

# BTAA newsletter

## Special Edition - Melbourne Forum 2013



ABN 97 733 801 179 Incorporated in the ACT: AO4837



The BTAA Committee Left to right: Matt Pitt, Kelly Webster, Susan Dalliston, wife of absent committee member Mark Dalliston, MaryAnne Rosier, Susan Pitt, Catherine Hindson and Denis Strangman (Danny O'Dea absent)

### Letter from the Chair

Welcome to this special edition of BTAA News – to mark the BTAA Brain tumour forum held in conjunction with Austin Health and the Olivia Newton-John Cancer and Wellness Centre, at the Austin Hospital on Sunday 3rd March 2013.

The forum will provide an opportunity to hear about promising new treatment options from visiting Canadian neuro-oncologist Dr Warren Mason.

#### IBTA Week

Also in this issue we look back at a range of activities associated with last year's International Brain Tumour Awareness Week. In the lead up to the week I surveyed clinicians on the key advocacy messages and was advised that their priorities included: increasing awareness which also assists all other aims, improved access to clinical trials for brain tumour patients, centres of excellence where advanced techniques are routinely used and genetic testing of brain tumour tissue to better target treatments and make improvements in mortality and morbidity. It was clear however, that the highest priority for both clinicians and consumers is achievable right now – increasing awareness!

#### Increasing access to Care Coordinators remains our highest priority

Of the available proposals, most respondents agreed that brain tumour care coordinators can make the biggest immediate difference to patients, their caregivers and their health professionals. To highlight this message I again wrote to all Federal Senators and Members in the Federal Parliament and provided them with a grey awareness ribbon to wear on Wednesday 31 October 2012 (further details provided in this edition).

I also received many offers in response to my proposal for patients, caregivers, and health professionals to speak to the media; Money may be tight, but there clearly is no lack of enthusiasm felt by the public, health professionals, and politicians for improving the situation faced by brain tumor patients and caregivers.

#### BTAA turns Four years old

To mark the milestone the BTAA committee held a planning day in December. The day provided us with a clearer sense of purpose and renewed vigour to promote BTAA as the recognised national health consumer voice on brain tumours in Australia. We agreed to focus on ensuring we had a presence at the 'right' tables, to continue to work on quality policy advice and other submissions and to continue building on the range of support services we provide to people affected by brain tumours.

### Inside this edition

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We want to contribute to the development of a national, supportive framework for people with brain tumours; characterised by a well-resourced and stable health system and services. This includes appropriate treatment and rehabilitation facilities which are informed by effective clinical and laboratory research.

We discussed how we can achieve these goals with a volunteer committee and as such, we plan to revisit our structure and strengthen our alliances with other organisations in 2013. We also discussed our governance obligations, identified resource priorities and allocated more specific roles to committee members. The committee's structure may change but the overall intent remains the same - maximising patient's access to effective health care and support services, making progress on ensuring health systems are able to conduct clinical trials, adopt promising therapies and clinical care guidelines and better support of both clinical and laboratory medical research.

In closing I would like to bring your attention to a range of resources available to you free of charge from BTAA. Please see the list of resources printed on page 7, also available on our website.

You can also follow BTAA on social media and keep informed while helping us grow! You can support or host a wear a hat day to help fund our work and raise awareness, and above all make sure your voice is heard by decision makers.

I hope you enjoy this edition, and best wishes for the New Year!

**Matt Pitt**

[chair@btaa.org.au](mailto:chair@btaa.org.au)



# INTERNATIONAL BRAIN TUMOUR AWARENESS WEEK

During International Brain Tumour Awareness Week, 28rd Oct - 3rd Nov 2012, BTAA provided grey awareness ribbons to the nation's 222 decision makers to let them know it is time we have a greater voice on the national stage. You can see images of some of the parliamentarians who wore our ribbon on our Facebook page web site.

In particular, BTAA would like to highlight the support of Deborah O'Neill, MP and Peter Dutton MP. Ms O'Neill wore our ribbon in 2010, and again in 2011 when her brother was in hospital being treated for a brain tumour. In 2012 she wore it again, this time in memory of her brother.

Early that week Peter Dutton told the story of his constituents, Katherine and Andrew Landers.



## Monday 29 October 2012

### Mr Peter Dutton (Dickson)

*Tonight I will share with you a few words about a family battling brain cancer. As you listen, I hope to highlight the massive impact on one family and then consider the scale of the problem when multiplied across many families in our nation. Think about the personal strength for Katherine Landers to take time to write about her husband, Andrew Landers. They moved to Brendale in my electorate on 1 June 2011. Her words best describe what happened next:*

*"On 12 June 2011 at the age of 36 my husband collapsed without warning and was diagnosed with a malignant brain tumour. I was pregnant with our second child at the time. We now have a 7 year old daughter and a 10 month old son. We were just going along like any other married couple with young children when our world was thrown upside down. We have had to deal with the physical, emotional, mental and financial impact of this disease knowing that ultimately it will be terminal. (I am though hoping it won't be terminal for a long time yet and that my husband will get to see our son's first day at school). Due to the diagnosis my husband can no longer work and I have had to drop down to part-time work to meet his care needs which, has meant that unfortunately we are now living on Centrelink payments. This is a situation I never imagined I would be in, although I have learnt to become very resourceful with budgeting which has been a positive."*

*Despite personal circumstances that would leave many unable to think beyond each day, Katherine Landers wants to raise awareness and help others. Again I will let Katherine's own words convey the information she wants our nation to know:*

*"There is currently a low level of understanding in the community about brain tumours and the enormous impact they have on individuals and their families.*

- *One person is diagnosed with a brain tumour every 6 hours and one person dies from brain cancer every 8 hours in Australia.*
- *Brain cancer is the leading cause of cancer death in people under the age of 39.*
- *The 5 year survival rate for brain tumours is 19%.*
- *Almost 100% of patients with brain cancer succumb eventually.*
- *Brain cancer is the only cancer that directly affects both the body and mind.*
- *Brain cancer carries the highest individual financial burden of all cancers with an average cost more than 5 times higher than other cancers*
- *According to a study commissioned by the Cancer Council NSW the financial costs faced by households with a brain tumour were \$149,400 which was almost 50% greater than households with the next most expensive cancer. This is due to a reduction in income and the increase in out of pocket expenses.*
- *Brain tumour research funding is currently low in relation to the burden of the disease."*

*I am wearing a silver ribbon tonight, and this week is International Brain Tumour Awareness Week. I am wearing that ribbon because Katherine Landers had the courage to share her family's story so that in the future there will be fewer families that have to fight brain cancer. Let us reflect on what the Landers family are enduring. Their story matters not just because of our compassion for them but because it should steel our determination to achieve better outcomes for all brain cancer sufferers. Let us also reflect tonight on the work of the medical researchers and the clinicians who work to provide support to these families in their darkest hours. Let us make sure that, as a nation, we continue to recognise the efforts that they make to find a path to a cure and to a better prospect of life ahead for these sufferers and for families like the Landers family. Let us make sure that our country recommits itself to extra research dollars to provide support for that valuable pursuit. This is a country blessed with much natural wealth, and we must make sure that we turn that into opportunities to make life even better for Australian families.*



## Thursday, 1 November 2012

**Ms Deborah O'NEILL (Robertson):** *"I rise to note in this place that this week is International Brain Tumour Awareness Week. It runs from 28 October all the way through to 3 November. People who are interested in becoming more aware about brain tumours and the challenges that are facing research can visit; [www.btaa.org.au](http://www.btaa.org.au) for Brain Tumour Alliance Australia.*

*In the parliament, this is the third year that members have been provided with a grey ribbon to help us highlight this issue. In the Senate, **Senator Catryna Bilyk** and **Senator Scott Ryan** have been very active in attempting to raise awareness not only here in the parliament but throughout the nation, through our electorates and more broadly. Brain tumours are the highest cause of disease related deaths in children under 16, second only to accidental drownings for causes of death, and they are the highest cause of cancer related death in females under 40 and males under 44. From 2006 to 2010, people with a brain tumour had just a 22 per cent chance of surviving for at least five years. Between 1982 and 2007, mortality trends really have showed very little change. I put this on the record and note that my own brother passed earlier this year of a brain tumour, aged 41. Sean Patrick O'Neill, rest in peace."*



## ***Wear a Hat for a Day 2012***

During International Brain Tumour Awareness Week in 2012 BTAA held its second annual Wear a Hat for a day for BTAA fundraiser/awareness raiser. The event was a great success with twenty Hat Day packs requested to assist people with organising their own unique event. Support for the Hat Day came from brain tumour patients, carers, nurses, care coordinators, teachers, students, hairdressers, pharmacists - the list goes on!

All of these people generously gave their time to raise money and awareness for BTAA.

The ACT Brain Tumour Support Network worked with a group of friends of a colleague who lost his wife to a brain tumour and held the 'Hats to Help' fundraising dinner. Money raised on the night went to BTAA and to the Leslie children who lost their mum.

BTAA would like to sincerely thank all those people who organised a Hat Day, in particular film maker Daniel Sanguineti, who created the television advertisement for the event that was screened nationally.

You can watch the ad at <http://www.canberra.edu.au/monitor/2012/oct/hat-for-a-cause> or on Youtube.

## ***BTAA Melbourne Forum***

Dr Warren P Mason from Canada is the key speaker at the BTAA Forum in the **John Lindell Theatre at the Austin Hospital, Heidelberg on Sunday 3 March**. The free forum will be held from **2.00 pm until 6.30 pm** and will be the only opportunity during Dr Mason's Australian visit for brain tumour patients and their carers to meet and hear one of the world's leading authorities on brain tumours. Other speakers include **Dr Lawrence Cher**, consultant neurologist and neuro-oncologist at the Austin and also works at Epworth Hospital, Richmond. **Sally White**, author of *Three Quotes from a Plumber*. How a second opinion changed the life of a woman with a brain tumour and **Matt Pitt**, Chair of BTAA.

For more information visit [www.btaa.org.au](http://www.btaa.org.au) OR email Catherine Hindson, BTAA Committee: [catherine@btaa.org.au](mailto:catherine@btaa.org.au)  
**Enquiries:** BTAA Freecall number (free to you from landlines): **1800 857 221**

BTAA thanks Roche Products Pty Ltd for subsidizing the forum, the staff at The Austin Hospital and the Olivia Newton-John Wellness Centre, in particular Di Legge for supporting the forum.

"BTAA contacts in Victoria, South Australia and NSW have already received a brochure for the Forum in the post and our contacts in other States will receive a copy with this Newsletter"

## ***SAVE THE DATE!***

Next year's Hat Day will be held, once again, during International Brain Tumour Awareness Week – 27th Oct – 2nd Nov, 2013! We look forward to a bigger, better Hat Day and look forward to your continuing support.

Please email Mary Anne Rosier at [fundraising@btaa.org.au](mailto:fundraising@btaa.org.au) to receive a pack and suggestions for organising a really fun-filled, successful, "Wear a Hat for a Day for BTAA" fundraiser! You can read more about MaryAnne's great Hat Day initiative on the University of Canberra Monitor <http://www.canberra.edu.au/monitor/2012/oct/hat-for-a-cause>

# **2012 HAT DAY PHOTOS**

Please help these fantastic supporters of last years "Hat Day" in 2012, by joining them in raising awareness by wearing a hat for Hat Day during International Brain Tumour Awareness week 2013!







# Fatigue and Brain Tumours

*By Mark Dalliston, BTAA committee member*

Fatigue affects a large proportion of brain tumour patients. It is important to realize here that there are two types of fatigue. For brain tumour patients, there are brain and physical fatigue – both have different effects. Brain fatigue is often the brain we are left with after the treatment, while physical fatigue is usually the result of treatment itself on the rest of the body.

For me the missing link was speech. Despite limited speech therapy, I still had trouble speaking. What I didn't realise was is that 'less is more' and by losing something, often another thing is gained.

Fatigue affects every aspect of your life – working, exercising, playing with your children etc and prevents you enjoying life to its fullest. That is disabling enough, but when you're battling a Brain Tumour too it is heart breaking.

If you are like me, then you tried everything you could think of to try to improve your fatigue. After making numerous changes I seemed no better off, I had better and worse days.

While they are not a cure, vegetables contain anticancer agents and are packed with vitamins. Including plenty of them is one of the first things I did after my diagnosis; as well as managing stress and keeping a regular routine.

Exercising and diet are two important lifestyle treatments. While exercise is important to stay healthy, more is not better. Too much exercise can lead to an increase in fatigue and as brain tumour patients we need to be smarter about the way we exercise.

Brain fatigue is resultant damage that we are left after treatment. What this means is that fatigue has large impact on our lives. In fact, fatigue has such large impact on our lives that it is sometimes seen as normal. Because we feel so worn out, we think of it as physical fatigue. It is so frustrating because you have good and bad days.

A comparatively large portion of blood flows to the brain. Brain tumours have a devastating effect on this, and as such we need more rest and recovery than the average person. Busy days are particularly difficult.

My busy days corresponded with lots of talking. Quiet days involved little talking, but I did not make this connection this until recently and unfortunately I didn't discover this until I nearly lost my voice completely.

Speaking involves a lot of mental resources and mental activities take a lot of effort. I had previously only been associating physical activities with my tiredness. These days I speak as little as possible and I have found my energy levels have increased significantly and so far have remained that way.

I am not suggesting if you stopping talking this will necessarily work for you. Try reducing mental activities first, especially if you have difficulty in that area. This is probably counter to all the advice you have had so far and you should run it past your health professional first, especially if you experience other symptoms like depression.



*'Sussan Dalliston – Mark's wife and Simon Bailey, winners of the best hat prize, Hats to Help Dinner.*

If you increase your meditation and listening, where is the harm? As a brain tumour patient you need to learn to work within new limitations.

For thousands of years other cultures have known the benefits of speaking, thinking and doing less, we are just learning. Silence is golden so they say and I am learning the benefits of silence and of listening more. Silencing that inner critic, turning off that stream of redundant thinking, being aware of nature and accepting others in a non-judgmental way are just some of the benefits I have experienced.

If you had told me that I would have increased energy if I just talked less, then I wouldn't have believed you and you would have had a hard time convincing me that a decrease in mental activities would lead to an increase in overall energy. However, this is what happened to me – brain fatigue turned out to be the missing piece of the puzzle... Yet they don't tell you that in rehab!

The full article is available on the BTAA web site, [www.btaa.org.au](http://www.btaa.org.au).

"Brain Fatigue vs. Physical Fatigue" – <http://gbm4cure.webs.com/brainfatigue.htm>

"Cerebral Blood Flow" – [http://en.wikipedia.org/wiki/Cerebral\\_blood\\_flow/](http://en.wikipedia.org/wiki/Cerebral_blood_flow/)



## News from the Society for Neuro Oncology Scientific Conference, Washington, November 2012

Report by Denis Strangman  
(Chair IBTA and BTAA Committee member)

I attended the Annual Scientific conference of the Society for Neuro Oncology (SNO) in my capacity as Chair of the International Brain Tumour Alliance ([www.theibta.org](http://www.theibta.org)), together with my UK colleague Kathy Oliver.

We had a display table from which we distributed free copies of the 140-page "Brain Tumour" magazine and talked with participants from around the world, including leaders of the various US-based brain tumour patient organisations.

There were about 1500 people present but seemingly fewer Australian oncologists than at past conferences.

Although there is no international neuro oncology professional organisation as such, the US-based SNO doubles as the de-facto international organisation. If you specialise in brain tumour treatments then this is the place where a clinician or a neurosurgeon from anywhere in the world can be brought up to speed in the latest treatments.

One of the major news items from the conference was a report of the latest information about the use of Avastin for brain tumour patients.

We reported this in the December issue of the IBTA's free E News distributed to 6,000 recipients around the world, in the following entry:

**AVAglio:** Results were announced at the SNO (Society for Neuro Oncology) Conference of the Phase III AVAglio study comparing Avastin (bevacizumab) in combination with radiation and temozolomide versus radiation and temozolomide plus placebo in patients newly diagnosed with glioblastoma. The Avastin arm showed a 36 percent reduction in the risk of disease worsening or death which can also be referred to as a 56 percent improvement in PFS or a 4.4 month improvement in median PFS. Interim results for overall survival did not reach statistical significance (HR=0.89; p=0.2135). Final data on overall survival are expected in 2013. Secondary endpoints included a number of relevant health-related quality of life measures; an additional benefit was that patients in the Avastin arm required less corticosteroids.

There were, of course, hundreds of other presentations and posters about new research and trials and those readers with access to on-line journal facilities (usually via University libraries) can access the SNO journal Neuro-Oncology to search the Conference abstracts for information about promising new therapies and research.

I have subsequently received printed copies of a 108-page Supplement on Applied Neuro-Oncology which was distributed at the Washington Conference and will send a free copy to interested people while stocks last.

(email me at [chair@theibta.org](mailto:chair@theibta.org) with your name and postal address).

The supplement was edited by Dr Susan Chang who spoke at the BTAA's Brisbane Forum in August 2012 and contains paintings by a GBM patient. It is a very technical publication but one article in particular is quite important "Personalized care in neuro-oncology coming of age: why we need MGMT and 1p/19q testing for malignant glioma patients in clinical practice".

Copies of the IBTA's free Brain Tumour magazine and the free E News, referred to earlier, are also available via on-line subscription forms on the IBTA's website ([www.theibta.org](http://www.theibta.org))




## International News


Group taken in front of IBTA display table. L-R. Denis Strangman (Australia), Kathy Oliver (United Kingdom), Dr Virginia Stark-Vance (Texas, who discovered the relevance of Avastin for brain tumours), Al Musella (New York, Chair of the Musella Foundation and author of the Virtual Trials website which is one of the most widely-used resources for newly-diagnosed brain tumour patients and advocates - [www.virtualtrials.org](http://www.virtualtrials.org))


## Spread the word via our social media websites



Please like, add, share, comment and spread the word via our twitter, facebook and linkedin accounts! This not only helps our voice to be heard but also gives you a chance to reach out, interact and communicate with BTAA and the wider brain tumour community!

 @BrainTumourAA

 [btaa.org.au](http://btaa.org.au)

 Brain Tumour Alliance Australia



# Therapy News:

## Gliolan-aminolevulinic acid



A new drug, Gliolan® (aminolevulinic acid) is now being used in patients with glioblastoma multiforme (GBM) by some Australian neurosurgeons to improve intraoperative identification and visualisation of the margins between tumour and normal brain tissue.

This in turn assists the surgeon to more completely remove the malignant tissue.

Gliolan was granted orphan drug designation in April 2012 for photodynamic diagnosis of gliomas that are glioblastoma multiforme (GBM) (malignant) on preoperative imaging, and intended for gross macroscopic resection of all visible tumour.

Gliolan is not yet approved by the Therapeutic Goods Administration (TGA) however Melbourne based biopharmaceutical company, Specialised Therapeutics Australia, has submitted an application to the TGA for approval and anticipates a decision towards the end of 2013. The drug is currently made available to Australian neurosurgeons via the Federal Government's Special Access Scheme.

BTAA has recently updated the Fact Sheet on Gliolan on our web site. The fact sheet provides information on the costs, the objectives and the centres currently conducting neurosurgeries using Gliolan.

You can view the updated Gliolan Fact Sheet on

[www.btaa.org.au](http://www.btaa.org.au) or email Susan Pitt, Secretary, BTAA at [secretary@btaa.org.au](mailto:secretary@btaa.org.au)

### Hobart Brain tumour education and support forum 2012

BTAA was again invited to provide a speaker at the Royal Hobart Hospital (RHH) Patient and Care-Giver Brain Tumour Education Day on 23 November 2012. Speakers included neurosurgeon **Dr Pauline Waites** who discussed advances in this field. Dr Waites also informed attendees that the goal of neurosurgery is to optimise both quality and quantity of life, and the term 'inoperable' means that surgery can be done but that it would not improve quality of life and would likely worsen it.

Dr Rosemary Harrup and Laura Pyszkowski discussed chemotherapy advances and current clinical trial options, Dr Toby Croft discussed the typical cognitive changes faced by patients, the organisations providing relevant support and rehabilitation services in Tasmania, and noted the Beyondblue/BTAA factsheet on Brain tumours, depression and anxiety disorders (fact sheet 46) as a good resource for this topic. Hard copies available from BTAA and also online at: [www.beyondblue.org.au](http://www.beyondblue.org.au)

Dr Croft advised attendees that on average, brain tumour patients experience more psychological problems than patients with any other type of cancer. Christine Edwards discussed palliative care services, and advised that this critical role involves liaison with other health professionals, easing of symptoms such as pain, and is

Whilst the availability is increasing, at the beginning of 2013 it is currently restricted to neurosurgeons in the following centers:

- Royal Melbourne Hospital
- Royal Brisbane & Women's Hospital
- The Wesley Hospital (Brisbane)
- Princess Alexandra Hospital (Brisbane)
- The Mater Private (Brisbane)
- Pindara Hospital (Gold Coast)
- The Prince of Wales Hospital (Sydney)

greatly assisted if patient's have Advanced Care Plans which can be formalised by a lawyer or JP.

Nurse Karen Rogers from the Cancer Council Tasmania discussed support services including their Help Line (13 11 20), and stated that a referral to psychologists may be recommended if a caller's psychological care needs remain high after four calls. Matt Pitt gave an update on BTAA advocacy activities and support services, and advised that abstracts from the 17th Annual Scientific Meeting and Education Day of the Society for Neuro-Oncology contained examples of recent treatment advances and were available to be viewed online (see [www.neuro-oncology.oxfordjournals.org/content/14/suppl\\_6.toc](http://www.neuro-oncology.oxfordjournals.org/content/14/suppl_6.toc) for free full abstracts).

Questions from patients and caregivers included the risk factors for brain tumours, options for neurocognitive rehabilitation, the processes for triaging patients and referring them to palliative care. Attendee's greatly appreciated the 45 minute facilitated discussion groups that started the day, where they shared stories, tips for coping and hopes.

Matt was also invited to give a patient's view to nursing staff of the RHH Neurosurgical Unit on the challenges faced by newly diagnosed patients and their families after surgery, and actions by nursing staff which patient's and caregivers have stated to be particularly helpful.

We commend RHH, and especially Caitlin Daniels, Andrea Hammond, and Sonya Wilson, for informing patients and caregivers and seeking consumer input into their work.



# Medicines Australia Code of Conduct



Medicines Australia member companies will for the first time disclose aggregate payments to doctors and consumer groups under a new Code of Conduct which comes into effect on 11 January 2013, will require Medicines Australia member companies to report in aggregate amounts:

- All payments made to healthcare professionals for advisory boards and consultancy arrangements.
- All sponsorships of healthcare professionals to attend medical conferences and educational events.
- All payments made to speakers at educational events.
- All sponsorships of all individual consumer organisations for each financial year, including the value of non-monetary support.

The new Code of Conduct is available at:

[www.medicinesaustralia.com.au](http://www.medicinesaustralia.com.au)

## Free Resources available from BTAA



- ★ **Primer of Brain Tumours**  
(84 Pages)
- ★ **Brain tumours, depression and anxiety disorders booklet**  
(6 Pages)
- ★ **Brain Tumour Magazine**  
(140 Pages)
- ★ **DVD of the BTAA Sydney Brain Tumour Forum 2012** (Also on Youtube)

Only one copy of each resource available per applicant.

'Simply email [resources@btaa.org.au](mailto:resources@btaa.org.au) or post a request to The Secretary, BTAA, PO 76, Dickson, ACT, 2602,

or call the BTAA FREECALL number (free from landlines) **1800 857 221** with your request, name and postal address'



## How you can support BTAA

BTAA needs your support to help those diagnosed with a brain tumour and to advocate for improved services for our brain tumour community Australia wide.

There are many ways you can help and donate to BTAA.

- Donate Online to BTAA by Pay Pal.  
Visit [www.btaa.org.au](http://www.btaa.org.au) and follow the links.
- Direct debit to our Bank Account.  
CBA BSB 062900 Account Number 10603153.
- Send a cheque to Brain Tumour Alliance Australia Inc.  
PO Box 76 Dickson, ACT, 2602
- Hold a fundraising event and ask attendees for donations to BTAA  
email: [secretary@btaa.org.au](mailto:secretary@btaa.org.au)
- Hold a 'Wear a hat for a day' event  
email [fundraising@btaa.org.au](mailto:fundraising@btaa.org.au)
- Ask us to assemble a memorial pack of 50 envelopes  
email [btsupport@btaa.org.au](mailto:btsupport@btaa.org.au)
- Make a bequest to BTAA - email [btsupport@btaa.org.au](mailto:btsupport@btaa.org.au)

## Diary Dates for 2013

To add any events to the diary for our next quarterly newsletter & for us to promote them on our social media sites please email: [secretary@btaa.org.au](mailto:secretary@btaa.org.au)

Sunday 3rd March

**BTAA Melbourne Forum** – The Austin Contact: [catherine@btaa.org.au](mailto:catherine@btaa.org.au)

Monday 11th March – Sunday 17th March

**Brain Awareness Week (The Brain Foundation)**

To educate the public about the importance of brain research as without research there is no cure!

### Where:

Martin Place, Sydney. Monday 11th March 7.30am – 2.30pm

Queen Street Mall, Brisbane. Wednesday 13th March 7.30am – 2.00pm\

*Visit the stall and receive a free lime green stress ball brain and important information about brain research!*

BTAA will also be there in Sydney handing out information and welcomes all supporters coming along to say hi!

Sunday 26th April – Saturday 4th May

**Brain Cancer Action Week (BCAW)** Visit: [braincanceraction.com.au](http://braincanceraction.com.au)

Wednesday 1st and Thursday 2nd of May

**BCAW Brain Tumour Support and Education Forum, Sydney.**

See the 2012 event video footage at:

<http://www.cancerinstitute.org.au/events/brain-tumour-support-and-education-forum-2012>

Saturday 4th May

**Cure For Life Foundation Ball, Sydney**

Contact: [events@cureforlife.org.au](mailto:events@cureforlife.org.au)

## Thanks from BTAA

**Thanks to:** Land Services Group, Department of Planning, Transport and Infrastructure, South Australia; Anglican School, Plumpton (in memory of Peter Lack), The Leslie family were supported by Beeline Partnerships, the Helenic Club, Allbids.com.au in particular, Cath Brinkley, Simon Bailey, Ainslee French and Colin and Dandy for Hats to Help funds (in memory of Nives Leslie), Steve and Vicki Watson (in memory of Wayne Williams), and for the sizeable donations from Andrew Simpson, Dianne Gray, and Debbie Pollard.

**Thanks to:** Andrew Simpson and Zac's family who donated to BTAA instead of exchanging Christmas gifts.

**Thanks to:** Dragons Abreast ACT, milliner Christine Waring, Senator Gary Humphries, Dr Andrew Leigh MP, Pino Langley Optometrists, King O'Malley's Civic, Deakin IGA, Sage Photography, Shi Hairdressing and Delightful Baskets, for generous prizes for the Allbids silent auction at the Hats to Help dinner.

**Thanks to:** Daniel Sanguineti Media for support for the BTAA ad as well as the 2012 Wear a Hat Day ad run as a community service announcement on TV. We have had some new callers from regional areas who saw the ads.

**Thanks to:** The Brain Foundation for inviting BTAA to join their stall in Martin place, Sydney during International Brain Awareness week. (See 2013 Diary Dates).

Finally thanks to Roche Products Pty Ltd for sponsoring the forthcoming Melbourne forum.

22nd September (TBC)

**BTAA AGM** Contact: [secretary@btaa.org.au](mailto:secretary@btaa.org.au)

27th October – 2nd November

**International Brain Tumour Awareness Week.**

Organisations wishing to be listed as supporters contact: [chair@theibta.org](mailto:chair@theibta.org) or [kathy@theibta.org](mailto:kathy@theibta.org)

25th–26th October

**6th Annual COGNO Scientific Meeting, Sydney**

30th October

**Grey Ribbon Day** – Federal Parliament, Organised by BTAA

3rd November (TBC)

**Sydney walk for a cure** – Cure for life foundation

[www.cureforlife.org.au](http://www.cureforlife.org.au) [Facebook.com/cureforlife](https://www.facebook.com/cureforlife)

3rd November (TBC)

**Ben Donohoe Run & Walk for Fun, Canberra**

Funds to the Eden–Monaro Cancer Support Group, Make a Wish, Ronald McDonald House – Canberra.

Disclaimer: The material provided in this Newsletter and on our website is general in nature. It is made available on the understanding that BTAA is not engaged in rendering professional or medical advice. Before relying on the material users should carefully evaluate its currency, completeness and relevance for their purposes, and should always obtain appropriate medical advice relevant to their particular circumstances.

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