In October, Mater Children’s Hospital’s cardiothoracic surgeon Professor Tom Karl performed the world’s first open-heart surgery using a new patch which mimics human tissue to fix congenital heart defects (CHD) in children.

It was the first time the CardioCel patches, developed by Australian company Allied Healthcare, had been used outside of a clinical trial.

Prof Karl and his cardiac theatre team performed three surgeries using the patch during its launch week, with all young patients now recovering well.

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“The use of CardioCel is expected to add significant long term value to our existing surgical practice of repairing CHD and is expected to allow our patients to live a ‘normal’ life, free of implanted tissue related complications,” Prof Karl said.

Allied Healthcare managing director Lee Rodney said the global medical community had been searching for tissue that would not cause the patient’s own heart tissue to react negatively.

“Ten years of pre-clinical and clinical studies have shown CardioCel patches have no evidence of toxic cell damage or build-up of hard tissue at the site for one to three years post-surgery,” he said.

“CardioCel represents a major breakthrough in this endeavour and it has the potential to alter treatment for a range of tissue related heart repairs.”

In Australia, congenital heart defect prevalence has been recorded at around eight cases per 1000 live births.

More CHD patients are now living into adulthood, requiring lifelong solutions for their congenital heart defects.

Mater’s Neonatal Critical Care Unit recently took delivery of a new milk freezer, thanks to a $10 000 grant from the Commonwealth Bank’s Staff Community Fund.

Each year, Mater’s Neonatal Critical Care Unit (NCCU) cares for approximately 1600 babies who are born premature and one of the most critical factors in giving these babies the best chance of survival is having access to breast milk.

Neonatology & Maternal Fetal Services Deputy Director Lynne Elliott said evidence suggests that premature babies, particularly those born at or before 28 weeks gestation, have better health outcomes if they are fed early with expressed breast milk.

“Research shows that breast milk promotes optimal health and immunity in our smallest patients,” she said.

As mothers are not always able to express milk for their baby or do not have the supply necessary to provide the quantity of milk needed on a daily basis, Mater receives regular donations from the Mothers’ Milk Bank in northern New South Wales.

“The freezer is important as the donor milk arrives to the NCCU frozen and once defrosted needs to be used within six hours. The NCCU currently uses eight litres of donor milk each week as the new freezer enables us to store this quantity of milk,” Ms Elliott said.

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Redland Showgrounds will be transformed into a Christmas wonderland for the Mater Little Miracles Christmas Carnival.

The carnival, held from Friday 14 December to Sunday 16 December, will include rides, sideshow alley games and a nightly visit from the big man himself—Santa Claus.

Mater Foundation Fundraising Director Lesley Ray said the three-day event would be a chance for families to celebrate the upcoming holidays while helping those less fortunate.

“Mater Little Miracles Christmas Carnival is a wonderful way for families to get into the holiday spirit and help make little miracles happen for sick children and babies at Mater,” Ms Ray said.

“We will have rides for all ages, including three ‘big’ rides and 10 children’s rides as well as sideshow alley games, a petting zoo, sample bags, face painting and food and drink vendors.

“People will also be able to try their hand at winning some great prizes through the Mater Little Miracles lucky envelopes or buy tickets for our upcoming Mater Prize Home on the Gold Coast.”

There will also be a chance for children to have their photo taken with Santa from 6 pm to 8 pm nightly.

Entry is a gold coin donation and proceeds will be donated to the Mater Little Miracles Christmas Appeal.

Ingredients:
- 80 g pitted green olives
- 3/4 cup chopped fresh coriander
- 1/3 cup chopped fresh basil
- 60 g dry-roasted walnuts, coarsely chopped
- 1/2 red onion, finely chopped
- 1 green chilli, thinly sliced
- 1 1/2 lbs red wine vinegar
- 3 tsp extra virgin olive oil
- 1/2 tsp caster sugar
- 1.5 kg skin-on salmon fillet, pin boned
- 60 ml (1/4 cup) fresh lemon juice
- Lemon wedges, to serve

Method:
1. Place the olives in a bowl and cover with cold water. Set aside for 20 minutes to soak. Drain. Halve. Return to the bowl. Add the coriander, basil, walnuts, onion and chilli and stir to combine. Use a fork to whisk together the vinegar, oil and sugar in a small jug. Add to the olive mixture and toss until well combined. Season with pepper.
2. Preheat oven to 200°C. Line a roasting pan or ovenproof dish with non-stick baking paper. Place the salmon in the prepared pan. Drizzle over the lemon juice and season with pepper. Cover with another piece of non-stick baking paper. Bake in oven for 20 minutes or until the salmon flakes when tested with a fork in the thickest part.
3. Carefully transfer the salmon to a large serving platter. Top with the herb and walnut mixture. Serve with lemon wedges.

Hint: Walnut and herb salsa can be prepared up to 4 hours ahead. Cover with plastic wrap and place in fridge until needed.

Recipe by Anneka Manning, Good Taste magazine, December 2007.
Mater is tackling ovarian cancer through a cross-campus collaborative drawing on the expertise of researchers and clinical staff to identify better diagnostics, treatments and eventually vaccines.

The Mater Ovarian Cancer Research Collaborative is the first of its kind for Mater and includes staff who specialise in research, gynaecological oncology and surgery, anatomical pathology, oncology, palliative care, genomics and proteomics.

The ultimate goal of the collaborative is to tailor the treatment of ovarian cancer patients at Mater to ensure specific targeting of the correct cancer gene in the individual patient, resulting in more effective and less toxic treatment, leading to better outcomes for patients.

“We are heading towards a more personalised offering; we want to find out the characteristics of their cancer cells and treat them with the specific agents to which they are susceptible,” Mater Director of Gynae/Oncology Associate Professor Lewis Perrin said.

Research Coordinator Claire Davies said one of the greatest concerns with ovarian cancer was that it is still often not diagnosed until it is quite late stage.

“There is still only a 40 per cent survival rate for five years post-diagnosis,” Ms Davies said.

“It is our hope that our research can help to increase the rate of survival; we want to find better diagnostic tests and also identify the best treatment plan,” Associate Professor Jane Armes added.

At 22 years old, Katherine Brown had the world at her feet; she had moved out of home and started her dream job as a teacher working in a small country town.

And then she was diagnosed with ovarian cancer.

“It took me a while to work out I had cancer; I was feeling unwell for a few months but ignored it because I thought it was fatigue. I was a young person just starting out in life,” Katherine said.

“I thought ovarian cancer was something that young people would never get. I wondered ‘why me?’.”

“My family were in disbelief. All my friends and I thought the vaccination for cervical cancer covered ovarian cancer. It doesn’t.”

Surgery revealed a 20 cm tumour and more than four litres of fluid. Surgeons also had to remove Katherine’s right ovary.

She underwent three months of intensive chemotherapy and another surgery before she was clear of cancer cells.

“I still require regular check-ups but I have just celebrated my third anniversary of being cancer free which is a special occasion for me each year,” she said.

“My family and friends also have a different outlook; we are more positive. I live life to the fullest.”
Down with diabetes

Wednesday 14 November was World Diabetes Day which aims to raise awareness of diabetes and call on residents to take urgent action to tackle the diabetes epidemic.

There are currently almost 900,000 Australians living with diabetes and three in five people with diabetes also have cardiovascular disease.

Diabetes is responsible for 4.6 million deaths worldwide each year—that equates to one death every seven seconds—and is also one of the top causes of disability, resulting in life-threatening complications such as heart disease, stroke, lower limb amputations and blindness.

We asked the team at Queensland Diabetes Centre, based at South Brisbane, to share some of their frequently asked questions with us.

What is diabetes?
Diabetes is a lifelong condition where the body does not produce enough of the hormone insulin or does not use it correctly. Cells in the body use insulin to take glucose out of the bloodstream for energy, so when insulin is deficient or not used efficiently, sugar builds up in the blood.

Am I at risk?
Possibly. The most common form of diabetes, Type 2, is on the rise in Australia. This is mostly due to the rise in obesity, increasingly inactive lifestyles and an aging population—all of which are risk factors along with a genetic family history of the disease. Less is known about the causes of Type 1 diabetes but it is usually diagnosed in those under 30 years of age. Gestational diabetes occurs in pregnancy.

How do I know if I have diabetes?
There may be no clear warning signs but the most common symptoms are increased urination, thirst and hunger, tiredness, frequent infections, tingling and numbness in the hands and feet and slow healing wounds.

Can diabetes be cured?
While there is no current cure, treatment options are available including changes to diet, medication and insulin administered by injection or pump. If left untreated, serious long-term complications can occur leading to eye, nerve, kidney and cardiovascular disease and premature death.

If you suspect you may be at risk of developing diabetes, please visit your GP who can refer you to Mater Pathology for diabetes testing.

Mater Mothers sets an Australian record

Mater Mothers’ Hospitals wrote its way into the record books on Sunday 4 November for hosting Australia’s largest gathering of expectant mothers.

The event, held at South Bank piazza, featured a day of activities for mums-to-be including physiotherapy tips, games and prizes, interviews by celebrity host Heather Foord and entertainment by Brisbane band Rush.

Partners and families weren’t forgotten in the excitement with face-painters, magicians and balloon twisters to keep them entertained.

Mater’s Director of Women’s Health Services Maree Reynolds said the event provided a unique opportunity for expectant mums to celebrate the joy of pregnancy and to be a part of a world record attempt.

“Although we fell short of the world record, we have set an Australian record which is something everyone should be very proud of,” Ms Reynolds said.

“We hope our participants enjoyed being part of such a unique event and they will certainly have an interesting story to tell their children when they’re a bit older.”

Among the participants was Jessica Hay who is 13 weeks pregnant with her 12th child and thought taking part in the world record attempt would be ‘fun’.

“I love being pregnant and I love being a mum,” she said, adding that she already has six girls and five boys aged between 14 months and 21 years.
In mid-January, Brisbane Lions coach Michael Voss will face the ultimate fear and jump out of a plane at 14 000 feet—and you could be there beside him!

Vossy has signed up for Mater’s ‘Jump for Cancer’ and will be one of 50 brave fundraisers to skydive at Redcliffe—all with the goal of raising $100 000 for prostate cancer research.

The first six people to register and raise $1700 will jump from the same plane as Vossy on Saturday 19 January 2013.

Other fundraisers will be able to jump on the same day, meet the Lions coach and, if needed, get a pep talk on bravery.

Vossy has long been a supporter of Mater Foundation and encourages all Lions supporters to ‘jump’ on board and face their fear.

“I’m a little nervous about the skydive but it’s something I’ve always wanted to do,” he said.

“I’m looking forward to helping other people face their fear of heights and raise awareness for this great cause and I hope everyone will support the Mater in the great work that they do.”

Talking about prostate cancer saves lives. If you are male and aged over 40, Face Your Fear and talk to your GP about regular checks. Like most cancers, prostate cancer is more likely to be successfully treated if it is diagnosed in the early stages.

For more information about the ‘Jump for Cancer’ or to register to jump with Vossy visit www.talkingpc.org.au or call 1800 440 155.

In the spotlight

Katie Atkins is a Clinical Midwife in the Birth Suites/Pregnancy Assessment and Observation Unit at Mater Mothers’ Hospital (and part-time triathlon coach) who recently represented Queensland in a State of Origin touch football match.

How long have you been at Mater? I have worked at the Mater Mothers’ Hospital since 2004.

When did you decide to take up touch football? I started playing touch football when I was 13 and first represented Queensland and Australia as a schoolgirl. I continued to represent Queensland and Australia until I decided to have children. Last year I decided to go back to playing touch after being asked by one of my old coaches to play in the State Championships and National Touch League. I was then selected to play for Queensland in the touch football State of Origin Mixed Open in Port Macquarie.

How often do you train? I train every day for my individual fitness and I also train once a week with my team. I am so grateful to my family, my husband Daniel and my beautiful girls Ella and Molly for being so supportive during the long journey to State of Origin.

Do you have any highlights from the State of Origin match? We played three games over two days and the highlight for me was to win the second game in a brilliant performance by the whole team. Unfortunately NSW won the decider.

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