

APSAD Awards for Excellence in Science Research and Practice 2014 Winners

CLINICAN AWARD – ASSOCIATE PROFESSOR ADRIAN DUNLOP

Nominator's Comments

Associate Professor Adrian Dunlop is a rare example of an individual with both medical and academic (doctorate) degrees. He has been instrumental in Australian drug policy for over two decades, holding leadership roles in both clinical and professional roles. Some highlights of his career, particularly pertinent for this award include:

- Chief Addiction Medicine Specialist, Mental Health and Drug & Alcohol Office (MHDAO), NSW Ministry of Health (holding responsibility for AoD policy at the state level)
- Receiving the 2010 Clinical Leader of the Year award for the HNE District Staff Achievement Awards for medical leadership, and commitment to patients from disadvantaged groups and for supporting his service to maximise a 'client centred' focus
- Development of national clinical guidelines for opioid dependence and in particular multiple guidelines relating to the use of pharmacotherapies during pregnancy
- Receipt of a prestigious Churchill Fellowship to conduct research internationally in relation to addiction and pregnancy treatments
- Leadership roles in APSAD, and the Australian Chapter of Addiction Medicine

He has provided inspirational leadership to a generation of clinicians, clinical staff and researchers and contributed significantly to the wellbeing of countless numbers of individuals affected by substance use.

Nominee's Information

With over 20 years of experience as an addiction clinician and 16 years as a clinician/researcher, I currently serve as the Area Director and Addiction Medicine Senior Staff Specialist with Hunter New England (HNE) Local Health District, Drug & Alcohol Clinical Services (2007-current). I also hold the position of Chief Addiction Medicine Specialist (2014 - current) for the Mental Health Drug and Alcohol Office, NSW Ministry of Health following the appointment as Clinical Advisor in Drug and Alcohol (2012-2013). I am a Conjoint Associate Professor with the School of Medicine and Public Health, University of Newcastle and a member of the Centre for Translational Neuroscience and Mental Health, University of Newcastle and Hunter Medical Research Institute.

I have extensive clinical experience in managing patients with a wide range of substance use problems including opioids, stimulants, cannabis, tobacco and alcohol, the provision of services for groups with distinct needs including pregnant women, parents with substance use problems, indigenous people and rural populations. My position for the HNE Health District spans a range of clinical addiction work. This includes inpatient withdrawal and hospital consultation liaison services, outpatient treatment, community opiate substitution prescribing and attendance at the amphetamine and cannabis clinics. I am also a member of the high risk maternal service for pregnant women who use substances.

In 2010 I was awarded Clinical Leader of the Year at the HNE Health District Staff Achievement Awards for providing outstanding medical leadership, my commitment to and respect for patients of disadvantaged groups and for driving the service to become more patient-centred. Nominated

by fellow staff members, I was also recognised for my contribution to research, significant growth of the service since my appointment, encouraging staff to use evidence based care and leading a robust clinical review process to ensure the delivery of care is safe and appropriate. In 2005 I received a Churchill Fellowship to study addiction and pregnancy treatment in the USA, Canada, UK and Europe.

In addition to ensuring the provision of high quality clinical care, I have a keen interest in the improvement of care through clinically relevant research. As seen in my CV I have attracted significant collaborative research funding. This has provided assistance to investigate and publish research that has made important impacts on both health practice and patient outcomes in addiction. For example, I have been involved in research that has: evaluated stimulant treatment in NSW following the provision of a new service that resulted in reductions in methamphetamine use and improvements in mental health (McKetin R., Dunlop A., et al., 2013); assisted in the development of national guidelines for opioid dependence (Lintzeris N., Leung S., Dunlop A., et al., 2013); established Hepatitis C treatment in opiate treatment settings (Alavi M., Grebely J., Micallef M., Dunlop A., 2013); validated and implemented a brief treatment outcome measure in Australian drug and alcohol settings (Ryan A., Holmes J., Hunt V., Dunlop A., et al., 2014); trialled a new medication for cannabis withdrawal (Allsop D., Copeland J., Lintzeris N., Dunlop A. J., et al 2014)

As demonstrated by my publication list, I have maintained an extensive collaborative research network that includes clinician researchers and university based academics both nationally and internationally. A significant international collaborative effort that I was involved in was the systematic Cochrane review of LAAM. My ongoing commitment to positively influence patient-centred service delivery is supported by my continued involvement in the development of clinical guidelines including opioid dependence, drug use during pregnancy, smoking cessation and prescribing in drug withdrawal. As outlined in my CV I have also authored patient education booklets and multiple book chapters.

I am a foundation Fellow of the Chapter of Addiction Medicine in the Royal Australasian College of Physicians, was state branch chair for the NSW/ACT from 2007-2011, after being honorary national secretary from 2004-2006. I have been the Australasian Professional Society on Alcohol and other Drugs (APSAD) president (2009-2011) and have played a key role in their annual conference, and developing joint national and international conferences. For example, I was involved in facilitating the recent 2013 National Institute on Drug Abuse (NIDA) International Forum held in San Diego, USA, sponsored by the NIDA International Program and APSAD. I am a member of the Australian Association of Consultant Physicians and key international professional addiction research and clinical groups including the College of Problems on Drug Dependence (CPDD, USA), Society for the Study of Addiction (UK), the International Society for Addiction Medicine and International Doctors for Health Drug Policies. In addition to being a CPDD member, I also sit on the CPDD, NIDA International Committee. My inclusion in multiple state and national health advisory groups and steering committees (see CV) that focus on the enhancement of models of care across drug and alcohol settings, further highlights the clinically significant impact my work and experience has made in the field.

I am a strong supporter of clinical, coursework and research based education. This is demonstrated through my involvement in the University of Sydney's Opiate Treatment Accreditation Course and undergraduate addiction medicine teaching through the joint university (Newcastle and New England) medical school, as well as post graduate Resident Medical Officer and registrar teaching. I currently supervise a Bachelor of Medical Science research student and three research higher degree students (PhD candidate and Psychology Masters candidates) through the University of Newcastle. I have also previously supervised a PhD Student (Monash

University, 2009) and a Doctorate of Clinical and Health Psychology student (University of Newcastle, 2012).

In 2010 I was invited to present at the Europad conference in Slovenia and in 2009 at the Toxicomanie, Hepatitis, Sida conference in France. I have reviewed manuscripts for national and international journals including *Addiction*, *Drug and Alcohol Dependence*, *Drug and Alcohol Review*, *Australian Family Physician*, *Australian Prescriber* and *British Journal of Criminology*.

EARLY CAREER AWARD – DR SARAH LARNEY

Nominator's Comments

Dr Sarah Larney is an exceptionally talented National Health and Medical Research Council Early Career Fellow at the National Drug and Alcohol Research Centre, University of New South Wales. I am sure she will be a future leader in the alcohol and other drugs field and I am delighted to nominate her for the APSAD Early Career Award.

Dr Larney's work is located within a strong social justice framework, and her work has contributed important findings to the evidence base on prisoners who inject drugs. She has published in high-impact international journals on opioid substitution therapy (OST), and hepatitis C virus, in prison settings. Significantly her work has shown that providing OST to opioid-dependent prisoners reduces their risk of dying in prison, and reduces the risk of re-incarceration. Given the paucity of evidence-based treatment for substance use disorders in most correctional settings around the world, this research is critical for informing innovative and effective policy development.

Dr Larney's research on hepatitis C in prisons has demonstrated that this infection is endemic in prisoner populations globally, and provides evidence for increased access to testing and treatment for incarcerated persons. In particular, her work on hepatitis C in United States prisons, undertaken as a part of her NHMRC Early Career Fellowship, has highlighted the severe limitations of current hepatitis C testing and treatment policies in correctional settings. This work has major implications for contemporary policy development and clinical practice in US prisons.

I believe Dr Larney is a highly committed and exceptionally talented future leader in the AOD field, and public health generally, and provide this nomination accordingly.

Nominee's Information

As an early career researcher, my contribution to the alcohol and drug field has been through an innovative program of research examining the impact of incarceration on the health and wellbeing of people who inject drugs (PWID). A consistent theme of my work is that with few exceptions, 'prisoner' is a temporary identity, and harms experienced while incarcerated have implications for broader public health. My research is grounded in a social justice framework, arguing that incarcerated PWID are entitled to the same therapeutic and preventive interventions (including harm reduction interventions) that are available to the broader population.

My work includes two distinct, but related, lines of enquiry: outcomes of opioid substitution therapy (OST) for people in prison and recently released from prison, and hepatitis C virus (HCV) among prisoners who inject drugs. In relation to the former, as part of my PhD research, I published a review that highlighted the limited availability of OST in correctional settings, as well as a systematic review and meta-analysis showing that OST reduces injecting-related HIV risk behaviours in prison (see supporting documentation, Larney, *Addiction* 2010;105:216-223). I led the first study to show that OST on release from prison, with continued treatment in the community, reduces reincarceration (supporting documentation, Larney et al., *Addiction* 2012;107:372-380). In recent years, I have examined the impact of OST on deaths in prison and

post-release. I undertook the first ever study of deaths in custody specifically among opioid-dependent prisoners, and showed that OST in prison dramatically reduces mortality risk for this group (supporting documentation, Larney et al., *BMJ Open* 2014; doi:10.1136/bmjopen-2013-004666). I was second author of a further paper demonstrating that OST is also associated with reduced risk of death post-release. My work in this area has been highly cited, and used to argue for increased implementation of OST in correctional settings, both domestically (specifically in Queensland) and internationally (the US state of New Mexico).

As a National Health and Medical Research Council Early Career Research Fellow, I have focussed on the pressing issue of HCV in prison. With financial support from the World Health Organization, I undertook a systematic review of HCV prevalence and incidence in prisons globally, finding that onequarter of all prisoners, and two-thirds of prisoners who inject drugs, are HCV antibody positive. This paper was published in the journal *Hepatology* (impact factor 11.19) (supporting documentation, Larney et al., *Hepatology* 2013;58:1215-1224). A key finding of this review was that data on HCV prevalence in US correctional populations are a decade old; most are from prior to 2000. In an effort to address this issue and generate up-to-date epidemiological data, I undertook an analysis of HCV prevalence in prisoners in the US state of Pennsylvania and demonstrated that current US Centers for Disease Control guidelines for HCV screening are inadequate for prisons (supporting documentation, Larney et al., *American Journal of Public Health* 2014;104:e69-e74). As a result of this work, I was interviewed by the Pennsylvania news outlet Newsworks, and published a commentary recommending universal HCV screening and substantially improved access to HCV antiviral therapy in prison. This work has been central to policy in the area, cited by key organisations such as the Office of HIV/AIDS and Infectious Disease Policy of the US Department of Health and Human Services. My work on HCV epidemiology in US correctional settings is ongoing and has potential implications for the roll-out of new antiviral therapies in this context.

I have an excellent publication and communication record more broadly. Since 2007 I have published 35 peer-reviewed papers (17 as first author) in leading international journals, including *Addiction*, *Drug and Alcohol Dependence*, *Hepatology*, and the *American Journal of Public Health*. These papers have been cited 128 times (Scopus, 4 September 2014). I am lead author of a chapter on post release substance use for a forthcoming book on substance use in prisoners, and in 2013 and 2014, I received National Institute on Drug Abuse funding to attend the US Academic and Health Policy Conference on Correctional Health to present my work on drug-related harm among prisoners. In September 2014, I was an invited speaker on the incarceration of people who inject drugs at the International Congress on Addiction Science in Tehran, Iran.

In sum, to date I have built up a significant body of research on drug use in one of the most marginalised populations, people who are incarcerated and also have a history of injecting drug use.

My future work will build upon this and significantly increase the evidence base, with the overall aim of providing evidence on how best to improve the quality of life of these most at risk individuals.

FIRST PEOPLES AWARD – JIMMY PERRY

Nominator's Comments

For the last 14 years Jimmy has worked for the Aboriginal Drug and Alcohol Council SA Inc. on the Makin' Tracks project. He provides support for communities and Aboriginal health professionals around drug and alcohol issues across the whole of SA and also in NT, Qld, NSW

and WA. He has extensive experience in remote and regional communities and in prevention as well as clinical management approaches.

His contribution to the field has been at so many levels - but primarily he has contributed significantly at the grass-roots/ community level. He has worked tirelessly visiting, supporting, and mentoring health and AOD workers throughout South Australia, and the cross-border regions. For most communities the burn-out of staff is high, as is the staff turnover. A significant factor in this is the geographical and professional isolation. The regular visits from Jimmy and other Makin' Tracks project officers have provided consistency for those communities during the changes. Through Jimmy these workers - and their communities - have professional support, and access current and appropriate resources, that they wouldn't normally have due to their isolation.

He is a well-known face throughout the state. But more than that he brings important knowledge, connection and support to the workers in remote and regional areas of South Australia, Northern Territory, and Western Australia. Jimmy has worked tirelessly for the AOD sector, making a significant contribution to improve the outcomes and services for Aboriginal people experiencing the harmful effects of alcohol and other drugs, by supporting those on the ground.

Nominee's Information

Jimmy Perry a Ngarrindjerri / Arrernte man is from the Coorong region south-east of Adelaide. For the last 14 years he has worked for the Aboriginal Drug and Alcohol Council SA Inc. on the Makin' Tracks project. He provides support for communities and Aboriginal health professionals around drug and alcohol issues across the whole of SA and also in NT, Qld, NSW and WA. He has extensive experience in remote and regional communities and in prevention as well as clinical management approaches.

He spends sometimes weeks travelling throughout remote and regional communities in South Australia and the cross-border regions. Providing resources, support, and mentoring to workers in otherwise isolated areas. In this role Jimmy has valued added to the work of so many people, strengthening the Aboriginal drug and alcohol sector at a regional, state, and National level. His contacts and knowledge of the Aboriginal AOD sector has been vital for so many people.

Jimmy's knowledge and experience have contributed and added value to the work of many others, including the:

- Advocacy role of ADAC - the South Australian Aboriginal AOD sector peak body
- Development, trialling and distribution of Aboriginal-specific AOD resources
- Research into the evaluation of the use COMGAS in Aboriginal communities [Shaw, G., Biven, A., Gray, D., Mosey, A., Stearne, A. and Perry, J. (2004). An evaluation of the COMGAS Scheme: 'They sniffed it and they sniffed it – but it just wasn't there'. Australian Government Department of Health and Ageing, Canberra. ISBN: 0 642 82566 1]
- The development of the Handbook for Aboriginal Alcohol and Drug Work [Lee K, Freeburn B, Ella S, Miller W, Perry J, Conigrave K [editors] (2012). Handbook for Aboriginal Alcohol and Drug Work. Sydney: University of Sydney, p. 446.]
- Advising on many Aboriginal AOD-specific research projects, including the NDRI brief intervention resources and training 'Could it be the Gunja'.

SENIOR SCIENTIST AWARD – PROFESSOR MAREE TEOSSON

Nominator's Comments

I have had the privilege of knowing Professor Maree Teesson since 1990 when she was a researcher in Sydney. Professor Teesson has been an inspiring colleague over the last 25 years. Our fields of research have developed in very similar directions, with Professor Teesson being a close collaborator during the last decade. We have worked together on book chapters, research papers and grants in the field of comorbidity, specialising in the treatment of people with co-existing mental health and drug and alcohol problems. Professor Teesson has also maintained a leading research interest in the prevention of alcohol and other drug problems. As a clinical psychologist I am aware of the serious challenges faced in addressing comorbidity, especially post-traumatic stress disorder (PTSD). Professor Teesson is one of the leading researchers internationally, working on trialling and disseminating treatments for people with co-existing PTSD and drug and alcohol problems. Professor Teesson's approach to the prevention and treatment of co-existing mental health and alcohol problems is visionary. Professor Teesson has had the foresight to recognise the value of online delivered and school based interventions in prevention and the first integrated treatment of PTSD and substance use (see attached paper published in the leading journal, JAMA. The results of her group have been published in leading journals (e.g., JAMA, Addiction) and books that have been highly influential in the field (e.g., Comorbidity between mental disorders and substance use disorders: Epidemiology, prevention and treatment, 2003). It is a measure of her esteem and enthusiastic approach to mentoring and teaching that she was short-listed for the Australian Museum Eureka prize for Mentoring Young Scientists this year. She is Director of a prestigious NHMRC Centre of Research Excellence in Mental Disorders and Substance Use, to which I belong. Professor Teesson clearly meets the criteria for the award of APSAD Senior Scientist, having demonstrated outstanding research capability over 25 years in the drug and alcohol field, with over 280 publications, numerous prestigious awards and senior appointments to influential advisory bodies such as the NHMRC.

Nominee's Information

I am Professor and Director, NHMRC Centre of Research Excellence in Mental Health and Substance Use (CREMS) and NHMRC Senior Research Fellow at the National Drug and Alcohol Research Centre (NDARC). I am also a ministerial appointed member of the NHMRC Health Care Committee and Professorial Fellow at the Black Dog Institute, UNSW.

Vision: My vision is to build the world's leading dedicated translational research program for the prevention and treatment of comorbid mental health and substance abuse. While it is widely recognised that there is significant comorbidity in these two areas they have traditionally been approached in isolation, making it virtually impossible to make significant inroads. I seek to increase our understanding of drug & alcohol and mental disorders, prevent these where possible and improve treatment responses. I am Director of the NHMRC CRE in Mental Health and Substance Use. This large vibrant research centre spanning 7 universities has created the potential for major gains in prevention and treatment.

Contribution to the field: I have made a substantial contribution with over 280 research articles, reviews, book chapters, books, clinical reports and invited contributions to date, with an h index of 41, a total of 5269 citations, 10 papers cited over 100 times. I publish in the leading drug and alcohol journals (eg Addiction) and leading medical and psychiatric journals (e.g. JAMA, Prevention Medicine) with two papers in the leading journal JAMA in the past 3 years. These indicators place me in the top 2% of international researchers according to ISI Essential Science Indicators, in the categories: Psychiatry/Psychology and Social Sciences, general.

The innovation of my research has been recognised through leadership of 67 grants (13 NHMRC, 2 CRE) totalling over \$21.6M. Over the last two years I have had extraordinary grant success with over \$9M in new NHMRC funding (\$6M as CIA). My research integrates disciplines in mental health and substance use, psychiatry, psychology, clinical trials, preventive medicine and epidemiology to ensure my work is rigorous, innovative, and truly world-class. My research has been at the forefront of improving the evidence regarding the prevention and treatment of comorbid disorders, leading to a number of 'firsts' in the field. My team has conducted 11 large, world first clinical and prevention trials in comorbidity (>\$10 million in NHMRC), which have been published in the world's leading medical journals (e.g., JAMA, the most widely distributed medical journal internationally). I have pioneered developments in the prevention of alcohol and drug related harms using internet delivered school-based technologies. In the last 5 years these highly successful programs have been delivered to over 20,000 Australian high school students, and recognised by US National Register of Evidence Based Prevention Programs.

In 2012-3 I brought together more than 70 multi-disciplinary academic and clinical researchers spanning seven national and international universities to form the NHMRC Centre of Research Excellence in Mental Health and Substance Use. I direct this centre with Professor Amanda Baker (Newcastle University). From Australia, these collaborators include UNSW, University of Newcastle, University of Sydney, and Macquarie University; and internationally, the University of Birmingham (UK), Northwestern University (USA), and the Medical University of South Carolina (USA). I am also CI on a successful CRE in Suicide Prevention. These new centres alone represent collaborations and recent team expansions across 14 universities internationally. Prior to this I have held significant leadership roles in drug and alcohol as Deputy Director and Acting Director of the National Drug and Alcohol Research Centre. During this time, NDARC grew from a staff of 35 to a staff of over 130, with a corresponding increase in budget from \$4 million per annum to over \$17 million per annum.

National & International Profile: Of my 11 NHMRC grant since 2009, all have CIs from collaborating institutions in Australia and 10 from overseas (UK, USA, Canada, Spain, Italy, NZ). I am a member of government advisory committees at the highest level of policy development. My intellectual leadership was recognised internationally with a US NIH Distinguished International Scientist Collaboration Award with Prof Brady at Medical University in South Carolina and UNSW Medicine Outstanding Researcher of the year award 2013. I am passionate about the dissemination of our research and over the past two years, there were 6,802 visits to the website of my centre and 24,932 page views.

Mentorship of the next generation of drug and alcohol researchers is vitally important to me: I have 8 current PhD students, mentor 5 postdoc researchers and 2 NHMRC CDF. I was recently shortlisted for an Australian Museum Eureka Award for Mentorship of Young Researchers. This is the most prestigious award for mentoring in science in Australia.

In Summary, I am a member of NHMRC Health Care Committee, Academy, Chair of NHMRC fellowship panel 2013 and NHMRC GRP. I was one of only 7 NHMRC John Cade Fellowship applicants short-listed and interviewed after an international competitive application process, confirming my status as one of Australia's leading mental health and addiction researchers.