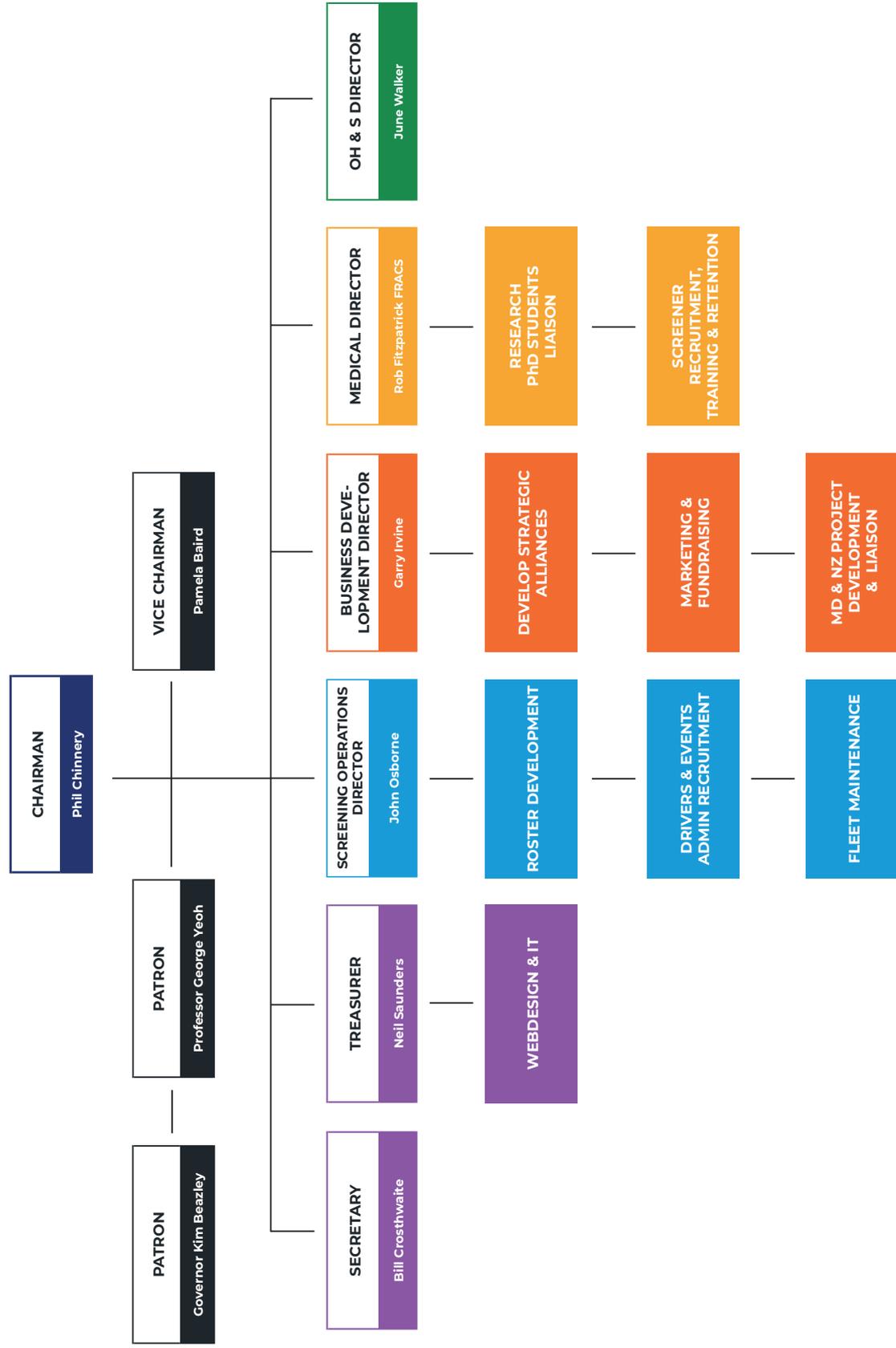
Each year we experience the attendance at this Event of a large number of children who have special needs, Santa attends with a raft of presents and together with their Carers and Parents they all enjoy a premiere of a kids movie and a wonderful day out. The Event is promoted by our telemarketers to all the wonderful donors who support us in what we do to save lives by the early detection of life threatening skin cancers and by targeted research into the disease.

Finally the Category "B" Project in its present format is non-compliant with the MD Constitution that requires it to be managed by a Club or a District. After discussions with S.A. and Victoria it is my recommendation that we step back and let S.A. reapply for renewal with their District to manage it. We will still retain the association with the current Districts and any later additional districts by way of MOU's.

■ Garry K Irvine PDG



# ORGANISATIONAL CHART



# MEDICAL DIRECTOR'S REPORT



## **WHO WOULD HAVE THOUGHT THAT OUR PROGRAM WOULD SO SEVERELY CURTAILED BY A PANDEMIC OF SEVERE NATURE?**

We have picked up from where we left off in early March, restarting our screening program at Salmon Gums in late August. A lot of thought and planning has been done to reignite the program and enable both the screeners and patients to be in a safe environment.

After consulting various Health Authorities, a series of questions, temperature testing, hand sanitizing, cleaning and social distancing has been implemented so the program can continue. This appears to be working with little disruption to the events. Overall, for the year there has only been about a 20% drop in the numbers from the previous period.

The number of trained screeners is gradually increasing but due to lack of exposure there have been a dearth of new volunteers. The screeners who have recently passed their theory exams need practise and therefore need to be supervised. Unfortunately, there are very few of the medical profession who have given up their time to help this worthy cause.

Referral rates remain reasonably stable and the proportions in the different districts are also consistent. I have been with the teams over 27 years and I still find that people do not know about different skin cancers. Many people think that all skin cancers are melanomas. Melanomas account for most skin cancer deaths but compared with basal cell carcinomas are a minority. We still find lesions that the patient and the GP had not noticed. Although we aim to refer patients with suspicious lesions, it is important to educate them also in prevention and detection.

We have established a testing regime to keep the screeners up to date and are in the process of establishing an electronic communication line with health professionals.

It is important to obtain feedback from GPs and specialists to enable quality control of our service.

We look forward to a better climate to screen in with more screeners and less Covid.

■ **Robert Fitzpatrick FRCS, FRACS—Plastic Surgeon (Retired)**



# SCREENING EVENTS MANAGER REPORT



Screening Events Manager The years screening program commenced with a circuit of the Goldfields including the locations of Menzies, Laverton, Leonora, and Leinster. Southern Cross and Merredin were screened on the return leg. The wheatbelt screenings followed with events at Narembeen, Bruce Rock, Corrigin, York and Northam, Kondinin, Hyden, Kulin, Dumbleyung, Lake Grace, and Pingrup. Screenings were also carried out at ECU, South Perth and Leschenault. Hopetoun, Esperance, Salmon Gums, Norseman, and Nova Nickel mine screening events were planned however Hopetoun was the only event completed as equipment breakdown at Norseman prevented completing the program.

On returning to Mandurah mid - March the screening program was suspended in response to Coronavirus Covid-19.

We acknowledge the assistance received from Lions Clubs, CWA, Men's Sheds, CRCs, and Community health organisations in hosting and promoting the Screening events in their towns.

The Free Skin Screening in the regional areas would not be possible with out the generous help from our team of Volunteers. Their freely given time enables us to provide this much needed service to the rural and remote areas of our state. Thank you to the screeners, drivers, and administrators.

## Plant and equipment

### COACH

Loss of coolant caused by Internal failure of water jacket O rings required the coach engine to be removed and rebuilt.

Planned maintenance performed during the year included renewal of suspension and steering components,

### HINO

No major maintenance issues during the year.

### VAN

Part of floor replaced due to water damage. Main power cable was replaced, and main circuit breaker installed.

■ John Osborne—Screening Events Manager

NB: all figures below are for the 01/07/2019 - 30/06/2020 period.

# 2410 TOTAL SCREENED

Number of Referrals	424
% Referred	18%
Life Threatening Lesions	363
Screened less than 6 months	93
Screened 6 - 12 months	313
Screened over 12 months	1170

# 817 NEVER SCREENED

Number of Locations	34
Days Screening	40
Hours Screening	1066

# 8507 KM TRAVELLED

02 AUGUST 2019

## New Curtin scholarship to help improve outlook for liver cancer patients

Curtin University and the Lions Cancer Institute Inc. have announced a new PhD scholarship that aims to improve the outcomes of people living with liver cancer around the world.

The Lions-Lotus PhD Scholarship has been fully funded by the Lions Cancer Institute and will be based in the Curtin Health Innovation Research Institute (CHIRI) at Curtin University.

The scholarship recipient, who will be supervised by Associate Professor Nina Tirnitz-Parker from CHIRI and Curtin's School of Pharmacy and Biomedical Sciences, will conduct cutting-edge research dedicated to the prevention and treatment of liver cancer.

CHIRI Director Professor John Mamo said the new scholarship would assist in tackling a major global disease affecting thousands of Australians every day.

"The new scholarship will attract high-quality PhD

candidates, who will undertake research focusing on addressing important research questions about chronic liver disease and liver cancer," Professor Mamo said.

"I would like to thank the Lions Cancer Institute for their funding commitment to this highly important scholarship and look forward to welcoming the successful recipient to Curtin University."

Associate Professor Nina Tirnitz-Parker, an internationally recognised expert in chronic liver disease and cancer, said chronic liver disease was one of the most rapidly growing causes of death worldwide and continued to present a major global challenge.

"Current treatments for liver cancer are limited and at present only prolong the life expectancy of patients by two to three months. The new scholarship will help to tackle this growing problem by researching how to better identify and treat the disease, which in turn may improve outcomes for people living with liver cancer," Associate Professor Tirnitz-Parker said.

The Chairman of the Lions Cancer Institute Mr Phil Chinnery said he looked forward to visiting Curtin University and seeing first-hand the work being undertaken by researchers.

"On behalf of our Directors and our WA Lions Clubs, we are both excited and delighted to have formed this partnership with Curtin University and their brilliant research team in the fight against cancer and more specifically liver disease," Mr Chinnery said.

The new agreement, signed yesterday, will fund a full PhD scholarship for up to 3.5 years and will be available to domestic PhD students in Australia. The successful recipient will commence at Curtin in late 2020 or beginning of 2021.



▲ CURTIN UNI INAUGURAL LIONS LOTUS PhD SCHOLARSHIP STUDENT NATHAN MAIN



*I would like to thank the lions cancer institute for their funding commitment to this highly important scholarship and look forward to welcoming the successful recipient to Curtin University.* ”

- Professor Mamo

CURTIN UNI MEETING - FROM LEFT TO RIGHT:  
PROFESSOR ELIZABETH WATKIN (DEPUTY HEAD SCHOOL OF PHARMACY AND BIOMEDICAL SCIENCES), PROFESSOR GEORGE YEOH (YOUR PATRON), PROFESSOR JOHN MAMO (DIRECTOR OF THE CURTIN HEALTH INNOVATION RESEARCH INSTITUTE), PROFESSOR LINDY FITZGERALD (DEAN OF RESEARCH FACULTY OF HEALTH SCIENCES), ASSOCIATE PROFESSOR PIETER EICHHORN (RESEARCHER AND PhD SUPERVISOR OF NATHAN MAIN), LION GRAHAM BATEMAN, NATHAN MAIN (LIONS LOTUS PhD SCHOLARSHIP RECIPIENT), LIONS TREASURER PDG NEIL SAUNDERS, ASSOCIATE PROFESSOR NINA TIRNITZ-PARKER, LIONS PDG PR CHAIRMAN GARRY IRVINE, DISTRICT GOVERNOR DOT JACOBS, MEDICAL DIRECTOR ROB FITZPATRICK, SECRETARY BILL CROSTHWAITE, CHAIRMAN PHIL CHINNERY, PROFESSOR PETER LEEDMAN (DIRECTOR OF THE PERKINS INSTITUTE).



"INVESTMENT OPPORTUNITY" DONATION BOOST CAMPAIGN, 2020

## Investment OPPORTUNITY

## INVESTMENT OPPORTUNITY

This Non-Profit Business Partnership with:

- Support the Student research funding into Cancer, specifically Liver and
- Your Company logo will appear as a body wrap on our Screening Unit as shown on pages 14-15.
- Add further awareness of your Company to Products and Services to an average of 60 locations annually in WA.

Up to 4 x 30mtr Investment per annum (3 Company staff only) they need to be screened (Preferential sites are Perth City & 2 and Regional areas & 2 in conjunction with you)

8 FREE tickets to an Annual Dinner with Presentations to Research Students (2) with your Company Name and Logo on invitations.

Your Company logo added to 4 x 4 Farms, Weekly articles

Your Company logo will be added to our Facebook and all our website pages.

Washly articles

## WHY WE NEED YOUR HELP?

## HOW YOUR INVESTMENT COULD LOOK?

### YOUR BRAND SIGNAGE HERE

**THE BEST MOBILE ADVERTISEMENT IN THE STATE!**

- Kim Traveled:** 1,773/year
- Towns Visited:** Average of 40 locations/year (Just south of their covered for 20kmtr/mo)
- Towns Crossed:** More than 500 locations/year (drive through or stopped for 10mins)
- Person Screened:** Average of 3,000/year
- Brand Awareness:** 20,350 vehicles drive passed per year

## OUR COACH SPECS

Manufactured in 1996

History: Jennifer McCaffrey Owned

Converted to a screening coach in 2011

Odometer: 140,000 km

Cost in Fuel: \$7,978/year

Maintenance Cost: \$5,000/year (averaged over 5yrs)

Breakdown: 500 mtr/year

**Safety & Usage:**

- No lift platform for disable access
- Non-modular build work environment
- Unreliable & unsafe coach chassis

## What is that HARD, RED SCALY SPOT?

Solar Keratoses commonly referred to as sun spots.

- Usually found on sun exposed areas of skin
- Common on neck, head, arms, face and back of hands
- Sun damage caused by excess sun exposure
- A sign that skin cancers may be developing
- Can be easily treated (visit your GP)
- Ensure that you protect the area from further damage
- Ongoing regular skin checks essential

For all Enquiries visit our website [www.lionscancerinstitute.org.au](http://www.lionscancerinstitute.org.au)

The Lions Cancer Institute Inc. is a Registered Charity and all donations are Tax Deductable.

Funds raised will assist with the on-going cost of providing FREE SKIN CANCER SCREENINGS throughout Western Australia.

**ALL MAIL TO**  
The Lions Cancer Institute Inc.  
PO Box 3392  
Marrickville NSW 1543  
secretary@lionscancerinstitute.org.au  
02 9514 1010

**OR CONTACT**  
The Chairperson  
PO Box 3392  
Marrickville NSW 1543  
02 9514 1010

Lions Cancer Institute Inc.

"HARD RED SCALY SPOT" FLYER 2020 NEW DESIGN

Lions Cancer Institute Inc.

For all Enquiries visit our website [www.lionscancerinstitute.org.au](http://www.lionscancerinstitute.org.au)

"SCREENING CARD" 2020 NEW DESIGN

**NAEVI**  
Commonly referred to as a mole. Often asymmetrical in shape with indistinct edges. Frequently variegated various shades of brown, red, or black. May have clinical features in common with a melanoma.

**BASAL CELL CARCINOMA**  
The most common type of skin cancer which many Australians will get. Red pearly in colour it may be scaly. If left may behave like an unhealing sore or may appear to heal and then return. Grows slowly, usually on face, neck and upper trunk.

**SQUAMOUS CELL CARCINOMA**  
Dangerous but not as dangerous as the melanoma. Can spread to other parts of the body. Looks like a thick red scaly spot that won't heal. May ulcerate and bleed. Usually affects the exposed parts of the body, particularly the face and head.

**MELANOMA**  
The most dangerous skin cancer. If untreated may spread to other parts of the body. If treated early in many cases is completely curable. Usually appears as a new spot or mole or freckle that changes shape or size. Often has smudgy edges, more than one colour and irregular border. Can appear quite quickly on any part of the body.

**Skin SPOT CARD**



### PROJECT TITLE

Are Western Australian advanced cancer patients' psychosocial support needs being met? A mixed methods investigation of the provision and utilisation of psychosocial support for advanced cancer patients with non-haematological malignancies.

### SUMMARY

Some people are diagnosed with cancer that has spread to other parts of their body and they are not able to be cured. This is 'advanced cancer'. We don't know a lot about how people with advanced cancer manage the emotional and social (or, 'psychosocial') impact of their diagnosis, and how available support affects their experience.

This project will explore what psychosocial support people with advanced cancer use, how it impacts them, and the costs and benefits of using psychosocial supportive care. This will be achieved by looking at what research has been done in this area [study one], interviewing people with advanced cancer to learn about their experiences [study two], and undertaking a cohort study, where we will survey patients over several months to look at their needs, distress, and support services used over time [study three].

Understanding the needs and service use of people with advanced cancer will help to make sure we are providing the best support to lessen the distress and suffering they may experience.

### PROJECT UPDATE - JULY 2020

Study one is underway. I have finished searching the literature, and am currently reviewing guidelines and previous research that has explored the how support is provided to cancer patients.

Data collection has been completed for study two. Twenty-three people living with advanced cancer kindly shared their experiences living with their diagnosis, and discussed the kinds of support they have needed and used. Interviews were completed at the participants' convenience, at home, over the phone, or at hospital during treatment. We found that in Western Australia, whilst there a lot of resources available to support people, they were not always available for people with advanced cancer. Some participants experienced barriers to support including suitability of support (e.g. face-to-face support vs. phone based), distance needed to travel to get to support services, availability of health professionals such as social workers, and ability to access financial support. A short report will be prepared to share these findings with local support services, so that they are able to address these barriers to support. This research has been accepted for a poster presentation at the upcoming NVivo Virtual Conference, which will be online due to the pandemic. A paper describing participant experiences accessing support services is also being finalised for submission to an academic journal.

Study three is still in the planning stages and we need to apply for ethics approval prior to commencing the study.

■ Jade Newton—PhD student from The Curtin University

# PHD STUDENT'S SECOND REPORT



## INVESTIGATING HOW KEY IMMUNE CELLS, KNOWN AS MACROPHAGES, CONTRIBUTE TO TUMOUR GROWTH IN THE ELDERLY AND IMPAIR RESPONSE TO THERAPY

### Background and Aims:

Cancer incidence and severity increases with age. It is estimated that people aged 60 years and older account for 86 percent of cancer-related deaths (Australian Institute of Health and Welfare, 2019). However, the elderly population are often overlooked in pre-clinical studies and cancer treatment options are limited and may not be effective. Therefore, there is a crucial requirement for better therapeutic options for elderly cancer patients. Many studies suggest that the impairment of the immune system with ageing may contribute to poorer anti-cancer outcomes in elderly people. Macrophages are an immune cell type which can help fight cancer cells. However, macrophages can be easily persuaded to help tumours grow. Many tumours can be made of up to 50 percent macrophages and the number is associated with poor clinical outcome. Currently, very few studies have looked at the effect of ageing on macrophages in the tumour.

My project aims to 1) investigate the mechanisms that cause a key immune cell, called a macrophage, to become more tumour-promoting with age. 2) These components will be targeted with therapeutic drugs in hopes to restore immune balance and improve anti-cancer responses in the elderly.

### SUMMARY OF FINDINGS

#### Aim 1

Using a mouse model of mesothelioma and lung cancer, my research has identified changes to communication molecules inside macrophages found in the tumour, that are instrumental in ageing and cancer. These molecules can guide the function of macrophages, such as promote tumour growth and contribute to inflammation in the tumour. We found that as tumours progressed, the activity of these communication molecules increased. This occurred faster in the elderly, which may explain why we see faster tumour growth in the elderly compared to young

hosts. Importantly, these molecules are promising targets to potentially restore immune balance and improve anti-cancer outcomes in the elderly.

The findings from aim 1 were presented at several local and national conferences and won the following awards:

1. Overall Poster Award at the 48th Annual Scientific Meeting of the Australian and New Zealand Society for Immunology, Adelaide; 12th December 2019
2. BD Science Communication Award at the 48th Annual Scientific Meeting of the Australian and New Zealand Society for Immunology, Adelaide; 12th December 2019
3. Champion Ma Playoust Memorial Award at the Australian Society for Medical Research 58th National Scientific Meeting, Fremantle; 21st November 2019
4. Prize for best oral presentation at Mark Liveris Seminar, Curtin University; 27th September, 2018
5. Best Student Oral Presentation at the WA Combined Biological Sciences Meeting, University of Western Australia; 31st August, 2018

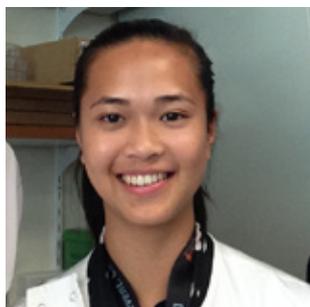
#### Aim 2

In recent experiments, we blocked the communication molecules identified in Aim 1 using drugs already approved for clinical use. Our initial findings show this to be effective in slowing tumour growth in the elderly. Next, we will validate the findings and expand this work to confirm the drugs are indeed targeting the impaired macrophages and inhibiting their ability to promote tumour growth.

#### Significance

So far, the findings from this research have advanced our knowledge of cancer progression by identifying some of the mechanisms involved. Furthermore, we have identified promising therapeutic targets that can potentially improve anti-cancer outcomes for elderly people. This project aims to help guide future cancer research to ultimately improve anti-cancer outcomes, such as slow tumour growth, improve response to therapies, and increase survival for people with cancer.

■ Lelinh Duong—PhD student from The Curtin University



### OVERVIEW OF MY PHD PROJECT

My PhD research focuses on testing a new drug therapy, called prexasertib (LY2606368) for treatment of the most lethal human brain tumour, glioblastoma. The current treatments for glioblastoma include surgery, radiation therapy and a chemotherapy called temozolomide. These treatments are not curative and patient survival is still very poor with a median survival of 12 to 15 months from diagnosis. A reason for these treatments not being curative is that glioblastoma cells having the ability to withstand the effects of radiation therapy and temozolomide.

My PhD research involves testing prexasertib in combination with radiation therapy or temozolomide, or another chemotherapy called gemcitabine, in hope that it will improve patient outcomes and prolong survival.

### RESEARCH AIMS

1. Determine whether prexasertib will interact together with the current treatments of glioblastoma.
2. Explore the mechanism in which prexasertib helps to improve tumour cell death.
3. Examine whether combining prexasertib to radiation therapy or chemotherapies such as temozolomide and gemcitabine will prolong survival.

#### AIM 1

Determine whether prexasertib will interact together with the current treatments of glioblastoma.

#### Findings

We have shown that prexasertib causes a reduction in glioblastoma cell growth. More importantly, prexasertib worked together with radiation therapy or temozolomide or gemcitabine and that combination therapy further reduced glioblastoma cell growth.

#### Significance

This study shows that prexasertib works well with existing glioblastoma therapies and helps to kill more glioblastoma cells.

#### AIM 2

Explore the mechanism in which prexasertib helps to improve tumour cell death.

#### Findings

Protein analysis, confirmed that prexasertib stopped

the activation of the protein called cell cycle checkpoint kinase 1/2. This protein is overactive in cancers and aids in protecting cancer cells from the effects of radiation therapy and chemotherapy. We also demonstrated that prexasertib in combination with radiation therapy, temozolomide or gemcitabine increased the number of dying glioblastoma cells by causing unfixable damage to DNA.

#### Significance

These experiments help us understand how the prexasertib works to enhance glioblastoma cell death.

#### AIM 3

Examine whether combining prexasertib to radiation therapy or chemotherapies such as temozolomide and gemcitabine will prolong survival.

#### Findings

Using three different glioblastoma cell lines, we implanted these cells into the brains of mice. The combination treatment of prexasertib with radiation therapy, temozolomide or gemcitabine reduced tumour cell growth and increased tumour cell DNA damage. Using our mice models of glioblastoma, we have also shown that combining prexasertib to radiation therapy, temozolomide or gemcitabine significantly extend survival when compared to single therapy.

#### Significance

Prexasertib is currently in clinical trial for other solid tumours such as ovarian, breast and most importantly paediatric brain tumours. The data collected from this project has helped to establish a clinical trial proposal that was presented to The Cooperative Trials Group for Neuro-Oncology (COGNO).

### WHERE AM I NOW

- I am currently writing up my thesis with a planned submission for November 2020.
- I have also started looking for employment in research in Perth.
- My PhD supervisors and I will also be writing up all this data and submitting a published paper in the Special "Glioblastoma" Issue with MDPI (Multidisciplinary Digital Publishing Institute). We expect the paper to be published in mid-2021.

■ Tracey Seymour—PhD student from The University of Western Australian and Telethon Kids Institute

# TREASURER'S REPORT



Despite the dramatic downturn in operations and income due to COVID-19 the Institute has had a successful year.

As per previous years, our operating costs exceeded our operating income, received from Clubs and other donations.

Our Fundraising activities, the best return to date, have helped us refrain from having to use any of our investment income, which is allowing the Portfolio to continue to grow towards a target where we hope to be financially independent.

## PORTFOLIO

Our Portfolio managed to continue to grow, despite negative Changes in Market Value, due to market fluctuations caused by Covid-19. As agreed by the Directors, we continued to make cash contributions to assist with the growth of the Portfolio. In all we contributed an additional \$65,000.00 to the Portfolio. These contributions were stopped at the end of March, due to the uncertainty of our future cash flow.

Our Asset Class distribution, as at June 30th consisted of:

	2020	2019
Cash	36.90%	29.10%
Australian fixed interest	14.00%	13.40%
Global fixed interest	12.00%	11.10%
Property	04.00%	05.10%
Australian Shares	16.20%	22.20%
Global Shares	16.90%	19.10%

## OPERATIONAL ACCOUNTS

As previously mentioned, our operating expenses exceeded our general income. This year it was by the sum of -\$57,546.53 as compared with last year which was -\$106,170.00. Again Covid-19 caused us to cancel several of our screening events resulting in reduced costs.

As usual, our other income sources have put the Institute in a financial position where we show a net surplus of \$1,752.52.

Our other income sources include the Portfolio growth, and a net return from our Telemarketing of \$166,642.79.

The introduction of Electronic Fund Transfer facilities that can be used in our mobile units has seen an increase in onsite donations during screening events.

Our recent commitment to fund a Scholarship at Curtin University has given us some good publicity, particularly in the academic arena. Our ongoing commitment to the Karen and Joshua Chinnery Scholarship has also attracted fund raising efforts from members of the public, which has resulted in us setting up a "GiveNow" site where donations can be made direct into our selected bank account for various fund raising activities.

Many thanks to Lion David Baird for his untiring efforts in keeping the data entries into our MYOB account up to date and Directors, Phil, Garry, and John for their careful monitoring of their expenditures.

■ PDG Neil F Saunders—Treasurer

## DIRECTOR'S REPORT

Your Directors present their report on the Institute for the financial year ended 30 June 2020. The names of the Directors in office at the date of this report are:

### ELECTED MEMBERS

Lion Phil Chinnery	Chairman
PDG Pamela Baird	Vice Chairman
PDG Garry Irvine	Director PR/Business Development
Lion David Baird	Director Assistant Treasurer
Lion John Osborne	Director Screening Event Co-ordinator
Lion Mary Austin	Director
Lion Stephen Berry	Director
Lion Barry Rowland	Director
Lion June Walker	Director

### EX OFFICIO MEMBERS

DG Daniel Stevens	DG District 201W1
DG Frank Camarri	DG District 201W2
1 <sup>st</sup> VDG Michael Wainwright	VDG District 201W1
1 <sup>st</sup> VDG Dot Jacobs	VDG District 201W2
Lion Leonie Getty JP	District Chairman 201W1
PDG Dora Bushe-Jones	District Chairman 201W2

### APPOINTED MEMBERS

William (Bill) Crosthwaite	Secretary
PDG Neil F. Saunders	Treasurer
Dr Rob Fitzpatrick, FRCS, FRACS	Chair Medical & Scientific Advisory Committee

### CHANGE IN DIRECTORS DURING THE 2018/2019 FINANCIAL YEAR

PDG Darrel Mainard	Appointed Ex Officio District Chairman 201W2. Deceased during office.
PDG Dora Bushe-Jones	Appointed Ex officio District Chairman 201W2.
DG Sue Lowe	End of term
DG Grant Hewitt	End of term
Lion Mary-Anne Wolfe	Resigned
Lion Dale Thomson	Resigned
Lion Barry Rowland	Elected

No significant changes in the Institute's state of affairs occurred during the financial year.

**Covid 19 internal State travel restrictions meant cancellation of rostered screening events. Upon lifting of the internal State travel restrictions, screening operations recommenced.**

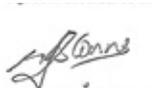
The Lions Cancer Institute Inc. is a "Not for Profit" medical research institution. The Institute holds endorsements for the Australian Taxation Office as an Income Tax exempt Charitable Entity (ITEC) and is a Deductible Gift Recipient (DGR). The Institute is also registered with Australian Charities and Not for Profits Commission (ACNC).

The Institute holds a current West Australian Charitable Collections Licence under the provisions of the Charitable Collections Act 1946.

No significant change in the nature of these activities occurred during the year.

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the Institute, the results of those operations, or the state of affairs of the economic entity in future financial years.

Signed in accordance with a resolution of the Board of Directors:



William John Osborne  
Director  
Place: Mandurah Dated: 12.09.2020



Neil F Saunders  
Treasurer  
Place: Mandurah Dated: 12.09.2020

# FINANCIAL REPORT

## INCOME STATEMENT FOR THE YEAR ENDED 30 JUNE 2020

	2020 (in \$)	2019 (in \$)
Donations	51,031.53	64,085.59
Show account income	852,006.70	824,622.64
SA Revenue	1,200.00	15,403.19
Portfolio distribution income	60,451.45	35,528.18
Change in net market value of investments	(68,404.21)	19,955.51
Other income	1,706.99	3,745.00
Administration expenses	(29,155.86)	(33,264.85)
Depreciation and amortisation expenses	(54,360.98)	(58,521.50)
Portfolio expenses	(2,569.29)	(4,746.88)
Public relation expenses	(573.92)	-
Scholarship and award expenses	(49,800.00)	(24,028.54)
Screening expenses	(43,409.99)	(63,730.49)
Show account expenses	(682,794.71)	(648,329.29)
Skin cancer screening unit	(30,076.39)	(54,465.67)
South Australia costs	(1,100.00)	(37,430.66)
Staff expenses	(2,130.76)	(1,747.90)
Other expenses	(268.04)	(8,124.71)
<b>SURPLUS FROM ORDINARY ACTIVITIES BEFORE INCOME TAX</b>	<b>1,752.52</b>	<b>28,949.62</b>
Retained surplus at the beginning of the financial year	1,097,631.39	1,095,878.87
<b>TOTAL AVAILABLE FOR APPROPRIATION</b>	<b>1,097,631.39</b>	<b>1,095,878.87</b>

## BALANCE SHEET AS AT 30 JUNE 2020

	2020 (in \$)	2019 (in \$)
<b>CURRENT ASSETS</b>		
Receivables	1,487.00	277.00
Cash assets	302,414.87	196,586.00
Other assets	3,582.08	6,170.16
<b>TOTAL CURRENT ASSETS</b>	<b>307,483.95</b>	<b>203,033.16</b>
<b>NON-CURRENT ASSETS</b>		
Property, plant and equipment	42,688.04	96,262.24
Intangible assets	2,443.13	2,815.91
Financial assets	931,232.28	878,919.78
<b>TOTAL NON-CURRENT ASSETS</b>	<b>976,363.45</b>	<b>977,997.93</b>
<b>TOTAL ASSETS</b>	<b>1,283,847.40</b>	<b>1,181,031.09</b>
<b>CURRENT LIABILITIES</b>		
Payables	186,155.80	92,521.56
Credit card liabilities	60.21	302.16
GST accrued	-	(7,671.50)
<b>TOTAL CURRENT LIABILITIES</b>	<b>186,216.01</b>	<b>85,152.22</b>
<b>TOTAL LIABILITIES</b>	<b>186,216.01</b>	<b>85,152.22</b>
<b>NET ASSETS</b>	<b>1,097,631.39</b>	<b>1,095,878.87</b>
<b>EQUITY</b>		
Accumulated surplus	1,097,631.39	1,095,878.87
<b>TOTAL EQUITY</b>	<b>1,097,631.39</b>	<b>1,095,878.87</b>

## STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2020

	2020 (in \$)	2019 (in \$)
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Receipts from customers	903,587.23	926,658.58
Payments to suppliers and employees	(745,898.59)	(875,656.24)
Dividends received	60,451.45	35,528.18
Interest received	1,147.99	1,199.36
GST refund	7,671.50	(7,486.64)
Net cash provided by operating activities	226,959.58	80,243.24
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of property, plant and equipment	(414.00)	(5,617.59)
Purchase of investments	(120,716.71)	(88,778.40)
Net cash provided by investing activities	(121,130.71)	(94,395.99)
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Net increase in cash held	105,828.87	(14,152.75)
Cash at the beginning of year	196,586.00	210,738.75
Cash at end of year	302,414.87	196,586.00

# FINANCIAL REPORT

## DIRECTOR'S DECLARATION

The Board of Directors have determined that the Association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements, the attached special purpose financial statements have been prepared for the purpose of complying with the Association Incorporation Act 2015 (WA), the Australian Charities and Not-for-Profits Commission Act 2012 and association regulations;

The directors of the Association declare that:

1. the financial statements and notes attached give a true and fair view of the financial position as at 30/06/2020 and its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements;
2. in the directors' opinion there are reasonable grounds to believe that the incorporated association will be able to pay its debts as and when they become due and payable.

This statement is made in accordance with a resolution of the Board of Directors and is signed for and on behalf of the directors by.

Director:

 N. F. SAVANDES

Director:



Dated :

22.09.2020

## INDEPENDENT AUDITOR'S REPORT

### REPORT ON THE AUDIT OF THE FINANCIAL REPORT

#### Opinion

We have audited the financial report of LIONS CANCER INSTITUTE INC. (the association), which comprises the assets and liabilities statement as at 30/06/2020, the income and expenditure statement for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the certification by members of the board of directors on the annual statements giving a true and fair view of the financial position and performance of the association.

In our opinion, the accompanying financial report gives a true and fair view of the financial position of LIONS CANCER INSTITUTE INC. as at 30/06/2020 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements, and the requirements of The Associations Incorporation Act 2015 (WA).

#### Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the association in accordance with ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the association to meet the requirements of The Associations Incorporation Act 2015 (WA). As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.



## INDEPENDENT AUDITOR'S REPORT (ctd)

### Responsibilities of the Board of Directors for the Financial Report

The board of directors is responsible for the preparation and fair presentation of the financial report in accordance with the financial reporting requirements of The Associations Incorporation Act 2015 (WA) and for such internal control as the board of directors determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the board of director is responsible for assessing the association's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the board of directors either intends to liquidate the association or to cease operations, or have no realistic alternative but to do so. The board of directors is responsible for overseeing the association's financial reporting process.

### Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

- As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:
- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud

is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the board of directors.
- Conclude on the appropriateness of the board of directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the board of directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during

**Auditax Accountants  
Chartered Accountant**

  
**Dharam Ghangas  
Director**

Place: Perth

Dated: **Fri Sep 18 2020**

## CLUB DONATIONS 2019/2020

DATE	CLUB
18/07/2019	Wagin Lions Club
23/07/2019	Noranda Lions Club
23/07/2019	Unknown Club
21/08/2019	Brunswick Junction Lions Club
21/08/2019	Stirling Inc. Lions Club
27/08/2019	Kojonup Lions Club
17/09/2019	Nannup Lions Club
17/09/2019	Northam Lions Club
16/10/2019	Boddington Lions Club
16/10/2019	Leeming Lions Club
16/10/2019	Narembeen Lions Club
29/01/2020	Armadale-Kelmscott Lions Club
10/02/2020	Kondinin Lions Club
18/02/2020	Pingrup Lions Club
13/03/2020	Hyden Lions Club
13/03/2020	Kulin Lions Club
05/05/2020	South Perth Lions Club

DATE	CLUB
13/05/2020	Cowaramup Lions Club
13/05/2020	Dardanup Lions Club
15/05/2020	Leeming Lions Club
15/05/2020	Wollaston Lions Club
19/05/2020	Collie Lions Club
29/05/2020	Unknown Club
02/06/2020	Bull Creek Lions Club
03/06/2020	Bassendean Lions Club
11/06/2020	Rockingham Lions Club
12/06/2020	Canning City Lions Club
15/06/2020	Booragoon Lions Club
16/06/2020	Boddington Lions Club
17/06/2020	Kwinana Lions Club
17/06/2020	Mandurah Lions Club
18/06/2020	North Beach Lions Club
22/06/2020	Millbridge Lions Club
26/06/2020	Duncraig Lions Club

**Total Donated by Lions Clubs**  
**\$30,835.00**



# LIFE FELLOWS OF THE LIONS CANCER INSTITUTE INC.

PDG Garry Irvine	DIRECTOR, DERMOSCOPIST
Mr Robert Fitzpatrick MBBS FRCS FRACS (Retired)	DIRECTOR, PLASTIC SURGEON
Mr Barrie Lykke MBBS FRACS FRACS (Retired)	PLASTIC SURGEON
Professor Kurt Gebauer MBBS FACD	PROFESSOR OF DERMATOLOGY
Dr Lester Cowell MBBS	PRIMARY CARE SKIN CANCER PRACTITIONER
Mrs Monika Cowell	DERMOSCOPIST
Lion Susan Goddard BA APP. Sc. FRCNA (Retired)	REGISTERED NURSE
PDG Colin Beauchamp AM.JP	DERMOSCOPIST
PDG RON VAUGHAN (Deceased)	
Mr DON PHILLIPS (Deceased)	
Mr Alister Turner MBBS FRCS FRACS (Deceased)	PLASTIC SURGEON



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**SAVING**  
*lives* **IN YOUR**  
**COMMUNITY THROUGH**  
*screening* **AND**  
**RESEARCH.**



**Lions Cancer Institute Inc.**

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**Treasurer**

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