



BIOGRID
AUSTRALIA



10

2003

2013

2023

10 years of
advancing health
research through
collaboration


|||||

Annual Report 2012-13

DECEMBER
2003

Molecular Medicine Informatics
Model (MMIM) pilot project funded
by the Victorian Government

BioGrid Facts

 **26** Number of Members at 30 June 2013
representing
42 institutions

 **99**
Journal publications to date

 **91**
Approved active audit/research
projects during 2012-13

Thirty-three
 Current Institution Ethics Approvals
at 30 June 2013

1.26 million
Individual patients available through BioGrid



Conferences

13 Conference presentations
during 2012-13

NATIONAL = Adelaide, Brisbane,
Canberra, Hunter Valley, Melbourne,
Perth, Port Douglas and Sydney

INTERNATIONAL = Europe, UK and USA

2004

IBM won tender to establish
a federated data technology
model for MMIM project

Contents

Chairman's Report	2
Chief Executive Officer's Report	3
About BioGrid	4
Linking with AIHW's National Death Index to Shed Light on Epilepsy	6
Partnering with SAS	7
Collaborating with Industry	8
Working with Consumers	9
Collaborating across Metropolitan and Regional Centres	10
Collaborations across Australia bring Solutions for Endocrinology Researchers	11
Directors' Report	12
Financial Report	15
Directors' Declaration	20
Auditor's Report	21
How your Support will Improve Lives	23
Into the Future: the next 10 years	24
BioGrid Members and Collaborators	25

Our Supporters



FEBRUARY
2005

*MMIM demonstrated live at Bio21
Bioinformatics Symposium querying data
across databases, diseases and institutions*

SEPTEMBER
2005

*MMIM pilot expanded with
funding from the Federal
Government for 2 years*

Chairman's Report



At this significant milestone of 10 years since the inception of the organisation, it gives me great pleasure to present to you the 2012-13 Annual Report of BioGrid Australia. This year's report provides an overview of the achievements of the past 10 years as well as a look into the future at the opportunities ahead for the next 10 years.

The focus of the Board has continued to be on financial sustainability, and during 2012-13, Management prepared, and the Board reviewed and approved a 3-year business plan, which has a key objective of becoming fully sustainable by 2015-16. The focus of the organisation for the 2013-14 year is to finalise and consolidate the recent restructure of BioGrid whilst working towards becoming fully sustainable by 2015-16.

Since its inception in 2003, BioGrid has transitioned from an unincorporated joint venture of collaborative institutions to a not for profit company limited by member guarantee servicing 27 members and collaborators. During the year, the Victorian government committed interim funding for 2012-13 enabling BioGrid to achieve its fiscal goals.

This year's report provides a summary of significant milestones and achievements for BioGrid. One of the significant achievements is the service now available through a partnership with the Australian Institute of Health and Welfare to link on a project specific basis to the National Death Index. This partnership will help researchers access this important dataset more easily, particularly information about how, when and why Australians die. Through this service researchers will be able to progress their work more efficiently which will lead to better information for clinical treatment outcomes and clinical trials.

I would like to thank the many people who have contributed to BioGrid's successes over the years, especially the BioGrid staff and all the clinical leaders and researchers for their hard work and perseverance over the past 10 years. A special thanks to the executive management team; Maureen Turner (Chief Executive Officer), A/Prof Peter Gibbs (Clinical Director), Leon Heffer (Governance and Client Relations Manager) and

Naomi Rafael (Technology and Systems Manager), for their dedication and commitment to the ongoing development of BioGrid.

Since 2003 Melbourne Health has continued to act as Secretariat and home for BioGrid. The continued support for BioGrid from the Melbourne Health executive team is greatly valued and appreciated. In addition, I would like to acknowledge the Member Management Committee for their ongoing support and contribution to BioGrid.

In April this year we welcomed Professor Fernando Martin-Sanchez as a Director to expand the skills and expertise of the BioGrid Board. Prof Martin-Sanchez's expertise in health informatics will enable the organisation to develop and grow to meet stakeholder requirements in this key area. I would like to acknowledge the commitment and dedication of my long-standing fellow Directors, Rob Merriel and Julian Clark both of whom have worked tirelessly setting and achieving fiscal and strategic goals for BioGrid.

The next 10 years offer a number of opportunities for BioGrid. Our key objective is to become fully sustainable by 2015-16 with new linkages to support genomic research and greater participation in clinical trials in Australia to accelerate the development of targeted therapies for patients across Australia.

Professor Bryan Williams
Chairman, BioGrid Australia

SEPTEMBER
2005

SAS terminal server used to query data

OCTOBER
2006

MMIM successful with winning major grant to establish the Australian Cancer Grid under the Healthy Futures Initiative funded by the Victorian Government

Chief Executive Officer's Report



Last October BioGrid Australia was recognised for its application of data linkage and analysis in e-health winning the People's Choice 2012 Excellence in Business Intelligence Award. In June BioGrid was named a 2013 *Computerworld* Honors Laureate in the Health category for using information technology to benefit society. These awards highlight the extraordinary role BioGrid is playing in the Australian health informatics sector.

Over the past 12 months BioGrid's capability has been presented at seven national conferences in health informatics, data governance, data analytics, big data and molecular genetics. Time and again over the past 10 years, BioGrid's collaborative linkage platform has been recognised for the part it can and has been playing in enabling research that will inform and change the way patients are viewed and treated.

BioGrid is unique in the health informatics sector and has a distinct competitive advantage both nationally and internationally in that it operates a real-time federated data integration platform across multiple organisations, jurisdictions and disease settings where privacy and security of the data and intellectual property of the data custodians is ethically protected.

This collaborative model is known throughout the research community as a trustworthy source of secondary use of data independent of government and the corporate sector. This independence allows BioGrid to support members and collaborators across jurisdictions and diseases as well as facilitate appropriate engagement with industry without compromising the collaboration's intent and objectives.

The focus of the organisation for the 2013-14 year is to finalise and consolidate the recent restructure of BioGrid whilst working towards becoming fully sustainable by 2015-16. This will be accomplished by focusing on increasing revenue through servicing investigator-led and commercial-led research projects as well as generating new sources of revenue through donations and project specific grants. Revenue is forecast at \$1.1 million for 2013-14, \$1.5 million for 2014-15 and \$1.9 million for 2015-16 at which point BioGrid is forecast to return a surplus of \$101,000.

To generate these revenue streams and achieve the company's objectives, the business will build on the success of investigator-led and commercial-led research projects contracted to date. This will be supported by increasing data volume and research usage of the existing datasets by marketing the value of data linkage and access via the BioGrid platform to researchers, students, industry and governments.

Looking ahead, BioGrid will continue to take a leadership and advocacy role in record level data linkage on behalf of its members. This will enable further expansion of valuable datasets being available to researchers through BioGrid.

I would like to acknowledge the BioGrid Member Management Committee for their ongoing support and contribution to BioGrid, as well as the Scientific Advisory Committees for their support. Our members play a very important role in promoting the value and usage of the collaborative data-sharing platform. The achievements of the past 10 years, as outlined in this report, would not have been possible without the commitment from each member of the BioGrid team; thank you for your dedication to the organisation and its objectives.

BioGrid looks forward to the next 10 years of facilitating collaborative research encompassing personalised medicine approaches through targeted therapies made possible by genomics research. New linkages will also support greater participation in clinical trials in Australia in a bid to accelerate the development of targeted therapies and commercialisation of research. The future is looking very promising for BioGrid and its members and collaborators – let's continue to work together to achieve great research outcomes over the next 10 years.

Maureen Turner
Chief Executive Officer, BioGrid Australia

SAS upgraded to Business Enterprise for querying and reporting data

MMIM project renamed and branded BioGrid Australia

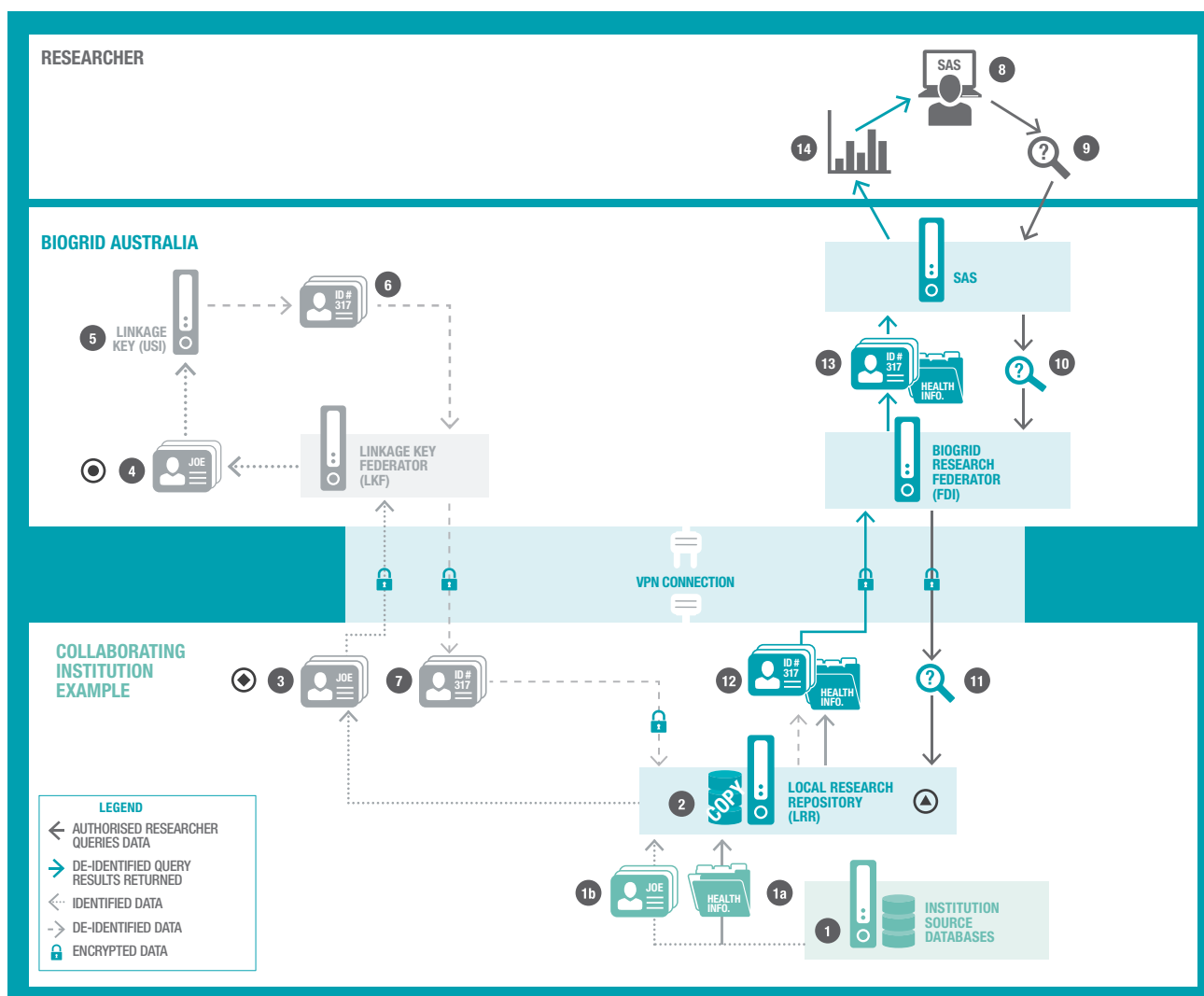
About BioGrid

Data governance, security and ethics are at the core of BioGrid's federated data sharing platform that securely links patient level clinical, biospecimen, genetic and imaging data sets across multiple sites and diseases for the purpose of medical research.

BioGrid's infrastructure and data management strategies address the increasing need by authorised researchers to dynamically extract and analyse data from multiple sources whilst protecting patient privacy.

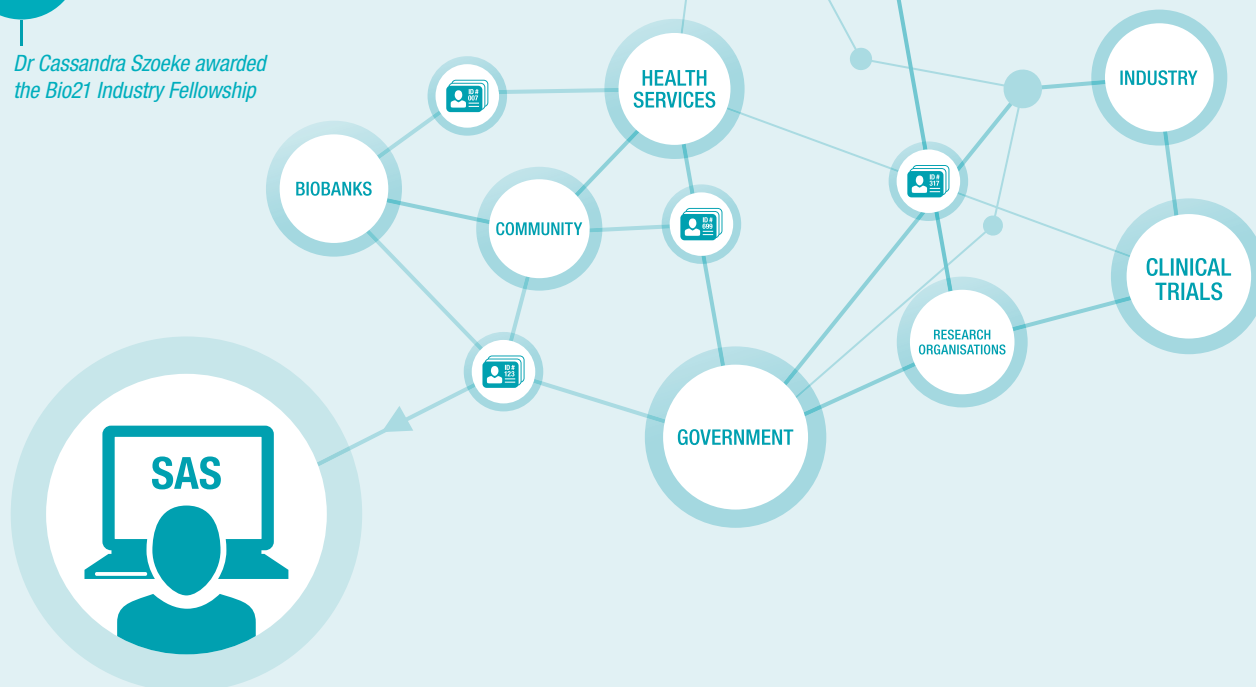
In the health sector, BioGrid is a trusted independent virtual real-time data repository. Investment in BioGrid has facilitated a combination of technology, collaboration and ethics approval processes for data sharing that exist nowhere else in the world.

For more information on how BioGrid works, what data is linked to BioGrid and how to access data, go to www.biogrid.org.au



2007

Dr Cassandra Szoeki awarded
the Bio21 Industry Fellowship



1. Patient information is recorded in one or more data sources (i.e. databases, spreadsheets), which are stored on a collaborating institution's computer network. This information comprises clinical health information data and identifiers.
- 1a. Clinical health information data are the collection of facts and opinions about an individual's health and wellbeing. Treatment details are an example of clinical health information data.
- 1b. Identifiers are the data items, which identify the individual who is described within a patient record. A patient's name is an example of an identifier.
2. The patient information is copied into replica data sources, which are stored on the collaborating institution's Local Research Repository (LRR), on a nightly basis or frequency agreed by the collaborating institution.
3. A limited set of identifiers from each new patient record are sent from the replica data sources to BioGrid Australia's Linkage Key Federator (LKF) via a secure encrypted Virtual Private Network (VPN) connection.
4. The Linkage Key Federator (LKF) forwards the identifiers to BioGrid Australia's Linkage Key server. This server hosts the Unique Subject Identifier (USI) database.
5. The identifiers are compared with the USI database's records to establish whether data about the patient already exists within a BioGrid-linked data source.
If a match is found for a patient's data, the patient has previously been allocated a USI. If no match is found for a patient's data, the patient's set of identifiers and a new USI are written to the USI database.
6. The USIs for the matching and non-matching patients are sent back to the LKF.
7. The USIs are sent back to the LRR via a secure encrypted VPN connection and stored with their associated clinical health information data.

8. Once authorised access via the BioGrid Australia Data Access Application System has been provided to the researcher, they can commence querying the de-identified data they have approval to access.
9. The researcher submits a data query to BioGrid Australia's statistical analysis (SAS) computer via the Internet.
10. The SAS computer forwards the query to the FDI.
11. The FDI requests the specified data from each of the relevant LRRs via a secure encrypted VPN connection.
12. The clinical health information data and USIs from applicable patient records are sent to the FDI via a secure encrypted VPN connection. These data are combined into a temporary table. The table is removed from the FDI upon completion of the query.
13. The SAS computer reads and processes data from the temporary table.
14. The SAS computer presents the results of the query to the researcher.

BioGrid provides alternative matching methodology referred to as exact matching using a cryptographic hashing function when individual identifiers cannot be brought together in one place for comparison.

- ⚙️ Highly secure hash generating software is installed at collaborating institution. The hashing algorithm is run at collaborating institution's site on the replica data sources. A unique hash value is created for each set of identifying patient data. No identifying information ever leaves the source site.
- 🔑 Unique hash value from each new patient record is sent from the replica data source to BioGrid Australia's Linkage Key Federator (LKF) via a secure encrypted Virtual Private Network (VPN) connection. No identifying information ever leaves the source site.
- 🔄 The LKF synchronises its matches with the BioGrid Australia's Linkage Key server. This server hosts the Unique Subject Identifier (USI) database.

JUNE
2008

The BioGrid Australia project under Melbourne Health named a Computerworld Honors Laureate

2009

Multigenic predictive model for the outcomes of the treatment of epilepsy was patented

2009

BioGrid facilitated demonstration international collaboration project between Vanderbilt University and the University of Melbourne

Linking with AIHW's National Death Index to Shed Light on Epilepsy



According to the World Health Organisation, epilepsy is the world's most common serious brain disorder. Epilepsy is more than three times as common as multiple sclerosis, Parkinson's disease and cerebral palsy. It is estimated that nearly 800,000 people in Australia will be diagnosed with epilepsy at some stage in their life. Over 225,000 Australians are currently living with epilepsy with around 25,000 people in Australia being diagnosed with epilepsy each year.

Determining the optimal treatment for patients with newly diagnosed epilepsy is problematic. Since 2005 BioGrid Australia has played an important role in managing the data and facilitating epilepsy research. BioGrid's involvement began many years ago when it worked with the epilepsy research group at the Royal Melbourne Hospital in the development of a data collection tool to capture data for research.

Some of the early research using the data was conducted by Dr Slave Petrovski and colleagues to determine a first "proof-of-concept" study to identify patterns of multiple genetic markers that predicted with a high degree of accuracy the chance that a patient would achieve successful seizure control after starting medication treatment for epilepsy.

Professor Terry O'Brien (pictured), Dr Petrovski and colleagues were the first to develop a multi-SNP risk prediction model to predict the likelihood that a newly diagnosed epilepsy patient will respond to the most common anti-epileptic drugs. Following this research, clinical parameters such as a patient's pre-treatment mood disorder was also found to predict their response to epilepsy treatment. Their findings have important clinical translation as they suggest that treatment of any neuropsychiatric disorder in parallel with anti-epileptic therapy could improve the control of seizures in patients newly diagnosed with epilepsy.

This research into the field of epilepsy pharmacogenomics has been presented at over a dozen national and international scientific meetings, resulting in an international patent, and has won numerous achievement awards.

Through the years by working with BioGrid, the neuro-oncology team, led by Associate Professor Kate Drummond at the Royal Melbourne Hospital, has been able to research the areas of tumour-associated epilepsy and prognostic factors in glioblastoma multiforme. These projects were undertaken by linking and then analysing the epilepsy, brain tumour and hospital pathology databases through BioGrid.

In 2012, a new era began for epilepsy research through a partnership between the Australian Institute of Health and Welfare, BioGrid Australia and the University of Melbourne. The initiative is providing medical researchers with easier access to valuable data about deaths in Australia, enabling them to understand more about how, when and why Australians die.

Epilepsy researchers are using the system to investigate the link between hospital-based and population databases to learn more about the risk of death in people newly diagnosed with epilepsy. The study is the first phase of a larger study planned to investigate the risk and contributors to mortality amongst several specific groups of patients.

Researchers have been able to identify those patients who had died, and the cause of death. The study findings show that there is increased mortality amongst a group of individuals who were diagnosed with epilepsy and highlights the importance of investigating mortality in specific patient groups. This information will inform health care planning to reduce the incidence of mortality after a diagnosis of epilepsy.

2009

Enhanced technical infrastructure for robustness and scalability utilising IBM and SAS

MARCH 2009

BioGrid Australia collaboration formed between 18 members as the organisation becomes a company limited by guarantee

Partnering with SAS



Technology has always been a significant component of BioGrid. The last decade has seen BioGrid working with its partners to bring the best of all options available to its members. The vision is for BioGrid to be an integrated research platform that supports treatment and research centres across Australia in all diseases, integrating data across biospecimen, treatment, clinical outcome, genetic and clinical trial databases.

From its inception, BioGrid selected a federated data technology platform as the best solution to address data governance, security, privacy, intellectual property and ethics requirements. In 2004 IBM won the tender to establish a federated data technology model for the then Molecular Medicines Informatics Model project, now known as BioGrid Australia. The model enabled data from participating institution members to be connected to BioGrid and stored in a separate virtual repository.

In September 2005 BioGrid introduced SAS® technology via a terminal server, which provided a user-friendly method of running web-enabled data queries. BioGrid upgraded its technology offering in January 2007 to include SAS® Business Enterprise Version. This software resulted in the system to be easier to use for multiple users. BioGrid also implemented SAS® Web Report Studio enabling non-technical users to find, interact with, create, and share reports using data available in BioGrid.

In 2009 BioGrid upgraded its technical architecture to ensure a sustainable technological operation. The upgrade enabled a reduction in physical space requirements and power consumption as well as simplifying backup plans.

During 2012 the physical provisioning of users was automated using IBM Tivoli Identity Manager. BioGrid also completed the upgrade to SAS® Version 9.2 and the automation of physical provisioning of users. This work allowed security and user provisioning to be unified to give a single source of truth for the BioGrid users.

In 2013 probabilistic (eIndex™) and deterministic (GRHANITE™) matching were upgraded to further improve patient matching across the BioGrid platform. This enhancement has allowed BioGrid to work with agencies such as the Australian Institute of Health and Welfare.

During 2013-14, BioGrid is implementing a new product, SAS® Visual Analytics deployed on a specific HP server, which will enable users to visualise data easily, explore data utilising drag-and-drop capability and quickly design interactive reports that can be distributed to anyone, anywhere via the Web or mobile devices.

For the users, there is little doubt that these advances to BioGrid technology is making a difference. According to Professor Tom Kay, Director, St Vincent's Institute, Victoria, remarkable resources exist for clinical research in the health system.

"Capturing this into a scientific framework is a tremendous opportunity and challenge requiring high quality platforms that clinicians and scientists can access. BioGrid is a vital resource that allows patient information from multiple collaborating institutions to be combined to provide greater power."

As BioGrid embarks on the next 10 years, it has strengthened its relationship with SAS to provide improved services to its users. The vision is well on the way to becoming a reality.

OCTOBER
2009

Partnered with Roche Products Pty Ltd on a 4-year prospective research study into the clinical outcomes and analysis of Bevacizumab use in metastatic colorectal cancer of 1000 patients; project extended in 2013 for a further 3 years

2009

Dr Jeanne Tie awarded the 2009 Bradley Stuart Beller Merit Award

Collaborating with Industry



Over the past 10 years, BioGrid has helped to change clinical practice, particularly in the area of colorectal cancer. Colorectal cancer remains the second most common cancer affecting men and women in Australia, and the second leading cause of cancer related death. This success would not have been possible without the support of industry partners, such as Roche Australia.

One of the first data collection tools that BioGrid developed was for colorectal cancer. Since then, researchers have used the collection to explore and find answers to many previously unsolved questions.

In 2008, researchers were able to identify challenges to managing genetic risk factors for disease by linking data from the genetic clinic and colorectal cancer clinical databases. This study, like others to come, was ground breaking. For the first time, researchers were able to demonstrate that many patients who were likely to have an inherited risk of bowel cancer were not being referred for genetic testing and advice, and that many that were referred failed to attend the appointments.

In 2009, Roche Products and BioGrid announced a four-year partnership to work on a prospective study into how clinicians make treatment decisions in metastatic colorectal cancer. The first of its kind, the project set out to increase understanding of the impact of current treatments on patients in advanced colorectal cancer.

The importance of the work being undertaken through the BioGrid data was underpinned in 2009 when the American Society of Clinical Oncology awarded BioGrid member Dr Jeanne Tie with the 2009 Bradley Stuart Beller Merit Award for her project investigating the BRAFV600E mutation. This mutation has been found in approximately 10% of colorectal cancer cases.

By 2010, researchers had furthered their work into colorectal cancer and the efficacy of faecal occult blood testing in saving lives by diagnosing cancer at an early stage, when the likelihood of cure is high.

One such study, using data linked through BioGrid enabled a comprehensive analysis of the cost of treating bowel cancer according

to the stage at which the cancer was diagnosed. Compared to 1999 estimates the cost of treating early stage cancer in 2010 was shown to be largely unchanged whereas the cost of treating advanced cancer has escalated dramatically. In 2011 these results and others were used to inform the Federal Government of the importance of continuing with and expanding Australia's National Bowel Cancer Screening Program.

Over the years, BioGrid has collaborated with many industry partners in retrospective studies in colorectal cancer. These studies provide access to real-world patient treatment data and enable industry to better understand how their products are used and what influences product use in the clinical setting.

Progress into the Roche supported prospective study into metastatic colorectal cancer was well advanced by 2012. Clinicians from 15 sites across 6 states and territories were well on their way to having collected data on 1,000 patients. The investigation is enabling data to be collected on all patients with metastatic colorectal cancer, including those that do not receive any treatment. Survival outcome is recorded for all patients, and for treated patients details regarding first and second line treatment, response and toxicity, is collected.

According to Associate Professor Peter Gibbs (pictured), leader of the study, the database's particular strengths are its inclusiveness, with data captured on elderly patients, those with a poor performance status and those not receiving treatment; all groups that are not studied in clinical trials. The next three years will see data being collected on a further 1,500 patients and the next version of the database come to fruition.

APRIL
2010

Sir Gustav Nossal launched CART-WHEEL.org, the world's first ethically approved website for consumer driven research into rare tumors and molecular sub-types of common tumors

2010

Slave Petrovski awarded the American Australian "Sir Keith Murdoch Fellowship" for medical research

Working with Consumers



Patients with rare tumors make up 20% of all cancers and 30% of all cancer deaths, yet receive less than 5% of research funding. To help counteract this, BioGrid developed the Centre for Analysis of Rare Tumors (CART-WHEEL.org) database and website. The portal is the world's first ethically approved website dedicated to linking people who have rare tumors into clinical trials and research.

Since its launch in April 2010 by Professor Sir Gustav Nossal, CART-WHEEL.org has received steady interest from registrants and participants who have consented for the use of their clinical information for future research.

In 2011 the first study funded by the Victorian Cancer Agency focused on evaluating the accuracy of the CART-WHEEL.org database. Overall the data entered by cancer consumers showed a 72-83% consistency rate. This is similar to that of the hospital database with regards to the date of diagnosis, name of diagnosis, site of disease, past medical history and treatment details. This study confirms the reasonable accuracy in cancer consumer reported medical data when using a well-designed online questionnaire.

CART-WHEEL.org data has been used in a high-grade mucinous ovarian cancer study. In 2012, three patients, whose tissues samples have already undergone RNA sequencing at the Walter and Eliza Hall Institute of Medical Research, have been recruited. This study looking at the gene molecular profiling of this rare but highly lethal disease will aim to clarify treatment options for this cohort of patients who often tend to be young.

The existing functionality of the CART-WHEEL.org database will be expanded over the next two years to improve opportunities for research into rare cancers by servicing the needs of participants and their treating clinical teams. This upgrade will serve to facilitate a new project looking at the current use of "off-label" drugs for patients affected by rare cancers, important information for patients as well as medical professionals.

To address the issue of insufficient data globally to conduct clinical trials and research, during 2012-13, CART-WHEEL.org became involved in two significant research initiatives.

Nationally, CART-WHEEL.org is working with the Inherited Cancer Connect (ICCon) Partnership that aims to provide a cohesive research network for Familial Cancer Centres (FFCs) operating within Australia to transform FFCs clinical practice into a research resource to improve the health of people with a hereditary predisposition to cancer. An important part of the project will be the establishment of the Consumer Advisory Panel, which will be a mechanism for direct consumer input on the strategic research directions, priorities and conduct of research projects for the ICCon Partnership.

From an international perspective, CART-WHEEL.org is in discussions with a joint program known as the International Rare Cancer Initiative (IRCI) where organisations agree to work together to encourage the development of clinical trials in rare cancers through participation in IRCI.

During 2012, the CART-WHEEL.org team formed an alliance with Rare Cancers Australia, the national peak consumer body for people with rare cancers. According to Associate Professor Clare Scott (pictured), Principal Investigator of CART-WHEEL.org, this approach will be expanded over time in recognition of the important role played by cancer consumer groups in providing education and support for patients and their carers.

BioGrid's experience with developing and managing a web-based patient-entered rare cancer database has been applied to developing an online database for a rare genetic disease, Hereditary Hemorrhagic Telangiectasia (HHT). This capability could be expanded to other rare diseases in the future.

A/Prof Clare Scott image courtesy of The Walter and Eliza Hall Institute.

JUNE
2011

Australian Cancer Grid project completed including three major cancer research projects in collaboration with the CSIRO

2012

Dr Kathryn Field awarded the Fulbright Postgraduate Alumni (WG Walker) Scholarship and the Frank Knox Memorial Fellowship program at Harvard University

Collaborating across Metropolitan and Regional Centres



In October 2006 the Molecular Medicines Informatics Model (renamed BioGrid Australia late 2007) won a major grant to establish the Australian Cancer Grid (ACG) under the Healthy Futures Initiative funded by the Victorian Government. The grant enabled data on all cancer tumour streams to be collected and linked across Victoria and to be expanded across Australia to facilitate collaborative research. Over four years the project expanded from its initial pilot sites to members across five states and territories covering 41 hospitals and research organisations.

By June 2011, the ACG project had achieved significant data collection and linkages across many tumour streams and had supported many research projects including three major collaborations with the Preventative Health Flagship of the CSIRO.

The ACG paved the way for further development of the Australian Comprehensive Cancer Outcomes and Research Database (ACCORD) across a number of tumour streams. Initiated by BioGrid for member hospitals that require a web-based comprehensive data collection and entry system, ACCORD allows clinicians to analyse the clinical and demographic characteristics of cancer patients at their hospital. Specific modules were developed for cancer of the bone and soft tissue (sarcoma); bowel; brain; breast; head and neck; prostate; kidney; chronic lymphocytic leukaemia; and hepatocellular carcinoma.

In 2012, an ACCORD Minimum Dataset for solid tumours was completed and is now being used by various member sites, particularly where there is limited resource available to capture data. This is proving to be particularly useful for several regional hospitals.

An electronic chemotherapy prescribing ACCORD module was also developed for colorectal cancer, enabling clinicians to record and prescribe neo-adjuvant, adjuvant and palliative chemotherapy regimens. This module has played a major role in increasing patient safety as chemotherapy dosages are calculated automatically and printed prescriptions minimise the chance of human error in prescribing and administering doses of chemotherapy. In 2012, the software was

expanded to all solid tumours and now utilises eviQ protocols to ensure appropriate doses of chemotherapy are ordered. The software is currently in user testing by oncologists and pharmacists before finalising it for implementation.

Thanks to these oncology data collections, BioGrid has enabled research activity in a number of tumour streams, as well as across disease areas. To date, there are 76 reported peer-reviewed publications in oncology.

A number of important industry-led retrospective research studies have also been established, enabling the tracking of trends in medication use in routine practice and variations in routine care to assist in understanding how products are used. Today research and collaboration in cancer tumour research has grown to ensure regional sites, such as Goulburn Valley Health, are linked in and able to participate in national research studies and clinical trials.

The next 10 years will see these linkages expand to ensure greater participation in clinical trials in Australia thereby accelerating the development of targeted therapies and attracting new pharmaceutical research investment in participating centres.

SEPTEMBER
2012

*BioGrid links to the
Victorian Cancer Biobank*

OCTOBER
2012

*BioGrid won the People's
Choice Excellence in
Business Intelligence Award*



Collaborations across Australia bring Solutions for Endocrinology Researchers

It is estimated that 280 Australians develop diabetes every day and that 3.3 million Australians will be living with Type 2 diabetes by 2031. Diabetes is one of the top 10 causes of death in Australia and is responsible for complications affecting the feet, eyes, kidneys and cardiovascular health. With a current total annual cost to the Australian economy of at least \$6 billion, research into the prevention and cure of diabetes is of great importance and requires access to high-quality clinical data.

Since 2005 BioGrid has developed a comprehensive approach to collecting data, which integrates clinical, pathology and demographic data to support clinical care within diabetes clinics. When complete, data from all collaborating institutions will form one of the largest and most complete datasets guiding diabetes management in Australia.

Today the web-based diabetes system is allowing clinicians to document care of patients with Type 1, Type 2 and gestational diabetes related complications and treatments. The system also functions as an efficient tool for generating concise letters for general practitioners and comprehensive management summaries for the discharge of patients from clinic.

The diabetes system and linkages is already making a huge difference to clinicians and researchers who rely on systemized surveillance for complications and risk factors when looking after people with chronic disease. For example, researchers are using combined diabetes data from contributing hospitals to evaluate different aspects of diabetes care and the impact on retinopathy, nephropathy, peripheral vascular disease, peripheral neuropathy and cardiovascular disease. Another project has researchers tracking clinical results in patients with diabetes who transition from paediatric to adult care.

According to Professor Peter Colman (pictured), Director of Diabetes and Endocrinology at the Royal Melbourne Hospital, the BioGrid diabetes database is helping to put Australia at the cutting edge for diabetes service delivery, research and quality.

In 2011, BioGrid further developed the BioGrid Diabetes database thanks to an industry donation. The upgraded system is allowing clinicians to collect data on insulin pump usage by patients. The aim is to allow more systemised care for Type 1 patients. The database is now being used by five Victorian hospital diabetes clinics and will soon be used in Adelaide and Brisbane.

BioGrid is also working to make the database available to many more diabetes centres around Australia as part of a National Association of Diabetes Centres (NADC) project. For NADC members, the database will serve as a patient medical record as well as a source of data for practice evaluation and quality audit. The Australian National Diabetes Audit (ANDA) relies on member centres to collect clinical data on a national biennial basis. The BioGrid diabetes database will support relevant data collection and reporting that will allow each centre to benchmark their data against others.

As the diabetes database system begins to deliver results for researchers, this year BioGrid has focused on developing and linking a national pituitary web-based clinical registry database through funding from Novartis. Currently BioGrid is managing the development of the software, which will be installed at seven sites across five states then linked to the BioGrid platform during 2013-14. This new clinical tool database will be a national data collection of importance for patient care and medical research in pituitary disease.

Directors' Report

Your directors present their report on the company for the financial year ended 30 June 2013.

The names and details of the company's directors in office during the 2012–2013 financial year and until the date of this report are outlined below.



Professor Bryan Williams
PhD, Hon FRSNZ

Director and Chairman since March 2009

Director, Monash Institute of Medical Research (2006–present)

Director, Pacific Edge Pty Ltd (New Zealand) (2013–present)

Director, Pacific Edge Pty Ltd (Australia) (2008–present)

Director, Cancer Trials Australia Pty Ltd (2009–present)

Director and Chairman, MEI Pharma Inc. (2006–2013)

Director, Centre for Cancer Research, Monash Institute of Medical Research (2006–2012)

Member of the Victorian Cancer Agency Consultative Council (2009–2012)

Chairman, Department of Cancer Biology, Lerner Research Institute, The Cleveland Clinic Foundation in Cleveland, USA (1991–2005)

Professor, Department of Genetics, Case Western Reserve University, Cleveland, USA (1993–2005)



Mr Robert Merriel
BA, Grad Dip Psychology, Grad Dip Accounting, CPA

Director and Company Secretary since 2009

Associate Director, Healthcare Management Advisors (2011–present)

Director, BioComm Services Pty Ltd (2007–2011)

Director, Australian Technology Fund Pty Ltd (2004–2011)

Member, BioGrid Management Committee (2004–2011)

Chairman, BioGrid Management Committee (2005–2009)



Dr Julian Clark
BSc (Hon), PhD, MAICD, FTSE

Director since March 2009

Head of Business Development, The Walter and Eliza Hall Institute of Medical Research (2003–present)

Director, Catalyst Therapeutics Pty Ltd (2012–present)

Chairman & Director, CSIRO Preventative Health Flagship (2011–present)

Director, Cancer Trials Australia Pty Ltd (2009–present)

Director, BACE Therapeutics Pty Ltd (2009–present)

Chairman & Member, Sansom Institute Advisory Committee, University of South Australia (2006–present)

Director, Julian Clark Consulting Pty Ltd (1999–present)

Chief Executive Officer, Cancer Therapeutics CRC Pty Ltd (2007–2009)

Director, Alchemia Limited (2006–2008)

Director, Genera Biosystems Pty Ltd (2004–2007)

Director, Meditech Research Limited (2004–2006)



Professor Fernando Martin-Sanchez
BSc, MSc, PhD Informatics, PhD Medicine, FACHI

Director since April 2013

Chair, Health Informatics, Melbourne Medical School, The University of Melbourne and Head, Institute of Broadband Enabled Society and Biomedical Informatics Research Laboratory (2011–present)

Director, Health and Biomedical Informatics Centre, The University of Melbourne (2013–present)

Associate Director, Institute of Broadband Enabled Society (2013–present)

Director, Health Informatics Society of Australia (2011–2013)

Vice President, International Medical Informatics Association (2007–2013)

Director, Spanish Health Informatics Society (1995–2011)

Founding Director, Medical Bioinformatics Research Unit (1998–2011)

Chief Information Officer, National Institute of Health Carlos III, Spain (1993–1998)

Meetings attended

The following outlines meetings held and attended by each of the Directors in 2012-2013.

Director	Board of Directors		Audit & Risk Committee	
	Held	Attended	Held	Attended
Bryan Williams	10	10		
Robert Merriel	10	10	4	4
Julian Clark	10	9	4	4
Fernando Martin-Sanchez	3	2		

The entity is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. As such, no shares are issued or held by directors. If the entity is wound up, the constitution states that each member is required to contribute a maximum of \$10 each towards meeting any outstanding obligations of the entity. At 30 June 2013 the number of members was 26 (2012: 26).

Principal activities

The principal activities of the Company are data sharing that advances health research by linking privacy-protected and ethically approved clinical, imaging and biospecimen data among a wide network of health collaborators. During the year there was no significant change in the nature of those activities.

Company's objectives

The company's objectives are to:

- Facilitate internationally competitive medical research into the causes of ill health and disease;
- Provide an ethically approved privacy protected service to connect data sources;
- Invest in technology development to ensure ongoing alignment with leading technology that supports privacy protected data connection; and
- Be sustainable in order to fulfill the company's vision and mission and to service the needs of its' members.

To achieve these objectives, the company:

- Supported the Victorian Department of Health and Victorian Cancer Agency by providing data linkage and data management services for state funded cancer research projects;
- Worked with key stakeholders in the health sector to facilitate major research projects in Victoria and Australia;
- Provided ongoing training and support for quality specialist staff committed to providing a technology platform that supports medical research through privacy protected data connection; and
- Retained a business development focus targeting organisations with the resources to support project work with the company.

Key performance measures

The company measures its own performance through the use of both quantitative and qualitative benchmarks. The benchmarks are used by the directors to assess whether the Company's short term and long term objectives are being achieved.

	2013		2012	
	Actual	Benchmark	Actual	Benchmark
Total Number of Members	26	26	26	25
Current Institution Ethics Approvals	33	33	33	32
Approved Active Research Projects	91	86	83	87
Journal Publications to Date	99	81	77	67
% Income from Membership Subscriptions	17%	7%	12%	5%

Dividends

The Company Constitution forbids the payment or distribution of any profits, income or assets to the members.

Directors remuneration

The directors did not receive remuneration from the Company with the exception of reimbursement of expenses relating to their director role.

Indemnification of officers and auditors

During the year the Company paid a premium in respect of a contract insuring the directors of the Company, the Company secretary and all executive officers of the Company and of any related body corporate against a liability incurred as such a director, secretary or executive officer to the extent permitted by the *Corporations Act 2001*.

The Company has not otherwise, during or since the year, indemnified or agreed to indemnify an officer or auditor of the Company or of any related body corporate against a liability incurred as such an officer or auditor.

Auditor's independence declaration

The lead auditor's independence declaration for the year ended 30 June 2013 has been received and can be found on page 14 of this report.

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

On behalf of the Directors



Bryan Williams, Director
Melbourne, 12 September 2013

BioGrid Australia Limited

31 136 185 647

Auditor's Independence Declaration

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2013 there has been:

- (i) no contraventions of the auditor independence requirements as set out in the *Corporations Act 2001* in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

Saward Dawson Chartered Accountants



Tim Flowers

Partner

Blackburn, Victoria 3130

12 September 2013

Financial Report

Statement of Profit or Loss and Other Comprehensive Income

For the Year Ended 30 June 2013

	Note	2013 \$	2012 \$
Revenue	2	1,301,619	2,540,813
Depreciation		(3,153)	(525)
Professional fees		(57,012)	(55,685)
Consultant expenses		(1,447,799)	(1,677,865)
Bank charges		(456)	(417)
License fees		(223,140)	(180,523)
Administrative expenses		(162,137)	(104,281)
Other expenses		(9,121)	(8,967)
Surplus/(Deficit) from ordinary activities		(601,199)	512,550
Other comprehensive income			
Items that will not be reclassified subsequently to profit or loss		—	—
Items that will be reclassified subsequently to profit or loss when specific conditions are met		—	—
Total other comprehensive income for the year		—	—
Total comprehensive income for the year		(601,199)	512,550

Statement of Financial Position

As at 30 June 2013

	Note	2013 \$	2012 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	4	225,003	942,930
Trade and other receivables	5	403,256	166,066
TOTAL CURRENT ASSETS		628,259	1,108,996
NON-CURRENT ASSETS			
Property, plant and equipment	6	5,780	8,932
TOTAL NON-CURRENT ASSETS		5,780	8,932
TOTAL ASSETS		634,039	1,117,928
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	7	170,953	58,593
Income in advance		25,000	20,050
TOTAL CURRENT LIABILITIES		195,953	78,643
TOTAL LIABILITIES		195,953	78,643
NET ASSETS		438,086	1,039,285
EQUITY			
Reserves	8	83,000	83,000
Retained surpluses		355,086	956,285
TOTAL EQUITY		438,086	1,039,285

Statement of Changes in Equity

For the Year Ended 30 June 2013

2013	Retained Surpluses \$	General Reserves \$	Total \$
Balance at 1 July 2012	956,285	83,000	1,039,285
Deficit for the year	(601,199)	–	(601,199)
Balance at 30 June 2013	355,086	83,000	438,086

2012	Retained Surpluses \$	General Reserves \$	Total \$
Balance at 1 July 2011	526,735	–	526,735
Surplus for the year	512,550	–	512,550
Transfers from retained earnings to general reserve	(83,000)	83,000	–
Balance at 30 June 2012	956,285	83,000	1,039,285

Statement of Cash Flows

For the Year Ended 30 June 2013

	Note	2013 \$	2012 \$
CASH FROM OPERATING ACTIVITIES:			
Receipts from customers		1,209,157	2,164,323
Payments to suppliers and employees		(1,941,221)	(2,369,762)
Interest received		14,137	46,066
Net cash provided by (used in) operating activities	9	(717,927)	(159,373)
CASH FLOWS FROM INVESTING ACTIVITIES:			
Acquisition of property, plant and equipment		–	(9,457)
Net cash used by investing activities		–	(9,457)
Net cash increase (decrease) in cash and cash equivalents		(717,927)	(168,830)
Cash and cash equivalents at beginning of year		942,930	1,111,760
Cash and cash equivalents at end of financial year	4	225,003	942,930

Notes to the Financial Statements

For the Year Ended 30 June 2013

Note 1 Accounting policies

1a General information

The directors have prepared the financial reports on the basis that the company is a non-reporting entity because there are no users who are dependent on its general purpose financial reports. These financial reports are therefore special purpose financial reports that have been prepared in order to meet the requirements of the Corporations Act 2001. The company is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

BioGrid Australia Limited is a company limited by guarantee, incorporated and domiciled in Australia. Such accounting policies are consistent with those of previous periods unless stated otherwise.

1b Basis of preparation

The financial reports have been prepared in accordance with the requirements of the mandatory Australian Accounting Standards applicable to entities reporting under the Corporations Act 2001 and the significant accounting policies disclosed below, which the directors have determined are appropriate to meet the needs of members.

The financial reports, except for the cash flow information, have been prepared on an accruals basis and are based on historical costs unless otherwise stated in notes. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise. The amounts presented in the financial statements have been rounded to the nearest dollar.

Note 1 Accounting policies continued

1c Revenue

Revenue from the rendering of services is recognised upon delivery of the service to customers.

Grant revenue is recognised in the statement profit and loss and other comprehensive income when the entity obtains control of the grant and it is probable that the economic benefits gained from the grant will flow to the company and the amount of the grant can be measured reliably.

Donations are recognised as revenue when received.

All revenue is stated net of the amount of goods and services tax (GST).

1d Property, plant and equipment

Plant and equipment

Plant and equipment are measured on the cost basis. Cost includes expenditure that is directly attributable to the asset..

Depreciation

The depreciable amount of all plant and equipment is depreciated on a straight-line basis over the asset's useful life to BioGrid Australia Limited commencing from the time the asset is held ready for use.

1e Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within short-term borrowings in current liabilities in the statement of financial position.

1f Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST.

Cash flows are presented in the statement of cash flows on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

1g Income taxes

No current or deferred income tax assets or liabilities have been raised by the company as it is exempt from income tax under Division 50 of the Income Tax Assessment Act.

1h Comparative figures

When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

1i Trade and other payables

Trade and other payables represent the liability outstanding at the end of the reporting period for goods and services received by the company during the reporting period which remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

1j New accounting standards for application in future periods

The AASB has issued new and amended Accounting Standards and Interpretations that have mandatory application dates for future reporting periods. The directors have decided against early adoption of these Standards, but does not expect the adoption of these standards to have any impact on the reported position or performance of the company.

	Note	2013 \$	2012 \$
--	------	------------	------------

Note 2 Revenue

Operating revenue			
– Government grants		500,000	1,657,585
– Commercial-led projects		485,021	471,442
– Investigator-led projects		36,916	–
– Member subscriptions		224,950	294,355
– Interest received		14,137	46,066
– Donations		40,000	71,333
– Other income		591	31
Total Revenue		1,301,619	2,540,813

Note 3 Surplus from ordinary activities

Expenses			
Remuneration of auditor			
Auditing or reviewing the financial report		5,250	4,750
Other services		1,700	3,400
		6,950	8,150

Note 4 Cash and cash equivalents

Cash at bank		225,003	942,930
		225,003	942,930

Note 5 Trade and other receivables

CURRENT			
Trade receivables		203,256	120,536
GST receivable		–	45,530
Receivable from Melbourne Health		200,000	–
		403,256	166,066

Note 6 Property, plant and equipment

Plant and equipment			
At cost		9,458	9,457
Accumulated depreciation		(3,678)	(525)
Total plant and equipment		5,780	8,932

	Note	2013 \$	2012 \$
Note 7 Trade and other payables			
CURRENT			
Unsecured liabilities			
Trade payables		75,219	—
GST payable		2,796	—
Accruals		92,938	58,593
		170,953	58,593

Note 8 General reserve

The general reserve records funds set aside as a contingency should the company decide to wind up.

Note 9 Cash flow information

Reconciliation of cash flow from operations with net current year deficit			
Net surplus(deficit) for the year		(601,199)	512,550
Cash flows excluded from surplus attributable to operating activities			
– Depreciation		3,153	525
Changes in assets and liabilities			
– (Increase)/decrease in trade and term receivables		(282,721)	453,994
– (Increase)/decrease in other assets		—	12,000
– (Increase)/decrease in income in advance		4,950	(1,041,269)
– Increase/(decrease) in trade payables and accruals		157,890	(97,173)
		(717,927)	(159,373)

Note 10 Company details

The registered office of the company is:

BioGrid Australia Limited
6 North, Main Building, The Royal Melbourne Hospital
300 Grattan St, Parkville 3050
Victoria

Note 11 Members' guarantee

The company is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$10 each towards meeting any outstanding obligations of the company. At 30 June 2013 the number of members was 26.

Directors' Declaration

The directors have determined that the company is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to the financial statements.

The directors of the company declare that:

1. The financial report and notes, as set out on pages 15 to 19, are in accordance with the *Corporations Act 2001* and:
 - (a) comply with Accounting Standards; and
 - (b) give a true and fair view of the company's financial position as at 30 June 2013 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial report.
2. In the directors' opinion, there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.



Bryan Williams
Director

12 September 2013



Robert Merriel
Director

BioGrid Australia Limited
31 136 185 647

Independent Audit Report to the Members of BioGrid Australia Limited

Report on the Financial Report

We have audited the accompanying financial report, being a special purpose financial report, of BioGrid Australia Limited (the company), which comprises the statement of financial position as at 30 June 2013, and the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, a summary of significant accounting policies, other explanatory information and the directors' declaration.

The Responsibility of the Directors' for the Financial Report

The directors of the company are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial report, are appropriate to meet the requirements of the Corporations Act 2001 and are appropriate to meet the needs of the members. The directors' responsibility also includes internal control as the directors determine is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We have conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the company's preparation of the financial report that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

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

Independence

In conducting our audit, we have complied with the independence requirements of the Corporations Act 2001. We confirm that the independence declaration required by the Corporations Act 2001, provided to the directors of BioGrid Australia Limited would be in the same terms if provided to the directors as at the date of this auditor's report.

20 Albert Street / PO Box 256
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contact@youraccountant.com.au

PRINCIPALS: Bruce Saward FCA Cliff Dawson FCA
Peter Shields CA Tim Flowers CA
ASSOCIATE: Cathy Braun CA
Liability limited by a scheme approved under Professional
Services Legislation



BioGrid Australia Limited

31 136 185 647

Independent Audit Report to the Members of BioGrid Australia Limited**Auditor's Opinion**

In our opinion the financial report of BioGrid Australia Limited is in accordance with the *Corporations Act 2001*, including:

- a. giving a true and fair view of the company's financial position as at 30 June 2013 and of its performance for the year ended on that date; and
- b. complying with Australian Accounting Standards to the extent described in Note 1 and the Corporations Regulations 2001.

Emphasis of Matter*1. Going Concern*

Without modifying our opinion, we draw attention that the company sustained a deficit of \$601,199 for the financial year ended 30 June 2013 and, as of that date, the company's net assets amounts to \$438,086. These conditions indicate the existence of a material uncertainty that may cast significant doubt about the company's ability to continue as a going concern.

2. Basis of Accounting

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report is prepared to assist BioGrid Australia Limited to meet the requirements of the Corporations Act 2001. As a result, the financial report may not be suitable for another purpose.

Saward Dawson Chartered Accountants**Tim Flowers**

Partner

Blackburn, Victoria 3130

12 September 2013

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**CHARTERED
ACCOUNTANTS**



A member of
Russell Bedford
International

JUNE
2013

99 journal publications to date that have utilised data through BioGrid

JUNE
2013

BioGrid achieves one million individuals available in the data sharing platform

How your Support will Improve Lives

Medical research is critical for improving the health and quality of life of all Australians. BioGrid exists to provide vital support to researchers across Australia by providing them with authorised access to real-time clinical, imaging and biospecimen data across institutions, jurisdictions and diseases.

Our members are collaborating for research across a number of diseases. Linking longitudinal population health studies to relevant diagnosis, treatment and pathology data as well as mortality and cause of death data is critical for research into the prevention and cure of diseases.

The data collection, management and linkage services that BioGrid provides is enabling researchers to advise on new clinical practice directions, support clinical trials and provide guidance on treatment options for a range of diseases that affect many Australians.

We have prioritised these data services because of the number of Australians affected:

- By the age of 85 years, 1 in 2 males and 1 in 3 females will have been diagnosed with cancer.
- It is estimated that 280 Australians develop diabetes every day and that 3.3 million Australians will be living with Type 2 diabetes by 2031.
- Patients with rare cancers make up 20% of all cancers and 30% of all cancer deaths, yet receive less than 5% of research funding.
- It is estimated that nearly 800,000 people in Australia will be diagnosed with epilepsy at some stage in their life.

Our services have won accolades and awards across the years including the 2013 *Computerworld* Honours Laureate for providing researchers with data that is easily accessible and in a format that meets ethical and privacy requirements.

Researchers used BioGrid's bowel cancer data collection to inform the Federal Government of the importance of expanding the National Bowel Cancer Screening Program.

Our services and programs continue to attract important partnerships from the industry sectors of IT and pharma in their bid to provide medical researchers with affordable and accessible solutions.

Invest in the health of all Australians

There are many ways to support BioGrid Australia. Every donation helps us provide better services for medical researchers across the country who, each day, are working to improve the health of all Australians. BioGrid has Deductible Gift Recipient status and all donations over \$2 are tax deductible. BioGrid is an Australian not for profit company and all donations are in Australian dollars.

There are several ways you can donate and help improve the lives of all Australians by supporting our services that facilitate medical researchers in their daily work. These include one-off donations, regular giving or a gift in your will.

All of these are easy to set up and a great way of showing your commitment to BioGrid's ongoing work of providing researchers with the data they need. You can register online at www.biogrid.org.au.

As a BioGrid Champion you'll also receive regular updates of our work.

We look forward to you joining us in our mission of providing a knowledge platform for the ethical integration of data for research to reduce the burden of disease and improve human health.



JUNE
2013

BioGrid named a *Computerworld*
Honors Laureate

26
CONNECTED
INSTITUTIONS



27
DATA TYPES

52
DATA CUSTODIANS



Into the Future: the next 10 years

The next decade will see BioGrid building on what has been a successful initial 10 years. It will continue to realise its vision of providing an integrated research platform that supports treatment and research centres across many disease areas, integrating data across biospecimen, treatment, clinical outcome, genetic and clinical trial databases.

The driving force behind these endeavours, which has seen BioGrid win many accolades including being named a *Computerworld* Honors Laureate, is the ongoing need to provide researchers with data that is easily accessible and in a format that meets ethical and privacy requirements.

Genomics and genetic variants are among the top priorities for BioGrid as it works to meet the needs of current and future members. These priorities are made realistic with the announcement in 2012 that BioGrid is a collaborator on the Australian Node of the Human Variome Project. A NeCTAR grant is currently funding data linkage of molecular data, via BioGrid, to Familial Cancer and InSiGHT datasets managed by Professor Finlay Macrae, Head of Colorectal Medicine and Genetics at the Royal Melbourne Hospital.

While in its initial stage, this project will collect information about every genetic variant reported by an Australian diagnostic laboratory and store it in a secure online repository. The information will be linked to clinical data from Australian clinics using BioGrid. The data collection, including information on genes, variants and phenotype will be shared with Locus specific databases internationally.

BioGrid infrastructure is enabling the privacy protected connection between pathology laboratories and clinical data so the Australian node can share pathology interpretations and hence improve consistency in diagnosis, initially in Australia, but ultimately also enabling such information to be accessible to authorised users internationally.

In other areas, work is progressing well with the creation of new and potential linkages including hospital admission databases held by State Governments and registries, such as prescribing and procedure data, held by Federal Government agencies. These new linkages will build on the successful partnership signed in 2012 between the Australian Institute of Health and Welfare and BioGrid, which makes the National Death Index data available to research members on a project specific basis.

BioGrid is also investigating the potential to bring on board other data held currently by disease specific registries and various 'omics data that support systems biology research. These efforts by BioGrid will continue to help researchers who are working to analyse and identify biomarkers that increase knowledge on the causes and outcomes of all diseases.

Over the next few years, BioGrid will be supporting the *Centre of Research Excellence for Reducing the Burden of Colorectal Cancer by Optimising Screening: Evidence to Clinical Practice* led by Associate Professor Mark Jenkins. It is anticipated that the Australasian Colorectal Cancer Family Study will be linked to relevant treatment, stage, recurrence, polypectomy and pathology data on tumours as well as mortality and cause of death data utilising BioGrid.

Any new linkages will also support greater participation in clinical trials in Australia in a bid to accelerate the development of targeted therapies and commercialisation of research as well as attract new and additional pharmaceutical research investment to participating centres.

The future looks bright for both BioGrid and its research members and collaborators.

2013

BioGrid partners with SAS and HP for SAS® Visual Analytics for fast, efficient visualisation of data

JUNE
2013

AIHW National Death Index available through BioGrid on a project specific basis

BioGrid Members and Collaborators



ACT Health
Canberra Hospital

AlfredHealth

Alfred Health
The Alfred
Caulfield Hospital
Sandringham Hospital



Austin Health
Austin Hospital
Heidelberg Repatriation Hospital



Baker IDI Heart and Diabetes Institute



Ballarat Health Services
Ballarat Base Hospital
Queen Elizabeth Centre



Barwon Health
Geelong Hospital



Bendigo Health
Bendigo Hospital



Central Adelaide Local Health Network
Royal Adelaide Hospital
The Queen Elizabeth Hospital



Eastern Health
Angliss Hospital
Box Hill Hospital
Healesville Hospital
Maroondah Hospital



Goulburn Valley Health
Goulburn Valley Hospital



Latrobe Regional Hospital



Ludwig Institute for Cancer Research



Melbourne Health
The Royal Melbourne Hospital

Monash Health

Monash Health
Monash Medical Centre, Clayton
Monash Medical Centre, Moorabbin
Casey Hospital
Dandenong Hospital



Monash University*



Northern Health
The Northern Hospital



Peninsula Health
Frankston Hospital
Rosebud Hospital



Peter MacCallum Cancer Centre



Radiation Oncology Victoria



St Vincent's Hospital, Melbourne



Tasmanian Government Department of Health and Human Services
Royal Hobart Hospital
Launceston General Hospital



The Royal Children's Hospital



The Royal Women's Hospital



The University of New South Wales



The University of Melbourne



The Walter and Eliza Hall Institute of Medical Research



Western Health

Western Health
Western Hospital
Sunshine Hospital
The Williamstown Hospital

**Non-member collaborator*



**BIOGRID
AUSTRALIA**

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Design: Taylor & Grace
Printing: Camten RL
Published November 2013



This document has been printed on
recycled paper that is FSC certified.