



| Annual Report
| 2022–23



Acknowledgement of Country

ADDRI acknowledges the traditional owners of the land on which we live and work. We pay our respects to their elders—past, present and emerging. We recognise all Australian communities who, through their lived experience, have been impacted by asbestos and dust related diseases.

We especially thank Nyree Reynolds for creating this powerful painting for ADDRI.

Reclaiming ourselves

“A new dawn is breaking in the eastern sky, the last stars are fading, the birds are arriving and singing to greet the new day.

The songlines in the foreground are the journeys of the First Nations people through the landscape. They show the sitting down places of men and women and children. The women are depicted around the circle with coolamons and digging sticks while the men are depicted with boomerangs and spears. The songlines travel throughout the country within their own nation’s lands and into the lands of other nations. It is where the Original Custodians tell stories, share and learn stories, knowledge and culture.

I have used this particular green because it is within the ADDRI logo and it is the colour of the heart chakra that I breathe in when I practice my healing meditation each day. This colour also relates to our lungs so it’s an integral part of my meditation because I have Mesothelioma and I visualise surrounding my lungs with a green hue. As I live in the country, whenever I’m driving through the land and the country is bathed in green, I also breathe this in because it is calming and healing. I have included some pink in the sky because it’s the colour of love; and each day I imagine my tumours wrapped in pink, as well as green, to ask them to work with me in this healing process.

I am reclaiming me.”

Nyree Reynolds—Wiradjuri Elder, Blayney NSW



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Asbestos and dust diseases: the facts

It is estimated that 4,000 Australians die each year from asbestos-related diseases.¹ That is more than three times the national road toll² and four times the number of deaths in Australia during the first year of the COVID-19 pandemic.

Unfortunately, asbestos is still considered to be an issue of the past. However, Australians continue to be exposed to harmful asbestos fibres, principally through home renovations where the inhalation of only one fibre could lead to mesothelioma—the terminal cancer caused by asbestos exposure. It is estimated that one in three houses in Australia contain asbestos, and if the house was built before 1990, it is highly likely that it will have some asbestos-containing materials (ACMs). The renovation boom experienced in Australia has highlighted the risks faced not only by workers in the building industry, but by the Do-It-Yourself (DIY) renovators—where identifying asbestos is near impossible without professional testing.

Australia has one of the highest incidences of mesothelioma in the world. The Australian Institute of Health and Welfare (AIHW) projects that 904 Australians will be diagnosed with mesothelioma, with 761 deaths in 2022.³ Currently, there is no cure for mesothelioma or other asbestos-related diseases. Certain treatments may extend patient life expectancy and help achieve long-term remission dependant on the stage of diagnosis, type of cancer and patient health, however, due to the aggressive nature of mesothelioma and often late diagnosis, the mesothelioma survival rates are very low.

The recent increase in the number of workers now diagnosed with silicosis resulting from the use of manufactured stone, has again shone a spotlight on the dangers of dust diseases. There are parallels to be drawn, and lessons to be learnt, from the early asbestos experience in the 1980s and 1990s—the tragic impact this had on Australians, which is continuing to be felt today, need to be remembered to avoid history repeating itself.

More needs to be done to educate Australians, eradicate asbestos products safely and investigate new health treatments that improve the quality and longevity of life. At ADDRI, this is the mission that drives us.

¹ <https://www.asbestos.nsw.gov.au/health-risks/asbestos-related-health-conditions>

² https://www.bitre.gov.au/sites/default/files/documents/rda_feb2023.pdf

³ <https://www.aihw.gov.au/reports/cancer/cancer-data-in-australia/data>

Asbestos in Australia



ADDRI 1 of a kind

ADDRI is the only stand-alone research facility dedicated to asbestos and dust diseases.



4,449 deaths per year

Estimated deaths per year from occupational asbestos-related diseases.⁴



870 Mesothelioma deaths

In 2020 — expected to rise to 1,500 deaths from mesothelioma in 2040.⁵



Banned asbestos in 2003

National ban on all types of asbestos came into force 31 December 2003.



1 in 3 homes in Australia

Contain asbestos — homes built and/or renovated before 1990 are likely to contain asbestos.⁶



6.4 Million tonnes of ACMs

Remain in the built environment as of 2021 — 54% of which is AC water pipes and 26% being in residential buildings.⁷



1.1 Million tonnes asbestos waste

Generated in 2021–22 — 22% less than the previous year.

⁴ IMHE Global Burden of disease Study 2019 (actual # is 239,333) <https://vizhub.healthdata.org/gbd-results/>

⁵ WHO IARC Global Cancer Observatory 2020 <https://gco.iarc.fr/tomorrow/en>

⁶ Asbestos Safety and Eradication Agency (2022). Communicating asbestos facts and figures to the public <https://www.asbestossafety.gov.au/research-publications/guides-communicating-about-asbestos-risk>

⁷ Asbestos Safety and Eradication Agency (2021). *Asbestos Waste data in Australia – 2021–22 Annual Update* <https://www.asbestossafety.gov.au/research-publications/asbestos-waste-australia-0>

Australian research. Global outcomes.

Understand. Support. Educate. Collaborate.

ADDRI is an independent, not-for-profit research institute committed to reducing and ultimately eliminating the impact of asbestos and dust-related diseases worldwide. We work in collaboration with individuals and organisations dedicated to eradicating these diseases while providing personalised wrap-around support to those affected by them. Our evidence-led research drives advancements in medical and scientific understanding and guides our global education and training initiatives.

At ADDRI—we are:

- **Committed**—We are unwavering in our dedication to eliminating asbestos and dust-related diseases worldwide.
- **Determined**—We approach our mission with unrelenting resolve, pushing boundaries to achieve our goals.
- **Independent**—Our independence ensures that we act solely in the best interests of those affected by asbestos and dust-related diseases, free from outside influence.
- **Collaborative**—Through partnerships and cooperation, we amplify our impact, working together to make a significant difference.
- **Evidence-led**—Our actions are guided by rigorous research and data, ensuring the most effective strategies in our fight against these diseases.
- **Transparent**—We maintain open communication, sharing our progress, challenges and decisions with complete honesty and clarity.
- **Global leader**—Our status as the WHO Collaborating Centre for Elimination of Asbestos-Related Diseases ensures that our dedication, research and collaboration will have significant impact around the world.



Chairman's message

Excellence. Expansion. Evolution.

These are the three words I believe best summarise the past 12 months at ADDRI. Our team and the Board have pursued excellence in their work and their strategic decision making above all else—with the central question always being: how does this work and how do these decisions impact positively on those we seek to help?

Outstanding results have been delivered in our laboratories, in our executive management, our work with patients and in our educational projects conducted in Australia and internationally. We've been awarded new grants, secured prestigious new partnerships and most importantly built on crucial long-term relationships that are the lifeblood of our success. When I say much of our work cannot be done without these partner organisations, I mean it. Central to this is our partnership with the newly elected NSW State Government which announced \$5million for ADDRI in March 2023.

I thank everyone at ADDRI for their diligence, their relentless pursuit of excellence across research, clinical care, patient support, international and national projects and leadership and the boundless comradery and dedication they show to the organisation and

the collective team. As Chairman, these attributes are evident. ADDRI is one of the smallest medical research institutes in the country however the team's tenacity and passion is boundless so while we may be small, we are certainly mighty.

In response to the growing asbestos and dust-related disease challenges, we embarked on a new strategy in June 2022 and activated an ambitious expansion path forward. Within 12 months, we expanded our team at the Institute from 14 to 21. We've welcomed new scientists and researchers and a new Principal Scientist; a new Manager of International Projects; new Nurse Educator; biobank collections team and administrative support all ably led by CEO Kim Brislane and her executive team.

This expanded team employ innovative thinking and strive for excellence at every junction of their work and the expansion of our collaborations and partnerships are testimony to their achievements and I salute each person for the impact they have made and will continue to make.

Of course, with expansion, we sometimes are required to say goodbye. We farewelled Jocelyn McLean who retired from her role as Mesothelioma Support Co-ordinator and I want to pay special tribute to Jocelyn as she was responsible for building this vital service having realised the missing gap for mesothelioma patients and their carers and the need for clinical nurse consultant support. Her impact on those directly impacted by asbestos-related disease will never be underestimated and she leaves ADDRI with our deep appreciation. We also farewelled our Research Director, A/Professor Sonja Klebe who was seconded to the role from Flinders

University until January 2023 and I'd like to thank Sonja for the direction and good work she delivered during her time in the role. She remains as Honorary Research Associate to ADDRI which will be of great benefit to our research team.

Our Board was strengthened with the addition of Armando Gardiman, Partner of Turner Freeman Lawyers, and one of the country's fiercest advocates for mesothelioma sufferers. He brings decades of experience in litigation of asbestos-related disease cases and an acute understanding of the industry and its history.

My appreciation extends to the entire Asbestos Diseases Research Foundation Board for their diligence in tackling the complex decisions which is a requirement of the role. Each Director brings incredible expertise to the table ensuring our direction is underpinned with strong governance, well considered understanding and enthusiasm toward our end goal.

And to my last word—evolution. In April of 2023 the Board unanimously decided to change the name of the institute expanding it by two words—AND DUST.

The Asbestos Diseases Research Institute became the Asbestos and Dust Diseases Research Institute confirming the dual scope of research responsibility which has always been in our constitution but previously not reflected into our name. We now seek to embody this name as responsibly, as genuinely and as authentically as possible.

We think of asbestos often as part of our history but with one in three Australian homes, and too many hospitals, schools, universities and public buildings containing asbestos, the worst is potentially ahead of us. With the re-emergence of silicosis and the statistics that one in four Australian workers are impacted, our mission to eliminate asbestos and dust-related diseases globally while providing support and bringing hope to those affected fuels every person in our team and on our Board.

I acknowledge the State and Federal Governments for pursuing dust-related diseases with the urgency required. For any change to fully happen, government is a central lever and we are proud of the work we do together.



Peter Tighe
Chairman ADRF

CEO's message

2022–2023 was just one year, but these twelve months represent some of the most significant days in our Institute's history. We nearly doubled in size; achieved significant milestones across each division of the Institute; expanded our name, signalling greater scope and dedication; welcomed exciting new partnerships; and, built upon existing treasured relationships.

A new strategy was approved by the Board in June 2022—it was ambitious, far reaching and required immense commitment and heavy lifting by the team. It also required extraordinary collaboration—for everyone working in this entire landscape to walk together, in one direction, with one central goal—to eliminate asbestos and dust-related diseases globally.

This is a big, long game mission and so ambition and urgency are the cornerstones of our work. Even though asbestos was completely banned nearly 20 years ago, too many Australians continue to suffer, or worse, lose their lives to incurable diseases like mesothelioma, asbestosis and silicosis. This will, as they say, take a village and it will take courage. This team, and our partners have it in spades.

I feel immensely proud of the original 14 and the newly assembled 21 strong ADDRI team. They have relentlessly pursued every strategic goal until they met it and they've

charged forward with zest, professionalism, non-stop can-do attitude and thankfully, with incredible good humour. I salute them all, and I'd like to particularly acknowledge our volunteers, especially Jenny Weismantel who has volunteered for ADDRI for over 12 years. She is a most treasured member of our team and her commitment to our mission is inspiring. Jenny comes to ADDRI three days a week and not only drives and co-ordinates key projects herself, but she supports all of us in the work we do each day.

I also want to honour the memory of Dr Matt Soeberg, our Epidemiologist who devastatingly lost his battle with a brain tumour in 2022. Matt was an incredible intellectual force at ADDRI and his work and words remain ever present in what we do each day.

You will read in this report the many achievements of the team here and overseas. Our Australian Research has far-reaching impact and our World Health Organization

Collaborating Centre designation remains central to our work. It is testimony to our expertise and reflects the global caution and concern over the escalating dangers of asbestos and dust diseases. Being nominated to the WHO CC Australian Executive this year is something I am very excited about. There is so much to learn about how we take ideas to real world lifesaving impact.

To the Board, I thank them for the commitment and diligence and their broad thinking. Their individual expertise and collective wisdom is something I do not underestimate.

There is much to look forward to in 2023/24. The extraordinary efforts made by everyone in this financial year will be a powerful springboard to further accomplishments and milestones at ADDRI.



Kim Brislane
Chief Executive Officer

A word from our Patrons

His Excellency General the Honourable David Hurley AC DSC (Retd) Governor-General of the Commonwealth of Australia and Mrs Linda Hurley

I am delighted to serve as Patron of the Asbestos and Dust Diseases Research Institute.

I admire greatly all involved in ADDRI and its predecessor ADRI for enabling research into asbestos and dust-related diseases to continue. It is a valuable mission that makes a difference in the lives of Australians.

The images in recent years of Australians 'cleaning up' after natural disasters have served to highlight the ever-present risks of asbestos exposure. Further, with 1 in 3 Australian homes still containing asbestos, the risk of contracting asbestos and dust diseases is very real. That is why the work of ADDRI is so important.

Linda and I were delighted to welcome members of ADDRI to Admiralty House on two occasions during the year. The receptions were an opportunity for us to learn more about ADDRI's work, celebrate its many achievements and thank valued partners, sponsors and supporters.

I commend all involved in ADDRI for their expertise, hard work and commitment to improving the health outcomes for people with asbestos and dust-related diseases and their families.



Her Excellency the Honourable Margaret Beazley AC KC Governor of New South Wales

Earlier this year, the Asbestos and Dust Diseases Research Institute (ADDRI) announced it was broadening its focus of research to include dust-related diseases, a decision reflected by the inclusion of 'dust' in their name.

This is an important recognition of the alarming increase of silicosis in Australia, a devastating and irreversible lung disease caused by the inhalation of silica dust, particularly prevalent amongst those working in the manufacture and installation of engineered stone. With estimates that around 100,000 people in Australia will develop the disease over the coming years, research into diagnosis and treatment is urgent. It was heartening to hear that ADDRI recently received a \$5 million pledge from the NSW Government to support their research into silicosis treatment options, demonstrating a keen awareness of the scale of the challenge ahead and a high level of trust in ADDRI's considerable track record for research excellence and capability.

In 2021, as Patron, I had the privilege of formally launching ADDRI's designation by the World Health Organization as a Collaborating Centre for the Elimination of Asbestos Related Diseases. Since then, ADDRI has developed crucial training and education programs to help medical professionals in developing countries diagnose and treat asbestos-related diseases. The success of the recent pilot program at Binawan University in Jakarta, Indonesia, has set the wheels in motion for the program to be rolled out in other developing nations.

As Patrons, Dennis and I extend the warmest of thanks to all at ADDRI for their efforts over the last year, and for your continued commitment to achieving that most important of goals – making asbestos and dust-related diseases history.



Margaret Beazley

Her Excellency the Honourable Margaret Beazley AC KC
Governor of New South Wales

Dennis Wilson

Mr Dennis Wilson

Understand

We are on a mission to:

Understand asbestos
and dust-related disease
development and diagnosis
through research.



“Research is seeing what everybody else has seen and thinking what nobody else has thought.”

Szent-Györgyi, Hungarian pharmacologist, Nobel Prize in Physiology/Medicine

Our research work

Our evidence-led research drives advancements in medical and scientific understanding and guides our global education and training initiatives.

WHY? To reduce and ultimately eliminate the impact of asbestos and dust-related diseases worldwide.

We are advancing our research into the following key areas:

- > Better screening
- > Earlier diagnosis
- > Less invasive treatments
- > Breakthrough applications in our laboratories.

“Having a clinical element to ADDRI means that we can be involved in changes that will actually impact not only on the patients now, but the next generation of patients with mesothelioma.”

Dr Anthony Linton, Medical Oncologist, ADDRI Advisor



Our impact

Our research team are laser focussed on developing better treatment options for asbestos-related diseases, and ultimately finding a cure for mesothelioma.

Early diagnosis: Circular RNAs as potential biomarkers for malignant pleural mesothelioma

Thanks to funding from the Dust Diseases Board, United States Department of Defense and the Revesby Worker's Club, one of the innovative projects the research team are working on is the development of a minimally invasive screening process for individuals with known exposure to asbestos. This project aims to identify and validate new blood-based biomarkers to facilitate an improved and less invasive diagnosis of mesothelioma. A successful outcome of this study will ensure that asbestos-exposed individuals are diagnosed accurately and earlier before disease symptoms present and/or reach an advanced stage. This in turn will facilitate a prompt administration of treatment strategies that will have a greater likelihood of improving the overall survival and quality of life of the patient.

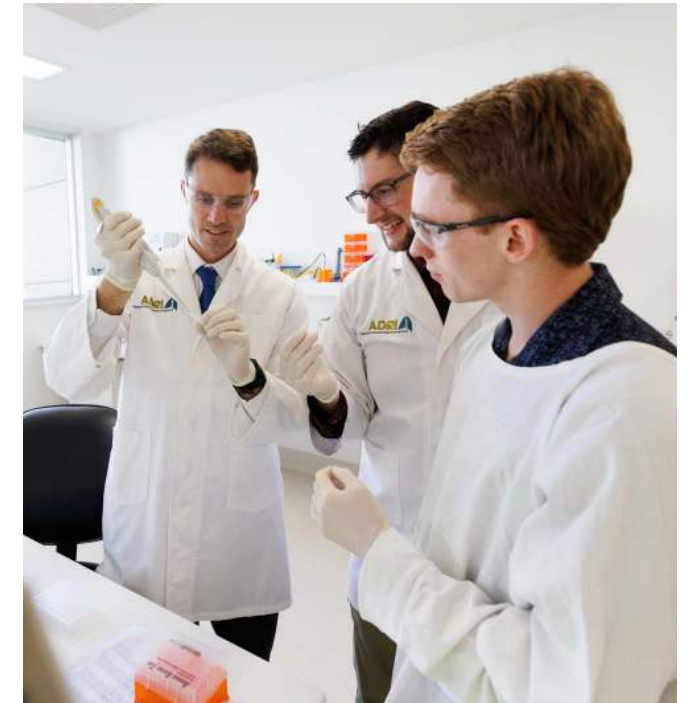


Quick Facts

- › PCR-technique now completely established and optimised
- › Preclinical: the technique is being applied to an extensive range of biospecimens held in the ADDRI Biobank to test the objectives
- › Next step: expected outcome following the preclinical work is to recruit people with a known history of asbestos exposure to participate in a Clinical Trial.
- › A successful outcome will ensure we can apply this technique in a clinical setting to begin early diagnosis of patients, leading to prompt treatment strategies.

Dr Ben Johnson and team are currently working on developing and optimising a modern PCR-based technique that if successful, could lead to the development of a new minimally-invasive, early and accurate diagnosis of mesothelioma that will allow for early treatment options—before disease onset or at the very early stages.

Dr Ben Johnson, Postdoctoral Researcher



Breakthrough research

We are unrelenting in exploring every avenue that will achieve our mission of improving patient outcomes, uncovering new treatments and ultimately finding a cure for mesothelioma. Postdoctoral Researcher Dr Huaikai (Peter) Shi is currently focusing his research on developing a novel approach that combines beneficial immunotherapy with anti-cancer natural products. He is now working on Phase 1 of a Clinical Trial examining the impact and benefits of the Manuka compound (Study of *Leptospermum polygalifolium* extract (QV0) in mesothelioma or 'The Honey Project'.) If successful, this will provide a natural option for the treatment of the currently incurable cancer, malignant mesothelioma.



The 'Honey' Project: Quick Facts

- › Demonstrated evidence of growth suppression in mesothelioma cells.
- › Anti-tumour activity present in the mesothelioma animal model, with no clinical, biochemical or anatomical evidence of hepatotoxicity (liver-damage).
- › Study published in research publisher and open science platform Frontiers.
- › Given evidence of anti-tumour activity with minimal toxicity, study will move into the first Phase 1 Clinical trial of QV0.
- › Patient recruitment to commence mid-January 2024.

"We anticipate that a successful outcome would be rapidly translated into clinical practice and will significantly improve patient quality and quantity of life."

Dr Huaikai (Peter) Shi, Postdoctoral Researcher—
The Honey Project



The ADDRI Biobank

The ADDRI Biobank was established as a specialised Biobank facility to collect and store blood, tissue, and fluids (biosamples) from patients affected by asbestos or other dust-related diseases, such as silicosis.

It is crucial to our biomedical (preclinical) research which focuses on a variety of molecular and biological techniques that utilise the invaluable biological specimens stored in the ADDRI Biobank. To oversee the management of this crucial resource, we were delighted to welcome **Dr Virginia James, Biobank Officer** to the team, supported by **David Baker, Research Officer**.

The 2022–23 year has seen a period of consolidation post COVID-19 lockdowns, which significantly impacted our ability to operate the Biobank to its full capacity. A revitalised team began re-engaging with surgeons to recommence the process of patient-informed consent to voluntarily donate biospecimens to the ADDRI Biobank.

The ADDRI Biobank plays an active and integral role by supplying high-quality biospecimens and associated health information to support scientists' translational research, with the aim that these collaborations will accelerate the development of innovative treatments, drugs and prevention of disease.

“Biobanks serve as a key resource for novel scientific investigations, research and development. The importance of Biobanks is that biosamples collected may be shared nationally and across the globe for approved studies. This sharing of expertise can help focus and speed-up new discoveries now and into the future leading to advances in patient care and treatment.”

Dr Virginia James, Biobank Officer



Introducing our new Principal Scientist, Dr Elham Hosseini Beheshti

“As the new Principal Scientist of ADDRI, my primary focus is on fostering patient-centric research and translating our discoveries into practical solutions. Together, we are dedicated to bridging the gap between the laboratory and real-world impact, with a steadfast commitment to addressing the needs of those affected by asbestos and dust-related diseases. Our collective efforts will cultivate a culture of growth, innovation, and collaboration, propelling our research centre toward a brighter future.

In this journey, my vision for our research team is to continually strive for improvement. While acknowledging our strengths is crucial, it is equally important to identify areas where we have room to excel further. By recognising these areas, we can proactively address our weaknesses and evolve as a united and formidable unit. I am dedicated to nurturing specialised expertise within each member of our research team, providing the support needed to help everyone reach their full potential. Additionally, I am deeply committed to enhancing our research governance, ensuring that our work is conducted with the utmost integrity, efficiency, and impact.

I am actively working to strengthen our relationships with clinicians, medical scientists, pharmaceutical companies, and venture capital firms. This collaborative approach will not only help us identify unmet needs but also facilitate the development of innovative solutions to address them. Together, we have the power to make a significant difference in the world of research and healthcare, and I am excited about the positive impact we will create.”



ADDRI's current research projects 22/23

Grant Title	Project Summary	Funder	Investigators
1. WEE1 inhibitor and durvalumab to treat malignant pleural mesothelioma (MPM)	This study aims to develop a 3D mesothelioma cell culture model that faithfully mimics the tumour cell and immune cell interactions that would occur in an actual mesothelioma patient. This model will facilitate the screening of new immunotherapy and combination therapy strategies for mesothelioma without the need for laborious testing on animal models. A successful outcome of this study will ensure that promising drug candidates are identified faster and with greater accuracy so that they can be tested promptly in prospective human clinical trials.	Astra Zeneca	PI: Steven Kao Investigators: Ben Johnson Peter Shi Aimee Stenekes
2. A novel 3D model for drug screening in mesothelioma	To facilitate drug screening that can be fast tracked into the clinic, we have developed a model using porcine lung as a 3D scaffold. When compared to 2D culture, cells grown in this 3D model exhibited markers and expression levels that were like real tumours. We plan to further characterise the cancer biology and drug responses of this 3D model.	iCare	PI: Sonja Klebe Investigators: Peter Shi Ben Johnson
3. Phase 1 study of Leptospermum polygalifolium extract in mesothelioma	We have conducted preliminary studies of a specific extract from <i>Leptospermum polygalifolium</i> (QV0) which demonstrated anti-proliferative activity in vitro, and anti-tumour activity in vivo animal studies. Importantly, there was no clinical, biochemical or anatomical evidence of toxicity in the tested animals. This project is a Phase 1 study of QV0 to determine its potential utility as a monotherapy agent for patients with MPM. This will involve a determination of a safe dose, identification of potential toxicities and characterisation of the pharmacokinetic profile of this product. We intend to further investigate the safety of combining QV0 with standard of care chemotherapy or checkpoint inhibitors in dose expansion safety cohorts.	iCare	PI: Steven Kao Investigators: Peter Shi Steven Clarke

Grant Title	Project Summary	Funder	Investigators
4. Circular RNAs as Novel Biomarkers Detectable in Blood Plasma to Facilitate Malignant Pleural Mesothelioma Diagnosis	Same as the iCare circular RNA project (below), but with a more in-depth focus on whether the circular RNA biomarkers can potentially be utilised to monitor patient response to treatment following their diagnosis. This study utilises an innovative mesothelioma animal (mouse) model which will allow us to determine whether the circular RNA biomarkers can be used to predict whether an asbestos-exposed individual is likely to develop mesothelioma before disease symptoms manifest. A successful outcome of this study would likely facilitate the establishment of pop-up screening clinics that can be accessed by individuals/families with a history of asbestos-exposure. Individuals identified as being at risk of developing mesothelioma could then seek preventative treatments strategies or be monitored more closely by their GP before disease symptoms manifest.	DoD	PI: Yuen Yee Cheng (UTS) Investigators: Ben Johnson (ADRI) Scott Fisher (UWA)
5. Is epigenetic alteration implicated in the treatment response of pembrolizumab?	In this project we have collected 75 samples from our recent pembrolizumab review and aim to investigate whether epigenetic alteration has any implication in treatment response of pembrolizumab in MPM. We plan to study any alteration of DNA methylation and microRNA epigenetic biomarkers in these samples and to study epigenetic biomarkers contributing to biological response in MPM. The successful outcomes in this project will provide a) epigenetic biomarkers to predict pembrolizumab response, b) biomarkers to monitor and c) discovering disruption of biomarkers to enhance immunotherapeutic agents in MPM.	iCare	PI: Steven Kao Investigators: Peter Shi Yuen Yee Cheng
6. Circular RNAs as potential biomarkers for Malignant Pleural Mesothelioma	This project aims to identify and validate new blood-based biomarkers to facilitate an improved and less invasive diagnosis of mesothelioma. A successful outcome of this study will ensure that asbestos-exposed individuals are diagnosed earlier before disease symptoms present and/or reach an advanced stage. This in turn will facilitate a prompt administration of treatment strategies that will have a greater likelihood of improving the overall survival and quality of life of the patient.	iCare	PI: Sonja Klebe Investigators: Ben Johnson

Grant Title	Project Summary	Funder	Investigators
Investigate gut microbiota influence on immunotherapy response in Malignant Pleural Mesothelioma mice model	Evidence from pre-clinical and clinical research has shown that the gut microbiota (e.g., bacteria and viruses) can modulate antitumour immunity and affect the efficacy of cancer immunotherapies, especially immune checkpoint inhibitors (ICIs). The gut microbiota stimulates CD8+ T cells, CD4+ T helper cells and dendritic cells in melanoma and NSCLC, enhancing the anti-cancer response. However, research on the gut microbiota in mesothelioma show that ICIs (PD-1/CTLA-4) remains unknown. We planned to investigate the gut microbiota influence on pleural mesothelioma mice receiving anti-PD-1/anti-CTLA-4/anti-TIGIT immunotherapies. This funding would be a huge contribution to generating the preliminary data. Ultimately, we can enhance the response rate for ICIs therapy by understanding gut microbiota in pleural mesothelioma	10K Donations were received in June 2023. Funding is supported by Trevor and Shirley	PI: Peter Shi Investigators: Steven Kao

Grants led by Dr Elham Hosseini Beheshti

Grant Title	Project Summary	Grant amount	Key achievements
Medical Research Future Fund—MTPConnect REDI Program	This grant will embed Dr Beheshti at IP Group within a team of investment managers to receive hands-on experience on the commercialisation of ground-breaking research within Australasia.	\$200,366 + January–December 2023	During this fellowship, Dr Beheshti had the opportunity of reviewing programs across multiple research fields. Additionally, I have actively engaged with industry professionals and field experts, allowing me to gain valuable insights into emerging areas of interest within pharmaceutical industry.
NHMRC Ideas Grant 'Unlocking the potential of cancer associated fibroblasts to defeat pancreatic cancer.'	Dr Beheshti is Chief Investigator B	\$636,920	A PhD student has been successfully recruited for this project, and Dr Beheshti will be serving as the Co-supervisor for the student. The project is scheduled to commence in 2024.

Grant Title	Project Summary	Grant amount	Key achievements
DDB Discovery Research Grant– 'Extracellular Vesicles, a Gateway to Precision Medicine: Immunotherapy in Mesothelioma'	Dr Beheshti is Chief Investigator A	\$470,000—over three years	Grant is on pause for 2023 while Dr Elham participates in REDI Program
Pankind (The Australian Pancreatic Cancer Foundation) 2023	Dr Beheshti is Chief Investigator C	\$99,077—2023	
USyd-UEdin Partnership Collaboration Awards 'Development of a self-powered dye sensitised solar cell sensor as a point of care (POC) device for portable and fast extracellular vesicles (EV) based cancer diagnosis.	Dr Beheshti is Chief Investigator A	\$20,000— consumables have come to ADDRI.	The initial phase of the project has been successfully completed with the development of a self-powered dye-sensitized solar cell sensor at UEdin in collaboration with Dr Beheshti. The first manuscript detailing the findings has been completed and is set to be submitted shortly. In September, Dr Beheshti will meet with Dr Chen to review the project's progress and explore opportunities for future collaborations with the team.
Turner Freeman Lawyers Donation 'Extracellular Vesicles in Mesothelioma'	Dr Beheshti is Chief Investigator A	\$25,000	
The Ruth Rose, David Doust, and Debbie Brewer Gift 'Understanding the Role of Extracellular Vesicles in Mesothelioma Tumour'	Dr Beheshti is Chief Investigator A	\$120,000	We have successfully completed several major experiments focusing on multi-omics analysis of EV cargo, as well as RNAseq analysis concerning the role of EV in the tumour microenvironment (TME). Presently, we are in the process of preparing additional samples to be sent for future analysis, which will be carried out by the EV postdoc. These ongoing investigations hold great promise and are expected to significantly contribute to our understanding of EV functions and their implications in the TME.

Medical Research Future Fund—MTPConnect REDI Program Highlights for Dr Beheshti

Key Achievements

During this fellowship, I have had the opportunity of reviewing programs across multiple research fields. Additionally, I have actively engaged with industry professionals and field experts, allowing me to gain valuable insights into emerging areas of interest within the pharmaceutical industry.

New Skills

This fellowship has been a transformative experience, empowering me to better understand and navigate the complex and competitive landscape of medical research commercialisation. Being embedded within a team of esteemed scientists and leaders in research commercialisation, I have gained a realistic perspective on the essential elements involved in successfully translating medical research into meaningful outcomes for patients.

As a result, I now feel more confident in formulating my research questions in a manner that increases the likelihood of addressing patients' needs and ultimately making a tangible impact at the bedside.

This unique experience has also provided me with valuable insights into start-up creation, expectations, and effective team management. These insights are instrumental not only in advancing my own knowledge and skills but also in equipping my research team at ADDRI to better address the unmet needs in rare diseases.

This experience has significantly influenced my approach to formulating research questions and expanding my professional network beyond what I would have encountered in an academic setting.

Trevor's story

Mesothelioma patient

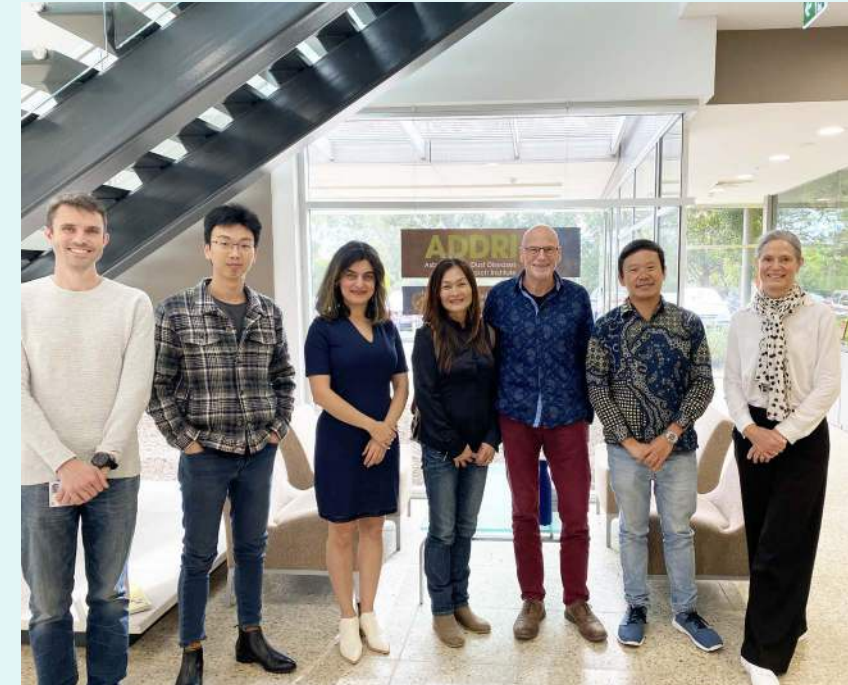
In the late 1970's and 1980's, Trevor worked as an apprentice electrician in his hometown of Wagga Wagga. He then spent the next 35 years travelling the world working on various oil rigs and mines. In 2020, Trevor and his wife Shirley returned home to Australia, planning to retire and work on the farm they had purchased in country Victoria, near the Albury-Wodonga border.

Feeling increasingly breathless, but not overly concerned, Trevor decided to seek medical advice and after numerous appointments and tests, Trevor received a call that would change his life. He had been diagnosed with mesothelioma. When his wife Shirley asked him what that was, he simply replied it's "a death sentence."

Utterly shocked and desperately searching for answers, the ADDRI Support Service reached out, promptly connecting the couple with the Dust Diseases Board and introducing them to a surgeon based in Sydney who could assist in making decisions regarding radical treatment, and guided them through the intricate medical system.

Following radical surgery in 2021, the ADDRI Support service walked alongside Trevor and Shirley through the recovery process, helping to manage the challenging side effects of the intricate procedure and the subsequent recovery. Crucially, the ADDRI team emphasised the importance of maintaining a positive mindset, engaging in pulmonary rehabilitation in their local area, and offering guidance and encouragement as they worked towards regaining an active lifestyle.

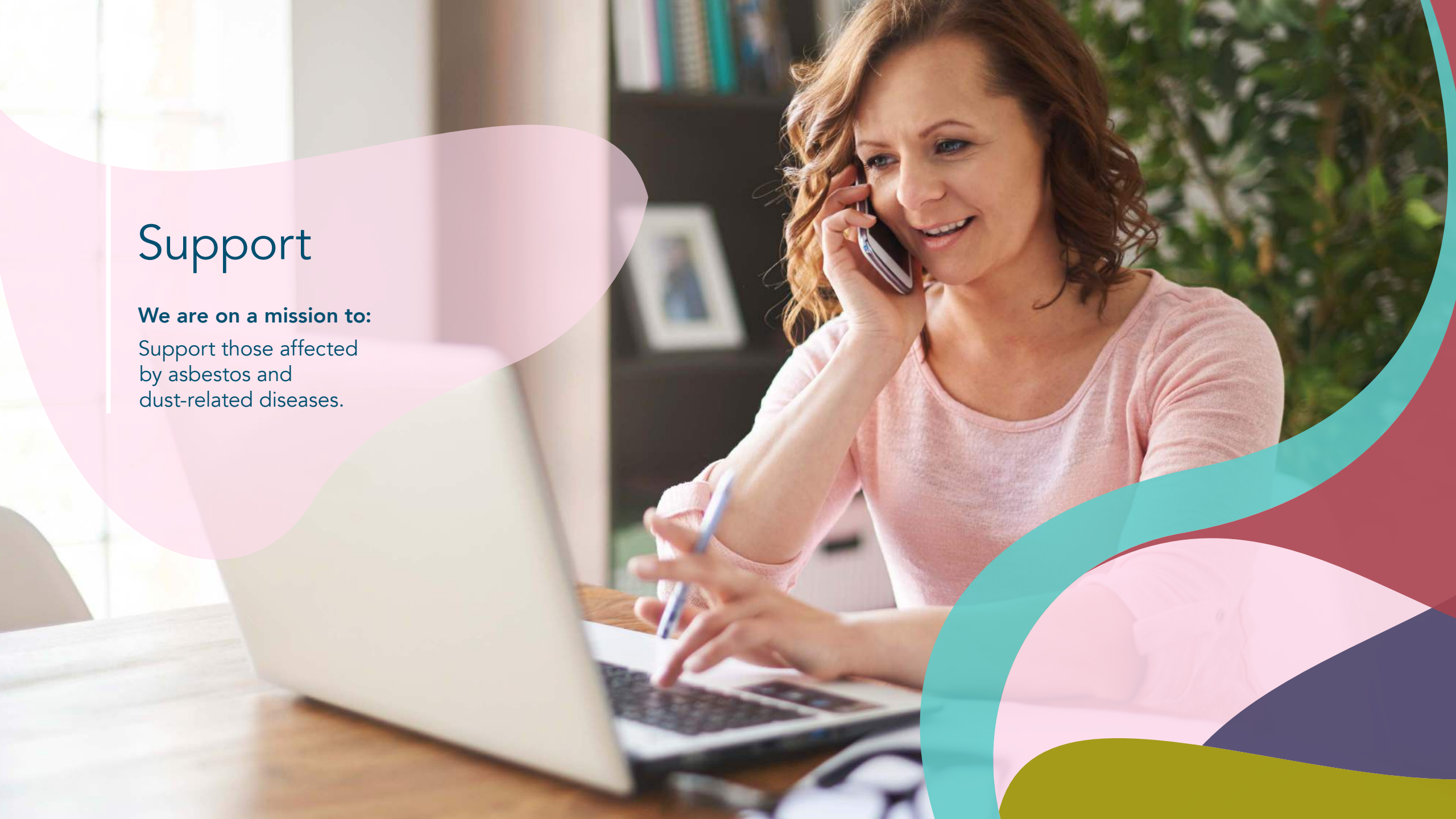
While it will continue to be a difficult journey ahead, Trevor and Shirley are embracing life. They are so passionate about the crucial impact of the ADDRI Support Service and our research work that will uncover treatments that could help patients to come. They are strong advocates of Dr Peter Shi's research into the manuka compound and generously donated \$10,000 to support his continuing work.



Support

We are on a mission to:

Support those affected
by asbestos and
dust-related diseases.



"Sometimes I inspire my patients; more often, they inspire me."

Unknown

Our dedicated Mesothelioma Patient Support Service actively works with over 300 families impacted by mesothelioma. Working with established professional agencies, health professionals and local communities across NSW to provide clinical information and support, our registered nurses bring years of experience to this complex work.

We provide personalised and wrap-around support and our incredible team offer one-on-one phone support, as well as organising meetings and events throughout the year to bring our patients, carers and bereaved together, because they understand the power of connection amongst people who share lived experience.

Our registered nurses bring years of experience to this complex work



Our Support Coordinators walk alongside these incredible patients through this procedure. They provide emotional support and help them to navigate the complex medical system. Ultimately, they provide hope and grant permission to live fully. As part of this, they host EPP Groups twice a year, to bring patients and carers together—to share stories and to receive support, advice and updates. People make the effort to attend from all around NSW. And if they may not feel up to it, they can join online via Zoom!



EPP Well Living Groups

An Extrapleural pneumonectomy (EPP) is an incredible, highly invasive surgical procedure for treating Malignant Pleural Mesothelioma. It involves the removal of the impacted lung, portions of the diaphragm and the linings of the lung and heart (pleura and pericardium). The surgery is just one part of a multimodal treatment plan that includes both chemotherapy and radiation.

Lung Foundation Australia, May Member of the Month: Pamela Logan

Our Mesothelioma Support Coordinator Pamela Logan was recognised by the Lung Foundation of Australia as their Member of the Month in May—an initiative that celebrates nurses who are doing excellent work in the lung cancer arena.



Mesothelioma Support Service Carers Day Lunch, October 2022

In thanks and acknowledgment of all carers—past and present—ADDRI hosted lunch at Revesby Workers Club. The role of a carer can be very challenging and so we aim to provide an opportunity for people to connect and share their experiences, whilst also providing a fun experience—this year we shared the uplifting power of music with special guest Mark Fleming, Registered Music Therapist.



Meso March May 2023

It was an honour to walk alongside our mesothelioma patients and their families, as well as our wonderful supporters on Sunday, 7 May during our Meso March. With big smiles and great spirit, we braved the rain and marched to raise awareness of mesothelioma and its impact on patients and carers.



Farewell Jocelyn McLean, Mesothelioma Support Coordinator

After dedicating almost a decade of her life to ADDRI, our exceptional Mesothelioma Support Coordinator, Jocelyn McLean, is embarking on a well-deserved retirement journey. As we bid her farewell, we reflect on Jocelyn's remarkable career and her unwavering commitment to providing care for mesothelioma patients.

Before joining ADDRI, Jocelyn spent 13 years at Concord Hospital, serving in various clinical roles. She later moved to Royal Prince Alfred Hospital, where she pioneered the Case Manager position for Thoracic Surgery. For 20 years, Jocelyn diligently provided pre and post-operative education and support to patients undergoing thoracic surgery, including those diagnosed with mesothelioma. Witnessing the vulnerability of these patients, Jocelyn collaborated closely with Professor Brian McCaughan, the one surgeon who offered trimodality therapy (TMT) involving chemotherapy, radical surgery (Extrapleural pneumonectomy EPP), and subsequent radiotherapy. Inspired by her experiences, Jocelyn pursued her Masters of Nursing Thesis on the experiences faced by individuals living with one lung.

Approaching the age of 60 in 2014, Jocelyn sought to transition to part-time work. However, her dedication to supporting mesothelioma patients, particularly those undergoing surgery, remained steadfast. Exploring

avenues to fulfill this mission, Jocelyn approached ADDRI, recognising it as an independent research institute capable of offering support to patients across NSW, Australia, and even internationally. Moreover, the Institute's research initiatives allowed for the translation of findings into improved patient treatment.

With the generous support of a scholarship from Turner Freeman Lawyers, a three-year part-time role was established at ADDRI. In 2017, thanks to an ongoing iCare Support Services Grant, the role expanded to full-time. Leveraging her expertise and compassionate approach to patient and family care, Jocelyn successfully developed the ADDRI Support Service. This invaluable service offers up-to-date clinical information, emotional support via phone and email, and facilitates support group meetings. Through her extensive network and connections, Jocelyn has aided patients in navigating the complexities of the medical system.

Above all, the ADDRI Support Service provides hope and grants permission to live fully, despite the diagnosis. Reflecting on her journey, Jocelyn acknowledges the numerous challenges she has faced, but she emphasises that there have been very few days when she hasn't felt the desire to come to work. In Jocelyn's words, **"Supporting this remarkable group of individuals and witnessing their gratitude and relief when they find our service has been immensely rewarding."**

Jocelyn leaves the Support Service in the capable hands of Pam Logan and Carmel Oostveen, providing consultation and guidance as needed. She leaves with the vision that the service will continue to expand to support patients with silicosis; and to become nationally and internationally recognised for its specialist nursing support. For now, Jocelyn plans to embark on adventures, travel and prioritise her personal health and well-being—a well-deserved dose of her own medicine. Jocelyn, we salute you and your legacy.



Welcome Carmel Oostveen, Mesothelioma Support Coordinator

Prior to Jocelyn retiring, she was on a mission to recruit a Mesothelioma Support Coordinator who had the experience, skill and compassion to step into the role, and she found just that person in Carmel who joined the team in May 2023.

Carmel has extensive experience in Cardiothoracic Intensive Care and has provided dedicated care to mesothelioma patients undergoing the intensive Extrapleural pneumonectomy (EPP) surgery, as part of the trimodal care pathway. In this capacity, she also provided support to their families. Previously, Carmel spent three years as Case Manager for a team of Cardiothoracic surgeons in Sydney.

In this capacity, she played a pivotal role in educating and assisting patients preparing for heart or lung surgery. She served as the liaison between patients, surgeons and hospital teams, ensuring seamless communication and patient-focused care. Carmel has also worked as Research Coordinator in the Cardiovascular department of the Royal Prince Alfred hospital.

Carmel's experience adds enormous value to her role as Mesothelioma Support Coordinator. She works closely with diagnosed patients, offering vital support and guidance to them and their families.



Sandie's story

In 2016, Sandie visited her G.P. for what seemed like a minor discomfort. Little did she know that this would be the moment her life would take an unforeseen turn. A shocking diagnosis of mesothelioma—an aggressive malignant cancer caused by exposure to asbestos—with a mere 18 months to live. It was discovered that she had contracted mesothelioma working in an office in the 1980's that was known to have had asbestos in the building.

Confronted with the dire prognosis, Sandie made the decision to undergo radical surgery—an Extrapleural pneumonectomy (EPP). This highly-invasive surgery involves removal of the diseased lung, part of the pericardium, (*membrane covering the heart*), part of the diaphragm (*muscle between the lungs and the abdomen*), and part of the parietal pleura (*membrane lining the chest*). The treatment also involves both radiotherapy and chemotherapy.

Sandie was put in touch with ADDRI on the day she was told she had mesothelioma. Our nurses supported her through the surgery and post-surgery rehabilitation and stayed in touch on a weekly basis. They encouraged Sandie to attend the EPP Meetings where she could meet people who shared her experiences; where she could find support, care and laughter. Importantly, they directed her focus to the future, on doing positive things and working to regain an active lifestyle.

Today, almost 6.5 years on from her diagnosis, Sandie is going strong! She is a wonderful advocate for ADDRI, rallying her friends and family each year to support ADDRI during our Meso March and the annual City2Surf.

“With the support that ADDRI offers, you feel like you’ve got a bit of a family around you to try and help you through something that’s completely bewildering.”



Educate

We are on a mission to:

Educate that asbestos is a very real threat to people all over the world.



“Education is the most powerful weapon which you can use to change the world.”

Nelson Mandela

Enhancing specialist mesothelioma care through comprehensive education and training

In May, we launched our Specialist Mesothelioma eLearning Module. The first of its kind—and the first in our suite of educational resources—this rapid eLearning resource was designed to build awareness and understanding in Nurse and allied health professionals about the various types of Mesothelioma; how it presents and how to care for patients through the cycle of the disease.

We have long been aware of the vital role that nurses play in diagnosing and caring for patients with mesothelioma, as well as providing crucial support to them generally and their families. However, there has been little education available specifically for nurses on this disease. Supported by a successful grant via the Dust Diseases Board (DDB), ADDRI spent months consulting and developing this comprehensive one-stop resource tool and testing it amongst our cohorts.



Designed as a 30-minute module the participant follows the chronological timeline from pre-diagnosis, diagnosis, treatment, care—to end of life. Having supported mesothelioma patients and their families, we know first-hand how crucial the nurse is and it is this group who can determine good experiences over bad.

The response to this resource was overwhelming, resonating deeply with users who praised its clarity, user-friendly interface, and its ability to address a critical gap in nurses' education. It is now Lung Learning Quality-Assured and featured on the Lung Learning Hub platform—a collaboration between leading respiratory organisations Lung Foundation Australia, the Thoracic Society of Australia and New Zealand (TSANZ) and Asthma Australia.

On-site training

To support the roll-out of the module, we also ran on-site training sessions with nurses and allied health professionals around NSW. Education really is the key to understanding mesothelioma and its implications—by empowering healthcare professionals with knowledge and awareness, we hope to tackle the vital question—could it be Meso?



What's to come in 2023–24? We are expanding our reach

In 2023–24, we are expanding our suite of educational resources:



Tailored Resources for patients and carers



Silicosis e-learning module—how to diagnose and care for patients with Silicosis



Podcast launch: Dust Disease Diaries: Real Lives, Real Stories of Asbestos & beyond—first hand experiences of patients, and those who treat and care for them.

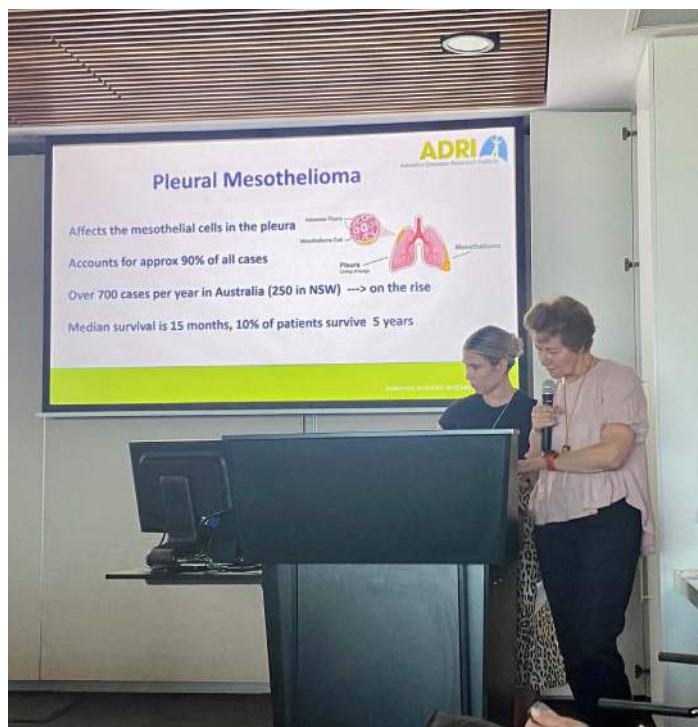
The ADDRI team spreading the word

ADDRI presented across the county and the globe.

Date	Event name	Location	Type of event
Sep–22	NCARD Annual Scientific Meeting 2022	Domestic	Meeting
Oct–22	Asbestos Support Group Network (ASGN)	Domestic	
Nov–22	WHO CC Forum	International	Conference
Feb–23	Australia Lung Cancer Conference 2023	Domestic	Conference
Apr–23	PGARD Parliament House	Domestic	
May–23	Asbestos Safety and Eradication Agency (ASEA) Non-Government Asbestos Advisory Committee	Domestic	Meeting
May–23	Mesothelioma Learning Module for Nurses and Professionals Caring for Patients	Domestic	Workshop
Jun–23	16th International Mesothelioma Interest Group Conference (iMig 2023)	International	Conference
Jun–23	International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Diseases”	International	Symposium & Workshop
Every Month	ANZAC Research Seminar	Domestic	Seminar

ANZ-LCNF Webinar on Mesothelioma and Occupational Lung Disease May 2023

With a mission to equip lung cancer nurses to better navigate complex and advance care environments, Jocleyn McLean, Mesothelioma Support Coordinator was invited to present during the May Webinar on the topic 'Mesothelioma in the lung cancer clinic—what nurses need to know.'



Asbestos Diseases Foundation Australia (ADFA) Information Day 2022

In November 2022, representatives from our team attended the Asbestos Diseases Foundation Australia (ADFA) Information Day which profiled ADFA's ongoing work to support patients and families living with asbestos-related diseases. Kim Brislane, CEO, Dr Huaikai (Peter) Shi and A/Prof Steven Kao had the opportunity to showcase ADDRI's work and what life in the lab looks like. It was also a great opportunity to raise awareness of this national issue with The Hon. Ed Husic MP, Minister for Industry and Science, who was also in attendance.



Connecting with our community

Kicking goals for research

Each goal the Western Sydney Wanderers scored this season raised \$500 for ADDRI. Following a successful season, we were presented with a cheque by the Wanderers' sponsor Turner Freeman Lawyers for \$21,500. We very much appreciate this collaborative support. In more exciting sports news, Turner Freeman also announced ADDRI would receive \$100 per point scored by the Penrith Panthers in games against Parramatta during the 23 season.



Engaging with NSW Government

In January we welcomed the Hon. Sophie Cotsis MP, Member for Canterbury (who was announced as the NSW Minister for Industrial Relations and Minister for Work Health and Safety following the March election) and Julie Little, NSW Labor Candidate for Drummoyne. Our team shared our work, showcased our labs and discussed all our crucial projects currently underway. We thank Ms Cotsis for her support and advocacy and for being instrumental in securing \$5million support by the new Labor Government.



Collaboration in Canberra

The ADDRI team spent a very productive few days of collaboration, discussion and planning in Canberra at the end of September 2022 and March 2023. Chair Peter Tighe, CEO Kim Brislane, Honorary Research Associate A/Professor Sonja Klebe met with various Ministers to discuss the ongoing impact that asbestos and dust-related diseases have on Australians, the work that ADDRI does—to find a cure for these diseases and to support patient and families impacted—and the need for increased and ongoing funding to enable these activities.

We are grateful to the following Ministers and MPs for their time and support:

- › The Hon. Mark Butler MP, Minister for Health and Aged Care
- › The Hon. Ged Kearney MP, Assistant Minister for Health and Aged Care
- › The Hon. Tanya Plibersek, Minister for The Environment and Water
- › The Hon. Tony Burke MP, Minister for Employment and Workplace Relations and his team

- Russell Broadbent MP, Federal Member for Monash, Co-Convenor of the Parliamentary Group on Asbestos-Related Disease (PGARD)
- Sally Sitou MP, Federal Member for Reid
- Tony Zappia MP, Federal Member for Makin
- Matt Burnell MP, Federal Member for Spence.

We then presented to the **Parliamentary Group for Asbestos-Related Disease** in Parliament House in March 2023. ADRF Chair Peter Tighe, Board Member Mathew Werfel and CEO Kim Brislane represented ADDRI for open discussion on the ongoing national health implications of asbestos and dust-related diseases. Sincere thanks to co-convenors Lisa Chesters MP and Russell Broadbent MP for hosting, and to Susan Templeman MP, Ged Kearney MP and Sally Sitou MP for making the time to come in and meet with us.

We have so much to achieve and we really appreciate the collaboration and support of this influential group.



Reception at Admiralty House, hosted by Their Excellencies the Governor-General of Australia and Mrs Linda Hurley

ADDRI Patrons Their Excellencies The Governor-General of the Commonwealth of Australia His Excellency General the Honourable David Hurley AC DSC (Retd.) and Mrs Hurley, hosted an intimate reception at Admiralty House on Wednesday, 5 October. The Governor-General's warm welcome address referenced his role within the Australian Defence Force to eradicate asbestos from all ADF premises between 2009–2011; hence his strong commitment to ADDRI. Mrs Hurley performed a song she had written to support our cause that was much appreciated by the guests. It was a wonderful way to bring our team, supporters and patients together—to celebrate our joint efforts—and we very much appreciate Their Excellencies' patronage, hospitality and support.



Biaggio Signorelli Foundation Cheque Presentation at Admiralty House



In June 2023, our dedicated Patrons, His Excellency and Mrs Hurley hosted a delightful afternoon tea at Government House with our committed supporters the Signorelli family, who presented ADDRI with a cheque for \$100,000. The Signorelli Foundation has been a steadfast champion of our mission since ADDRI was established in 2009 and we are so grateful for their incredible partnership.

Our reach



Newsletter

A total of 6 newsletters, with a total of

9,071 recipients
6,500 opens

with an open rate of 38% and

553 clicks



LinkedIn

A total of 55 posts, with a total of

19,649 impressions
38 comments
1,790 engagements
652 reactions
53 reposts

and

1,075 clicks



YouTube

On our YouTube channel we received

11,400 views

a watch time of 381.9 hours, 96 new subscribers

164,800 impressions

and an average of 38.20% of viewed content



Facebook

90-day data: Post reach of

3,561

and engagement of

637

90-day data times by 4 to reach 360-day estimate = post reach of

14,244

and engagement of

2,548

The power of education

How can nurses steer patients down the right path if they don't have the information? During the face-to-face education sessions that took place over the year, it became increasingly clear that the education gap was significant. We found that amongst nurses and allied health professionals, across various speciality areas around NSW, there was only limited understanding of mesothelioma and asbestos-related diseases.

- › Limited knowledge on diagnosis and treatment of mesothelioma
- › Limited knowledge on current clinical trials
- › Basic understanding of the asbestos impact
- › Pleural and Peritoneal mesothelioma were known. Limited knowledge on Pericardial and Tunica Vaginalis mesothelioma.

The benefits post training were immediate. Attendees felt better equipped to diagnose, treat and care for patients with mesothelioma, and with continued access to the Mesothelioma Learning Module we know mesothelioma awareness and understanding will be enhanced significantly in this crucial frontline group.





Collaborate

We are on a mission to:

Collaborate with those working toward the elimination of asbestos and dust-related diseases.

“I alone cannot change the world, but I can cast a stone across the waters to create many ripples.”

Mother Theresa

WHO Collaborating Centre

In January 2021, ADDRI was designated by the World Health Organisation as a Collaborating Centre for Elimination of Asbestos Related Diseases for four years, confirming the Institute as a global leader in asbestos-related diseases and asbestos mitigation.

The main role of the WHO collaborating centres is to provide strategic support to the WHO to meet two main needs: implementing WHO’s mandated work and programme objectives; and developing and strengthening institutional capacity in countries and regions.

Designation as a Collaborating Centre brings with it an enhanced visibility for ADDRI and recognition by national authorities, calling public attention to the health issues around asbestos and dust-related diseases. It opens up improved opportunities for ADDRI to exchange information and develop technical cooperation with other

institutions, in particular at international level, and to mobilise additional and sometimes important resources from funding partners.

Since designation, ADDRI has been actioning the broad range of deliverables WHO and ADDRI agreed upon. This includes publishing an internationally recognised e-Toolkit on Asbestos-related diseases (ARDs), important research to fill knowledge gaps on the elimination of asbestos and much needed training on ARDs in developing countries. To ensure maximum accessibility, all our international training videos are now captioned with the 6 United Nations languages (Spanish, Arabic, Russian, French, Chinese and English) as well as Bahasa Indonesian.

This is a giant leap forward to increase global understanding of disease identification, patient care and environmental management of asbestos and deadly dusts.

Cambodia: WHO Collaborating Centre Forum—28–29 November 2022

ADDRI CEO Kim Brislane and Honorary Research Associate A/Professor Sonja Klebe, travelled to Siem Reap, Cambodia to attend the WHO Collaborating Centres Fourth Regional Forum of WHO Collaborating Centres in the Western Pacific. The objectives of this forum included:

- reflecting on how WHO and WHO CCs have worked together—since the last Forum, the endorsement of **For the Future, Towards the healthiest and Safest Region** document and throughout the COVID-19 response—to advance the regional vision
- identifying opportunities to maximise the contribution of WHO CCs to WHO’s work in countries to respond to current and future health challenges
- exploring mechanisms for more effective ways of working between WHO and WHO CCs in the Region for accelerated implementation of For the Future.



The Australian Network of WHO Collaborating Centres

Kim Brislane, CEO of ADDRI, was appointed as a member of the WHOCC Network Executive Committee in April 2023. This appointment marks an exciting opportunity to enhance the profile of WHOCCs within the global health sector in Australia, while also offering evidence-based advice to help shape policy and decision-making. In this capacity, Kim will work collaboratively with the Committee to achieve the WHOCC Global Sustainable Development Goals.

“I am honoured to be nominated to join this incredible group and work alongside our Australian World Health Organisation Collaborating Centre Network to build serious impact and enhance our profile nationally and globally.”

Kim Brislane, CEO

Colombia—Developing clinical guidelines for non-malignant asbestos diseases

“Australia’s experience in scientific research on asbestos-related diseases led by ADDRI can play an important role for Colombia as well as for Latin American and Caribbean countries.

The clinical guidelines for non-malignant asbestos-related diseases, in whose development ADDRI is advancing with the University of Cartagena and the Colombia Asbestos Free Foundation, will be an invaluable tool for the Colombian medical community as it will advance an entry window to standard diagnostics in the identification and surveillance of asbestos-exposed populations, as mandated by the law 1968 of 2019 that banned asbestos in Colombia.”

Guillermo Villamizar—Director, Asbestos Free Colombia Foundation (Fundclas)

The University of Cartagena, Colombia has engaged ADDRI to develop Clinical Guidelines for the diagnosis of Non-Malignant Disease Due to Asbestos Exposure for their country. This project will be delivered over three stages as outlined in the General Framework for Clinical Guidelines for Non-Malignant Diseases Due to Asbestos Exposure document finalised in April 2023, commencing in July 2023 and running until the end of 2024.

ADDRI is experienced in developing guidelines like these and understands its magnitude. In 2013, ADDRI (then known as ADRI) published the *Guidelines for the Diagnosis and Treatment of Malignant Pleural Mesothelioma (MPM)* which systemised the approach of MPM based on the best available evidence in accordance with standards developed by The National Health and Medical Research Council.

Stage one of the process will include establishing the best-practice approach for developing the guidelines, data processing and analysis and other elements leading to the development of a final protocol that will guide the following two stages.

To deliver these guidelines, ADDRI will assemble a specialist team to develop the scope and oversight of project, done in close consultation with the project team in Columbia. The specialist team will include expertise in respiratory/pulmonary diseases, pathology, radiology, oncology, nursing and other subject matter experts who have a direct connection to the work of the Institute.

Global asbestos markets and trade



1,290,000 tonnes

Raw chrysotile asbestos consumed in 2021 by a handful of countries.¹



Only 4 countries still mine asbestos

Russia, Kazakhstan, China and Zimbabwe mine total of 1,280,000 tonnes in 2021.¹



\$385m value

Global trade of chrysotile asbestos and products in 2021 (2012 highest year @ \$595m).²



97% trade in Asia

97% of global trade of chrysotile asbestos and products in 2021 was in Asia (including India).^{1,2}



India largest consuming country

408,000 tonnes consumed in 2021 — 40% of total global trade.¹



Russia largest miner of chrysotile asbestos

Extracting 750,000 tonnes of asbestos in 2022 — 56% of total global supply.¹

¹ United States Geological Survey – 2021 Asbestos <https://www.usgs.gov/centers/national-minerals-information-center/asbestos-statistics-and-information>

² OEC World website. Asbestos 2021 [https://oec.world/en/profile/hs/asbestos-5252400#:~:text=Between%202020%20and%202021%20the,and%20Thailand%20\(%245.89M\)](https://oec.world/en/profile/hs/asbestos-5252400#:~:text=Between%202020%20and%202021%20the,and%20Thailand%20(%245.89M))

Global collaboration and training

Indonesia—Capacity building to improve diagnosis, surveillance and treatment of asbestos-related diseases: Clinical training in Binawan University, Jakarta

“This training was carefully planned to encourage participants to foster lasting relationships with trainers and other participants so they continue working together after the training concluded. Their satisfaction with the detailed information about ARDs and eagerness to continue working together on the ARDs was very gratifying.

Collaboration with ADDRI has allowed Binawan University to participate actively on asbestos issues among the Indonesian government, academics, practitioners, civil society and other experts in Indonesia.”

Dr Anna Suraya—Occupational Medical Specialist, Binawan University, Jakarta, Indonesia.

In June 2023, a team from ADDRI travelled to Indonesia to deliver crucial clinical training to improve diagnosis, surveillance and treatment of mesothelioma and other asbestos-related diseases. This training at Binawan University in Jakarta was supported by the Australian Government Asbestos Safety and Eradication Agency (ASEA) and Union Aid Abroad-APHEDA.

Currently there are only a handful of countries across South-East Asia and the Pacific region that have imposed national bans on the import of raw chrysotile asbestos, as well as the production and use of asbestos-containing materials. Also, the capacity for the healthcare sector across our regions to properly diagnose and treat mesothelioma and other ARDs is very low so the undiagnosed burden of disease caused by the continued use of ACMs will be significant.

As the WHO Collaborating Centre for Elimination of Asbestos Related Diseases, ADDRI is committed to equipping and training healthcare sectors across the region to ensure accurate diagnosis of asbestos-related diseases and adequate treatment for patients.

To ensure training materials were accessible, ADDRI ensured that key training resources were translated into Bahasa Indonesian (and other languages) so that training participants could distribute to their colleagues at their home institutions.

Education is a critical part of the solution and ADDRI was very proud to work alongside global experts to deliver the pilot training program on the “Principles of Mesothelioma and Asbestos Related Disease”. The outcomes of the Pilot training will help inform proposed training in other South-East Asia countries in 2023–24.





An Indonesian story

Tuniah and Kuswoyo worked for the Trigraha Sealsindo company, an asbestos manufacturer for automotive parts in Indonesia for over 20 years. They were Production Line Workers for insulation products. In 2017, both Tuniah and Kuswoyo were diagnosed with asbestos-related diseases and have received some compensation for being diagnosed.

While the Company provided proper personal protective masks for workers at the early stages of their employment, they shifted to only providing basic surgery type masks in the latter years. Tuniah and Kuswoyo advised that the company also provided them with extra food, including the popular sweetened condensed milk, which they believed would reduce the possibility of inhaling fibres, and reducing the risk of lung problems.

Both men are concerned for their future and their ability to provide for their families. They continue to fight for their rights to adequate health insurance coverage for those that can no longer work due to asbestos-related diseases.

France—International Mesothelioma Interest Group (iMig) Conference June 2023

The pioneering research of ADDRI was showcased at the 16th International Conference of the International Mesothelioma Interest Group (iMig) held in Lille, France 26–28 June 2023.

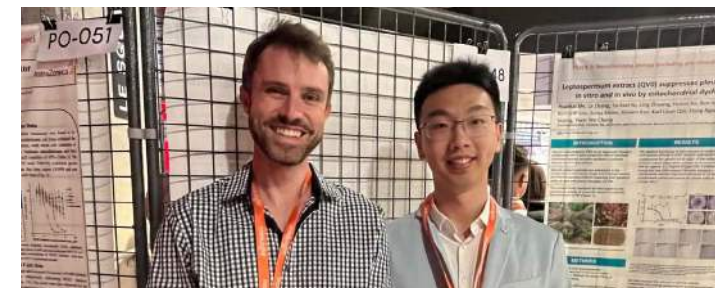
ADDRI Postdoctoral Researchers, Dr Ben Johnson and Dr Huaikai (Peter) Shi, presented their ground-breaking research during the conference:

- Dr Johnson shared his research, funded by AstraZeneca, on “Investigating the potential utility of a WEE1s inhibitor for the treatment of pleural mesothelioma.” This work aims to facilitate the rapid screening of novel immunotherapy drug combinations with significant anti-tumour activity. Implementation of these findings in a clinical setting, could provide mesothelioma patients with additional treatment options that have the potential to significantly enhance their survival and quality of life.
- Dr Shi presented his work on Phase 1 of a Clinical Trial titled “Leptospermum extract (QV0) suppresses pleural mesothelioma tumour growth in vitro and in vivo through mitochondrial dysfunction-associated apoptosis.” This work investigates the potential of an extract derived from the Manuka Leaf, to serve as a natural treatment option for malignant mesothelioma, a currently incurable cancer.

ADDRI was also well represented at the conference with our CEO Kim Brislane and Manager International Projects Shane McArdle attending international meetings to advance partnerships and projects, including the development of the *Guidelines for the Diagnosis and Treatment of Non-Malignant Asbestos-Related Diseases* for Colombia.

Attending this conference was an exciting opportunity to connect, collaborate and further research into mesothelioma diagnosis, treatment and care. ADDRI will build on this to ensure we have a more prominent presence at iMig 2025 in Philadelphia in the United States.

- Postdoctoral Researcher Dr Ben Johnson, awarded a Cancer Institute of NSW Travel Grant
- Postdoctoral Researcher Dr Peter Shi, supported by the ADDRI Development Program funded by Turner Freeman Lawyers
- Mesothelioma Support Coordinator Pam Logan, supported by a special travel grant thanks to Slater and Gordon Lawyers.



Global asbestos bans and restrictions



Only 14 Countries

have developed National Asbestos Profiles to map their asbestos use and burden of disease.³



69 Countries

have imposed national bans on asbestos mining, production and use.⁴



>70% of ban countries

are in the World Bank High Income country category (~12% lower-middle and low-income category).⁵



Asian Development Banks exclude ACMs

Asian Development Bank and Asian Infrastructure and Investment Bank exclude ACMs from projects they fund - >US\$50billion in value.⁶



Only 13% non-ban countries

are in the high-income category – 55% are in Lower middle to low-income categories.⁷



Cambodia ban by 2025

Announced in June 2023, Cambodia will stop using ACMs by 2025 to improve worker welfare.⁸

³ ADDRI e-Toolkit <https://adri.org.au/whocc/etoolkit-2021/global-overview-of-asbestos-and-ard-data/>

⁴ International Ban Asbestos Secretariat – Current asbestos bans http://ibasecretariat.org/alpha_ban_list.php

⁵ World Bank Income Groups as per fiscal year 2021. <https://datatopics.worldbank.org/world-development-indicators/the-world-by-income-and-region.html>

⁶ Union Aid Abroad – APHEDA, Media Release. (March 2022) Asia Development Bank one step closer to asbestos ban (<https://www.apheda.org.au/asia-development-bank-one-step-closer-to-asbestos-ban/>)

⁷ International Ban Asbestos Secretariat. Chronology of asbestos bans and restrictions. Available from http://www.ibasecretariat.org/asbestos_ban_list.php

⁸ International Ban Asbestos Secretariat – *Another Asbestos Ban in Asia* June 2023 <http://ibasecretariat.org/lka-another-asbestos-ban-in-asia.php>

Colombia—Raul's story

Raúl Antonio Medina Ortiz worked as a Logistics Assistant for over 14 years for Incolbest SA, a company in Colombia manufacturing parts for vehicle brakes. In his role, he managed inventories of raw materials, including chrysotile asbestos. At the end of 2017, Raúl started to feel unwell, experiencing problems with breathing, developing a permanent cough, chest pain and night sweats which led him to seek medical attention.

A few months later, he underwent a Pleural Effusion in hospital, a procedure used to drain fluid from the lung. At this time, a lung biopsy was also taken. Raúl was 42 years old when he was diagnosed with stage 3 malignant mesothelioma—a direct result of occupational exposure to asbestos. Here is his story.

"I am 43 years old and I am from Bogotá. At the end of December 2017, some relapses occurred in my state of health that increased in the following month: problems with my breathing, permanent cough, chest pain, night sweats, in short, symptoms that led me to attend my Famisanar. There they told me not to worry, that it was asthma and it could be controlled, for which they prescribed medication and respiratory therapy. I followed all the recommendations to the letter, while continuing with my daily life and without missing work.

But complications continued and my physical appearance was different. 14 and a half years ago I started my last job, in a company dedicated to the manufacture and sale of parts for brakes, called Incolbest SA. I was told that the company's goal is to "save lives with brakes" and I thought that was very good. There I surrounded myself with spectacular people and acquired a lot of knowledge. I am a very enterprising, active, fair person, who likes teamwork and, also, with a good attitude and a very good sense of humor. This led me to create a good work environment that I miss today.

On February 5, 2018, I returned to the Famisanar and the next day I found myself in intensive care at the Fundadores Clinic with an undetermined diagnosis. They only informed me that my right lung was full of fluid and they had to proceed to take tests, drain said fluid and perform a lung biopsy. I remained hospitalized for two weeks and came out with a diagnosis of third degree malignant mesothelioma. I knew then that my life had changed!

At this time, 8 months after the diagnosis, I am undergoing chemotherapy treatment, a very difficult process, since this is accompanied by side effects on my delicate state of health. But, thanks to God and the unconditional support of my family, I have been able to endure them and today I am fighting lung cancer.

I promised my daughters and my wife that I will not fail them and that is why I will continue to fight... for myself, my family and all the people who are exposed to this mineral in their jobs today. Today I make my testimony known, thanking very much the people who are publishing it and those who are getting to know it, so that we realize that, as people, whether we call ourselves employees, businessmen or governors of the State, the solution is found in the hands: prohibit the use of this mineral and, little by little, reduce the mortality rate caused by this disease."



The ADDRI team

It takes a village they say—and it definitely takes a team. Here is ours.

Our executive team



Kim Brislane
CEO



Shane McArdle
Manager—International Projects



Christine Lee
Office Manager



Ross Flemons
Finance Manager



Vivienne Shahin
Manager—Communications



Nina Locke
Office Assistant

Our doctors and researchers



Dr Elham Hosseini Beheshti
Principal Scientist



A/Professor Steven Kao
Medical Oncologist



Winston Lay
Research Assistant



A/Professor Sonja Klebe
Honorary Research Associate
Research Director Jul 22–Jan 23



Ling Zhuang
Technical Officer



Richard Zelei
Research Assistant



Dr Ben Johnson
Postdoctoral Fellow



Aimee Stenekes
Junior Research Assistant



Sakthi Priya Selvamani PhD
Research Assistant



Dr Peter (Huaikai) Shi
Postdoctoral Fellow

Our biobank team



Dr Virginia James PhD
Biobank Officer



Dr Lucy Wang PhD
Biobank Collection Officer



David Baker
Biobank Inventory Officer and
Research Assistant

Our nurses



Jocelyn McLean
Mesothelioma
Support Coordinator



Pam Logan
Mesothelioma
Support Coordinator



Carmel Oostveen
Mesothelioma
Support Coordinator



Kate Butler
Nurse Education and
Project Officer

Our volunteers



Jenny Weismantel
Volunteer



Jo Mezzapica
Volunteer

The ADDRI community

“We must find time to stop and thank the people who make a difference in our lives.”

John F. Kennedy

Our Asbestos Diseases Research Foundation Board

- › Mr Peter Tighe, Deputy Chair of EE-Oz Energy Skills Australia and a member of the Board of Exemplar Systems Pty Ltd and Exemplar Learning Pty Ltd. Previous roles include CEO of the Asbestos Safety and Eradication Agency (ASEA), National Secretary of the Communications Electrical and Plumbing Union (CEPU) and Divisional Secretary of the Electrical Trades Union (ETU). Peter was an Executive member of the Australian Council of Trade Unions (ACTU) and a ministerial appointee to Safe Work Australia. He has served on a variety of vocational Boards.
Independent Chair

- › Dr Chris Colquhoun FAFOEM, Occupational and Environmental Physician and is the Chief Medical Officer of icare (Insurance and Care NSW). Nominated by Dust Diseases Authority.
Nominated by Dust Diseases Authority
- › Dr Teresa Anderson AM, FIPAA, Chief Executive of Sydney Local Health District.
Nominated by the Sydney Local Health District
- › Professor Stephen Clarke OAM, Medical Oncologist at Royal North Shore Hospital in Sydney and Professor of Medicine at the University of Sydney.
Nominated by the Asbestos Diseases Foundation of Australia Inc.
- › Mr Paul Bastian, previously the National Secretary of the Australian Manufacturing Workers’ Union (AMWU), retiring from the position in September 2020.
Nominated by Unions NSW

- › Professor Christine Jenkins AM, Head of the Respiratory Group at The George Institute for Global Health; Clinical Professor at Concord Clinical School and University of Sydney; and Professor of Respiratory Medicine at UNSW Sydney.
Nominated by the ANZAC Health and Medical Research Foundation
- › Mr Matthew Werfel, a sufferer of mesothelioma resulting from exposure to asbestos-containing materials contracted through work and home renovations in the late 1990’s and early 2000’s. Chairperson of the SA Asbestos Coalition, Chief of Staff within a Federal Electorate Office.
Invited by the Board
- › Mr Armando Gardiman AM, Managing Partner at Turner Freeman Lawyers. He specialises and practices in the area of asbestos litigation and acts for clients suffering from mesothelioma, asbestosis and asbestos-related lung cancers.
Invited by the Board

We extend our deepest appreciation to the people and organisations who support our ADDRI community in various ways.

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- › Her Excellency the Honourable Margaret Beazley AC QC and Mr Dennis Wilson

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- › Professor Steven Clarke OAM
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- › Professor David Order
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- › Dr Juliet Burn

Our Advisors

- › Professor Ken Takahashi, Occupational Physician (JEOL, Ltd., Japan), Researcher of Asbestos-Related Diseases, Honorary International Advisor
- › Professor Tim Driscoll Professor Epidemiology and Occupational Medicine, Sydney School of Public Health, University of Sydney
- › Mr Michael Kottek, assessor of asbestos exposure and risk in occupational, residential and environmental settings
- › Dr Anthony Linton, Medical Oncologist at the Concord Cancer Centre, Concord Repatriation General Hospital
- › A/Prof Brian C McCaughan AM, renowned Cardiothoracic Surgeon and pioneer of Extra Pleural Pneumonectomy (EPP) treatment for mesothelioma.
- › Professor Anna Nowak, Medical Oncologist and Deputy Vice Chancellor (Research), University of Western Australia
- › A/Professor Deborah Yates, Senior Staff Specialist, St Vincent's Hospital Sydney, Conjoint Associate Professor at UNSW.

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Our ability to advance our research is only made possible through the generosity of our supporters. We thank each and every one of them for the donations, grants (including pledged grants), bequests and sponsorship received between 1 July 2022–30 June 2023.

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- › Elaine Worsley
- › Anna Zervos
- › Jeffrey Zulman
- › Flossy
- › Kip
- › Lozzie

Key publications and presentations

Peer-reviewed publications

2023

1. Ahmadzada T, Vijayan A, Vafae F, Azimi A, Reid G, Clarke S, **Kao S**, Grau GE, Hosseini-Beheshti E. Small and large extracellular vesicles derived from pleural mesothelioma cell lines offer biomarker potential. *Cancers (Basel)*. 2023 Apr 18;15(8):2364. doi: 10.3390/cancers15082364. PMID: 37190292.
2. Khamhing K, **McArdle S**, Ross J. Awareness and profiling of high-risk asbestos exposure groups in Australia. *Sustainability*. 2023 Mar 27;15(7):5806. doi: 10.3390/su15075806.
3. Walker-Bone K, Benke G, MacFarlane E, **Klebe S**, **Takahashi K**, Brims F, Sim MR, Driscoll TR. Incidence and mortality from malignant mesothelioma 1982–2020 and relationship with asbestos exposure: the Australian Mesothelioma Registry. *Occup Environ Med*. 2023 Apr;80(4):186-91. doi: 10.1136/oemed-2022-108669. Epub 2023 Feb 8. PMID: 36754595.

2022

1. **Chimed-Ochir O**, **Rath EM**, Kubo T, Yumiya Y, **Lin RT**, Furuya S, **Brislane K**, **Klebe S**, **Nowak AK**, Kang SK, **Takahashi K**. Must countries shoulder the burden of mesothelioma to ban asbestos? A global assessment. *BMJ Glob Health*. 2022 Dec;7(12):e010553. doi: 10.1136/bmjgh-2022-010553. PMID: 36543384.

2. **Johnson B**, **Zhuang L**, **Rath EM**, **Yuen ML**, Cheng NC, **Shi H**, **Kao S**, Reid G, **Cheng YY**. Exploring microRNA and exosome involvement in malignant pleural mesothelioma drug response. *Cancers (Basel)*. 2022 Sep 30;14(19):4784. doi: 10.3390/cancers14194784. PMID: 36230710.
3. Jeffers D, Liao YC, **Takahashi K**, Lin RT. Asbestos awareness among the residents of St. Kitts and Nevis: a cross-sectional study. *Global Health*. 2022 Sep 24;18(1):83. doi: 10.1186/s12992-022-00874-w. PMID: 36153532.
4. **Shi H**, Rath EM, Lin RCY, Sarun KH, Clarke CJ, McCaughan BC, **Ke H**, **Linton A**, Lee K, **Klebe S**, Maitz J, Song K, Wang Y, **Kao S**, Cheng YY. 3-Dimensional mesothelioma spheroids provide closer to natural pathophysiological tumor microenvironment for drug response studies. *Front Oncol*. 2022 Aug 26;12:973576. doi: 10.3389/fonc.2022.973576. eCollection 2022. PMID: 36091141.
5. Global Burden of Disease 2019 Cancer Risk Factors Collaborators (**Soeberg M**, Leigh J, **included**). The global burden of cancer attributable to risk factors, 2010–19: a systematic analysis for the Global Burden of Disease Study 2019. *Lancet*. 2022 Aug 20;400(10352):563-91. doi: 10.1016/S0140-6736(22)01438-6. PMID: 35988567.
6. Khoa ND, Phuong NL, **Takahashi K**, Ito K. Transport and deposition of inhaled man-made vitreous and asbestos fibers in realistic human respiratory tract models: An in silico study. *Jpn Archit Rev*. 2022 Aug;00:1-17. doi: 10.1002/2475-8876.12277. Article in Press. PMID:

Conference presentations

2022

1. **Klebe S**. WHO—update and challenges. NCARD Annual Scientific Meeting 2022; McCusker Auditorium, Ground Floor, Harry Perkins Institute for Medical Research Building, WA; Virtual; 27 September 2022.
2. **Johnson B**. Molecular biomarkers for mesothelioma. NCARD Annual Scientific Meeting 2022. McCusker Auditorium, Ground Floor, Harry Perkins Institute for Medical Research Building, WA; Virtual; 27 September 2022.
3. **Kao S**. What's Hot in Mesothelioma? TOGA ASM 2022; Swissôtel, Sydney, 21–22 July 2022.

Conference posters

2023

1. **Johnson B, Shi H, Ke H, Zhuang L, Cheng YY, Klebe S, Kao S.** Investigating the potential utility of a WEE1 inhibitor for the treatment of pleural mesothelioma. 16th International Mesothelioma Interest Group Conference (iMig 2023); Lille Grand Palais, France, 26–28 June 2023.
2. **Shi H, Zhang L, Yu T-K, Zhuang L, Ke H, Johnson B, Rath E, Lee K, Klebe S, Kao S, Qin KL, Pham HNT, Vuong Q, Cheng YY.** Leptospermum extract (QVO) suppresses pleural mesothelioma tumour growth in vitro and in vivo by mitochondrial dysfunction associated apoptosis. 16th International Mesothelioma Interest Group Conference (iMig 2023); Lille Grand Palais, France, 26–28 June 2023.

Invited presentations

2023

1. **Kao S.** Asbestos-Related Diseases. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
2. **Kao S.** Pleural Mesothelioma Treatment. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
3. **Kao S.** Pleural Mesothelioma Treatment: Case Studies. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.

4. **Johnson B.** The research perspective: Emerging diagnostic and treatment strategies for mesothelioma—case study. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
5. **Shi H.** The research perspective: Emerging diagnostic and treatment strategies for mesothelioma—case study. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
6. **Logan P.** Mesothelioma—The Patient Journey. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
7. **Brislane K.** The ADDRI Team. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
8. **McArdle S.** Translating Knowledge to Action—Clinical Training Summary. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia, 21–23 June 2023.
9. **James V.** Pathology Group: Laboratory Tissue Processing. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia—Virtual, 21–23 June 2023.
10. **Rutland T.** Malignant Mesothelioma & Cases. International Symposium & Workshop Asbestos Related Diseases “Principles of Mesothelioma & Asbestos-Related Disease”; Binawan University—Jakarta, Indonesia—Virtual, 21–23 June 2023.
11. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Nepean Hospital—Cancer Care Centre, Sydney, 19 June 2023.
12. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; St George Hospital—Respiratory and Oncology, Sydney, 9 June 2023.
13. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Genesis Care Oncology Frenches Forest—Oncology, Sydney, 6 June 2023.
14. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Wollongong Hospital—Oncology and Haematology, 2 June 2023.
15. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Bankstown Cancer Centre—Oncology, Sydney, 1 June 2023.
16. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Wollongong Hospital—Respiratory Outpatient Service, 25 May 2023.
17. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Concord Repatriation General Hospital—Respiratory Ward, Sydney, 19 May 2023.
18. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Royal Prince Alfred Hospital—Cardiothoracic Ward, Sydney, 16 May 2023.
19. **Johnson B.** Circular RNA’s: Promising biomarker candidates for an improved diagnosis of pleural mesothelioma. ANZAC Research Seminar Series 2023, ANZAC Research Institute; ANZAC 1 Meeting Room, Concord Hospital, 15 May 2023.

20. **McArdle S.** ADDRI International projects and engagement. ANZAC Research Seminar Series 2023, ANZAC Research Institute; ANZAC 1 Meeting Room, Concord Hospital, 15 May 2023.
21. **Butler K.** Understanding Mesothelioma. Mesothelioma Learning Module for Nurses and Professionals Caring for Patients; Royal Prince Alfred Hospital—Respiratory Ward, Sydney, 9 May 2023.
22. **Brislane K.** Annual ADDRI Research Update. Parliamentary Group for Asbestos-Related Disease; Parliament House, Canberra, ACT, April 2023.
23. **Brislane K.** LCCA Presentation: Growing as a leader—Developing your career strategy. 9th Australian Lung Cancer Conference 2023; Gold Coast, 15–17 February 2023.

2022

1. **Brislane K.** Annual ADDRI Research Update. Asbestos Support Group Network Meeting; Melbourne, October 2022.
2. **Johnson B.** Novel circular RNA biomarkers to facilitate an improved mesothelioma diagnosis. NCARD Annual Scientific Meeting 2022; Virtual Presentation, 27 September 2022.
3. Multidisciplinary Masterclass. Chairs: Itchins M & Jayamanne D. Case Presenters: Gray L, Jacques S, Kirwin B. Multidisciplinary Panel: Bassin L, Ludbrook, J, O’Byrne K, Prabhakar C, Westman H, **Klebe S**, Lau E, Mohamudally A. TOGA ASM 2022; Swissôtel, Sydney, 21–22 July 2022.

Travel awards

2023

1. **Johnson B.** Cancer Institute of NSW Travel Grant—16th International Mesothelioma Interest Group Conference (iMig2023), Lille Grand Palais, France, June 26–28, 2023.
2. **Shi H.** ADDRI Development Program funded by Turner Freeman Lawyers—16th International Mesothelioma Interest Group Conference (iMig2023), Lille Grand Palais, France, June 26–28, 2023.
3. **Logan P.** Special Travel Grant—thanks to Slater and Gordon Lawyers—16th International Mesothelioma Interest Group Conference (iMig2023), Lille Grand Palais, France, June 26–28, 2023.

The Financials

Financial Summary

Profit and Loss Statement	2022–23	2021–22	Balance Sheet	30/06/2023	30/06/2022
Revenues			Assets		
Research	1,090,764	1,085,954	Cash and cash equivalents incl Term Deposits	2,468,357	2,878,938
Fundraising	835,250	778,955	Trade and other receivables	540,938	272,644
Interest	74,758	16,581	Property Plant and Equipment	6,414,407	6,668,025
Total	2,000,772	1,881,490	Total	9,423,702	9,819,607
Expenses			Liabilities		
Employee Benefits	1,450,732	1,412,170	Trade and other payables	141,716	216,538
Research consumables/equipment	187,079	288,224	Employee provisions	123,674	117,534
Office expenses	430,337	449,694	Total	265,390	334,072
Depreciation	259,661	265,509	Net Assets	9,158,312	9,485,535
Finance costs	186	170			
Total	2,327,995	2,415,767			
Surplus / Deficit for the period	-327,223	-534,277			

The figures above have been extracted from the audited Financial Statements of ADRF for the relevant periods. The full audited financial statements are available from info@adri.org.au



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