2024

2024 ANNUAL RESEARCH REPORT

TROG CANCER RESEARCH

Together, we can defeat cancer.

trog.com.au

Acknowledgement of Country

We acknowledge the Traditional Custodians of the lands across Australia and pay respect to Elders past, present and future.

We acknowledge Māori as tangata whenua of Aotearoa New Zealand and as Treaty partners with the Crown as agreed in Te Tiriti o Waitangi.

TROG CANCER RESEARCH

Trans Tasman Radiation Oncology Group Limited
Australian Charities and Not-for-profits Commission Registered charity
ABN:45132672292

Contents

Trans Tasman Radiation Oncology Group (TROG) 2024 Annual Research Report

Our Vision

Improving outcomes of people affected by cancer.

Our Mission

To revolutionise cancer care through impactful radiation medicine research to cure cancer and improve quality of life.

Our Values

Scientific Excellence

Unwavering in our commitment to excellence, we uphold the highest standards of research integrity, continuously evolving and adapting to maintain meticulous scientific practices

Collaborative Discovery

Fostering a culture of unity and collaboration, we actively forge and nurture partnerships across academic, professional, healthcare and research sectors to drive innovation and collective wisdom in cancer research

Innovative Research

We continuously pursue innovative breakthroughs, leveraging cutting-edge technologies and novel methodologies to redefine the limits of cancer treatment and care

Impactful Outcomes

Our research is driven by the pursuit of tangible, impactful outcomes that advance cancer diagnosis, treatment. and patient care, guided by measurable goals and a commitment to real-world benefits

Compassion

Driven by deep empathy, we place patients, families and communities at the heart of our mission, ensuring our research priorities reflect compassionate care and support in every endeavour

Equity, Diversity and Inclusion

Embracing diversity in all its forms, we are dedicated to fostering an inclusive environment where every individual's contribution is valued and such that our research is accessible and is inclusive of diverse patient populations thus driving us towards better outcomes for all patients

Future planning

Strategic Plan 2024–2026

The TROG Cancer Research Strategic Plan 2024–2026 outlines how we plan to further our vital work advancing and diversifying radiation medicine research over the next three years.

In line with the TROG Cancer Research vision, mission and values, the Strategic Plan centres on four strategic goals, each of which encompass several key objectives:

1. **Diversifying our research and enhancing access:** We will increase both the quantity and diversity of our radiation medicine research initiatives.
2. **Developing collaborative networks:** We will establish strong, mutually beneficial partnerships with national and international academic institutions, professional organisations, healthcare facilities and industry partners.
3. **Fostering member engagement and stakeholder communication**: We recognise the importance of building strong relationships with all stakeholders and our goals focus on developing comprehensive communications plans, engaging with different stakeholder groups, organising events and working with our members.
4. **Enhancing funding, infrastructure, and sustainability:** The longevity and impact of our research depends on secure funding and the ability modernise infrastructure.

Policy Focuses on Diversity, Equity and Inclusion

Our Diversity, Equity and Inclusion (DEI) Policy was launched in 2024, demonstrating TROG's commitment to embracing DEI principles across all areas of our work.

The policy covers all aspects of TROG's operations, including staff, volunteers, members, research participants, partners and clinical research activities.

It includes, but is not limited to, commitments to:

- Ensuring clinical research teams and participant pools reflect population diversity, aiming to understand and address the unique cancer challenges across different demographics.
- Providing equitable access to clinical trials and research opportunities, removing systemic barriers to participation and providing support for underrepresented groups.
- Fostering a culture where diverse perspectives, backgrounds, and ideas are welcomed and actively sought in our decision-making processes.

About

TROG Cancer Research

Over more than three decades, Trans Tasman Radiation Oncology Group (TROG) Cancer Research has been committed to revolutionising the delivery of radiation therapy for cancer patients through impactful, high-quality scientific research, rigorous clinical trials, and the adoption of cutting-edge technology.

TROG's primary focus is on generating evidence to refine radiation medicine technology that is used across a broad spectrum of cancers that are treatable with radiation therapy. Radiation therapy is regarded as one of the principal cancer treatment modalities and remains a cornerstone in the fight against cancer, alongside chemotherapy, surgery and emerging therapies such as immunotherapy.

Approximately one in two individuals who are diagnosed with cancer can benefit from radiation therapy during their treatment journey. Radiation therapy employs precisely targeted and controlled doses of radiation to eradicate cancer cells or inhibit their ability to grow, disperse, or both. The therapy typically involves targeted high-energy radiation beams, with ongoing research proving vital to enhancing the best-practice methodologies and technological advancements that are being used in treatments.

There is a need to continually generate new evidence to underpin the use of modern radiation therapy, not only to achieve optimal disease outcomes, but to improve patient experiences and reduce side effects.

Since its establishment in 1989 from a collaborative initiative among members from seven radiation therapy centres across Australia and New Zealand, TROG Cancer Research has grown to become a pioneering and highly respected clinical trials group of international significance.

TROG is dedicated to conducting studies on cancers that are amenable to radiation therapy treatments. With a vision to improve the lives of those affected by cancer through cutting-edge research in radiation medicine, TROG has fostered collaborations with a wide array of researchers and research institutions, as well as consumer and community groups – all united by the common goal of conquering cancer.

TROG's comprehensive research spans an international network of more than 1,700 healthcare professional members and more than 200 sites worldwide. TROG maintains an extensive clinical trial portfolio that covers research into all tumour sites treatable with radiation therapy, yielding outcomes that have precipitated shifts in clinical practice. These advances introduce new and refined radiation medicine techniques, elevating patient outcomes significantly.

> *TROG has facilitated more than 120 clinical trials, contributing to more effective treatments and enhancing the quality of life for those with cancer in Australia and globally.*

This has seen the organisation evolve into one of the preeminent collaborative clinical trials groups in Australia and New Zealand. TROG's network extends to members, hospitals, universities, government agencies, and other clinical trial groups, all working collectively to conduct crucial cancer research for the benefit of the community.

To date, TROG has facilitated more than 120 clinical trials, with the assistance of more than 15,500 clinical trial participants, contributing to more effective treatments and the enhancing quality of life for those with cancer both in Australia and globally. This collaborative effort has contributed to marked improvements in cancer prognosis, elevating survival rates from below 50% in the 1980s to as high as 90% for certain cancers today.

TROG Cancer Research is one of 14 multi-site Collaborative Cancer Clinical Trials Groups funded by the Australian Government to support Australia's capacity to develop investigator-initiated and industry-independent cancer clinical trials. Our work is also supported via grant funding and donations.

With a commitment to diversity, equity and inclusion in all aspects of our work and research, TROG continues to drive forward the boundaries of radiation therapy techniques, ensuring the delivery of innovative and effective treatments to those in need.

TROG CANCER RESEARCH AT A GLANCE

2024

PARTICIPANTS IN TROG TRIALS

211
Participants in 2024

15,560
Participants since inception

OUR MEMBERSHIP (2024 DATA)

1743	238	1505	10
Total members	Full members	Affiliate members	Life members

FACILITY ALLIANCE MEMBERS

26 Facility Alliance Members across Australia and New Zealand in 2024

YEARS OF OPERATION **35+**

200+ hospitals and cancer centres

RUNNING TROG TRIALS AROUND THE WORLD

Message from the President and Board Chair

Associate Professor Puma Sundaresan

I am deeply honoured and excited to present my first President's message. As I reflect on TROG's mission, "To revolutionise cancer care through impactful radiation medicine research to cure cancer and improve quality of life", I acknowledge TROG's tremendous achievements over the past 36 years.

The activities and achievements of 2024, driven by innovation, collaboration, and member engagement while maintaining financial stability, have solidified TROG's strong trajectory to build on this foundation.

TROG's local and international reputation for leading practice-changing and impactful research is the culmination of the vision, leadership and dedication of many in TROG's radiation medicine community.

This includes the immense contributions of outgoing President Prof Trevor Leong, who has served TROG in many capacities over many years: TROG Scientific Committee (TSC) Chair, Board Director and as Chief Investigator of multiple trials including the TOPGEAR trial; its practice-guiding findings were presented at the European Society for Medical Oncology (ESMO) meeting and published in the *New England Journal of Medicine* in 2024.

Financially, TROG remains robust. In 2024, the organisation reported a small operating surplus of $180,000, not taking into consideration donations (quarantined towards future seed funding initiatives), compared to a $134,000 deficit in 2023 and $247,000 deficit in 2022. I thank the Board for their prudent financial governance and stewardship, and CEO, Susan Goode, and her management team for their responsiveness and diligent execution of key initiatives to optimise processes for activity tracking, quoting and financial reporting. These have allowed the Board to approve carefully considered investments to improve TROG's data management infrastructure, such that it can better support and empower members in their research initiatives.

We saw renewal of several Board member positions as Directors completed their terms in 2024.

Prof Georgia Halkett was elected as a Full Member Director at the March 2024 Annual General Meeting. Prof Halkett brings research insights (current senior research fellow at Curtin University, and Co-Lead for the Cancer Domain in the Curtin Health innovation Research Institute), governance experience (Director on Boards of WA ASMIRT and COGNO) and a strong motivation to help increase radiation therapists' involvement in leading and conducting research.

> *The activities and achievements of 2024, driven by innovation, collaboration, and member engagement, while maintaining financial stability have solidified TROG's strong trajectory.*

Independent Board Director Mr Anthony Belcher was appointed in December 2024 following a wide search and competitive interview process. His appointment strengthens the Board in the areas of finance, strategy and risk. He provides strategic succession planning as Dr Tim Kuypers, who has served on the TROG Board for over a decade and has expertly chaired its Finance Audit and Risk Management (FARM) Committee, prepares to complete his final term with TROG. I take this opportunity to acknowledge Dr Kuypers' immense contributions to TROG's governance and financial management. I also thank Dr Fiona Hegi Johnson and past TSC Chair A/Prof Sasha Senthi for their valuable Board contributions.

A/Prof Hien Le was elected to the role of TSC Chair in mid-2024 and represents the TSC on the Board. Under the direction of the Board and supported by Deputy TSC Chair A/Prof Sweet Ping Ng, he has led a review of the structures, relationships and function of the TSC, with a view to optimising governance, resource allocation and communication.

Message from the

President and Board Chair (continued)

I would also like to express my gratitude to Dr Gerry Adams (pictured right), who made valuable contributions to Board discussions as the Dean of RANZCR FRO.

Ms Mel Grand's appointment in 2024 as Company Secretary, brings additional experience and knowledge in research and corporate governance. With this dynamic and diverse team, the Board is well-positioned to navigate the complexities of the current cancer research environment, optimise organisational effectiveness, and deliver value to TROG's members.

TROG's current strategic direction is now firmly anchored in the TROG 2024–2026 Strategic Plan, which was forged through consultation with the membership, internal and external stakeholders and central office management team. We strategically aligned this plan with the inaugural Australian Cancer Plan, to ensure our efforts contribute directly to national cancer research goals in Australia, while still reflecting a shared vision with our New Zealand members.

Our first strategic pillar pertains to facilitating diversity in our research ideas/questions, exploring beyond standard clinical trials to include registry-based and observational studies, generating real-world evidence and encouraging research that translates evidence into practice. We recognise that we must better incorporate the patient voice and lived experience into the research questions we ask and the study designs we employ. TROG comprises a geographically diverse membership base that serves a geographically and socio-demographically diverse population of patients and caregivers. As such, we must ensure that the research we conduct is relevant, accessible and generalisable to the wider population, including priority populations: our First Nations peoples, patients from regional/rural/remote locations and those from culturally and linguistically diverse populations.

One of TROGs other strategic priorities is to establish strong, mutually beneficial partnerships with national and international academic institutions, professional organisations, healthcare facilities, and industry partners. This has yielded significant results in 2024, most notably our groundbreaking collaboration with the US cancer clinical cooperative group, NRG Oncology. I was pleased to attend and share TROG's Strategic Plan at the European Organisation for Research and Treatment of Cancer's (EORTC) 2024 strategy planning meeting. Our ongoing, active engagement with EORTC and other international tumour-specific trial groups positions us to accelerate global collaborations and will pave the way for TROG to play an even greater role in shaping the future of cancer care on a local and global scale.

The 2024 Member Engagement Survey provided valuable insights into our community's needs and aspirations and will directly inform our future strategic initiatives. I gratefully acknowledge the financial support provided by TROG's Facility Alliance Member institutions, whose commitment is vital to our research endeavours. Their unwavering support, along with the dedication of their trial coordination and research management staff, directly fuels the groundbreaking research conducted by TROG members. I also thank our industry collaborators, corporate partners, supporters who have engaged in fundraising activities and those who have made donations – small and large.

We are profoundly privileged to work across a diverse and multidisciplinary community of clinician researchers and inspiring consumer partners whose lived experience grounds our work and reminds us why we do what we do. I extend my deepest gratitude to the TROG members who tirelessly volunteer their intellect, time and effort. Their unwavering commitment and support are the driving force that will continue to deliver on our shared vision to improve the outcomes of people affected by cancer.

– A/Prof Puma Sundaresan, President & Board Chair

Message from the Chief Executive Officer

Ms Susan Goode

As CEO of TROG, I am proud to reflect on a year marked by collaboration, innovation and measurable progress. In 2024, we advanced our mission to improve outcomes for people affected by cancer through world-class radiation medicine research, while continuing to build a resilient and future-focused organisation.

Our multidisciplinary membership base has grown to more than 1,700 professionals across Australia, New Zealand and internationally, with over 10% of members based in rural and regional areas. This reflects our commitment to equity and to making TROG trials more inclusive of the populations we aim to better serve.

Our Facility Alliance Membership network continues to play a pivotal role in expanding trial reach, with 26 partner hospitals and cancer centres actively collaborating and supporting TROG in our research efforts.

The launch of our TROG 2024–2026 Strategic Plan was a key achievement this year. Developed through consultation with our members and aligned with the Australian Cancer Plan, the strategy focuses on diversifying research, strengthening partnerships, enhancing infrastructure, and elevating member and consumer engagement.

A major milestone was TROG's acceptance as a main member of the US-based NRG Oncology Group – making us the first Australian cooperative trials group to do so. This landmark collaboration opens the door for Australian sites to access NCI-supported trials and significantly strengthens our international research capabilities.

Internally, we streamlined our operations to better support member-led research and ensure sustainability. These enhancements contributed to a positive financial result, allowing reinvestment in infrastructure upgrades, ensuring TROG remains well-equipped to support high-quality, practice-changing trials.

The 2024 Member Engagement Survey provided valuable insights that have already guided improvements in communication, committee structures, and the support we offer early- and mid-career researchers. This feedback loop reinforces our commitment to listening and responding to the evolving needs of our members.

TROG-led research continues to generate global impact. Highlights include international recognition of the FASTRACK II trial and publication of the TOPGEAR trial results in The *New England Journal of Medicine*. We also activated our first teletrial site in Darwin, further demonstrating our commitment to reaching under-served communities.

Our 36th Annual Scientific Meeting in Newcastle brought together over 250 delegates and provided a vibrant platform to showcase our diverse research, acknowledge our members, and celebrate the collaborative spirit that defines TROG.

> *The TROG Strategic Plan focuses on diversifying research, strengthening partnerships, enhancing infrastructure, and elevating member and consumer engagement.*

I extend my heartfelt thanks to our staff, Board, members, Facility Alliance partners, donors, research collaborators, and – most importantly – those who participate in our trials.

I would especially like to thank the TROG central office staff for their commitment, professionalism, and tireless support behind the scenes. Together, we are driving progress and shaping a future where all people affected by cancer benefit from innovative, evidence-based care.

– Ms Susan Goode, TROG CEO

Finance report

Finance Audit & Risk Management Committee Chair

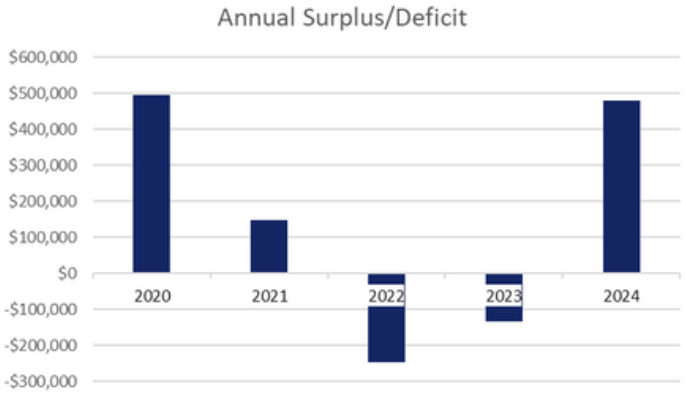
Dr Tim Kuypers

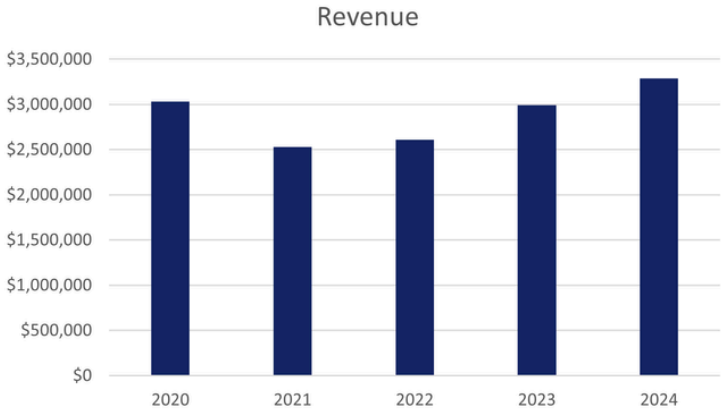
TROG Cancer Research delivered a surplus of $480,087 in 2024, a significantly improved and pleasing result.

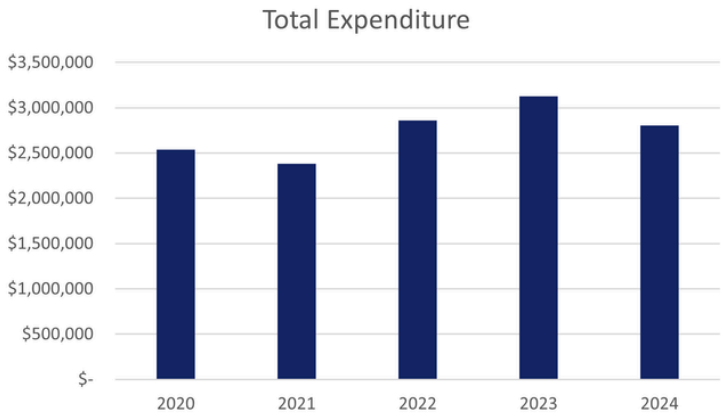
Revenue grew by 10% to be over $3.2m with both Research Services and Radiation Therapy Quality Assurance Departments continuing to increase their annual revenue. There was a material increase in donation revenue due to a large one-off donation from the Genesis Care Foundation. An increase in membership support payments, Annual Scientific Meeting income and continuing strong interest rates contributed to this revenue result.

There was a 10% decrease in expenditure down to $2.8m. This was driven by a more than 10% fall in wage expenditure and a 15% reduction in computer and IT costs. Marketing, insurance and travel expenses increased as TROG continues to return to a normal operating environment post the COVID-19 pandemic.

The surplus generated in 2024 has improved TROG's accumulated surplus (reserves for meeting future challenges) by more than 30%. These reserves currently contain more than $300k of donated funds, to be utilised on specific activities.







Message from the

Finance Audit & Risk Management Committee

Dr Tim Kuypers

In 2024, the focus of the Finance Audit & Risk Management Committee (FARM) continued to be on the efficiency and sustainability of the core business.

The FARM, a subcommittee of the TROG Board, continued to assist in managing financial performance at a trial level. A particular focus over the last few years has been on understanding TROG's time commitment for each trial and the amount and timing of resources required in a dynamic environment. A better understanding of trial-by-trial time requirements has allowed improvements in resource management. This focus resulted in TROG being able to better match its resources to demand for its services, and helped deliver the material reduction in wage expenses this year.

After more than a decade in my role on the TROG Board and as Chair of the FARM committee, this will be my final Annual Report message, as I step down to make way for new members and ideas on the FARM committee.

I am proud of what TROG has achieved in the last decade, and I would like to thank the TROG team, my fellow FARM members and all the Presidents I served under in the last 10 years for their insights and support.

– Dr Tim Kuypers, FARM Committee Chair

FARM Committee Members

- **Dr Tim Kuypers,** (Chairperson), Independent TROG Director
- **Mrs Sue Naeyaert**, Independent TROG Director
- **Mr Andrew Beck**, Independent TROG Director
- **Dr Fiona Hegi-Johnson**, Elected TROG Director (Resigned 13/03/2024)
- **Prof Georgia Halkett**, Elected TROG Director (Appointed 13/03/2024)

Message from the

TROG Scientific Committee Chair

Associate Professor Hien Le

The TROG Scientific Committee (TSC) has enjoyed a productive 2024, with highlights including a steady flow of new proposals, continued strong trial activity and significant grant funding.

I would like to thank A/Prof Sasha Senthi, who stepped down as TSC Chair in June, having served three years in the role and more than nine years on the TSC. Sasha served in the roles of radiation oncology representative (2015-2021), Deputy TSC chair and then Chair from June 2021.

Prof Paul Keall finished his term as TSC Medical Physics representative in March 2024, also having served on the Committee for nine years.

We are sincerely grateful to both members for their significant contributions to the TSC, having volunteered their time and expertise for almost a decade.

I was honoured to be appointed as the 9th Chair of the TSC in June 2024. I was joined by new Deputy Chair A/Prof Sweet Ping Ng (appointed in June) and Medical Physics representative Prof Joerg Lehmann (appointed in August). I look forward to working with all the TSC members during my term as Chair.

This year, Sweet Ping and I have worked with selected Board members and TROG Central Operations Office staff to undertake a review of the TSC and its sub-committees and groups. The review was informed by the 2024 Annual Membership Survey, which provided valuable feedback from members on their views and satisfaction, including on the TSC, its sub-committees and groups and their processes.

The main themes of the feedback received were:

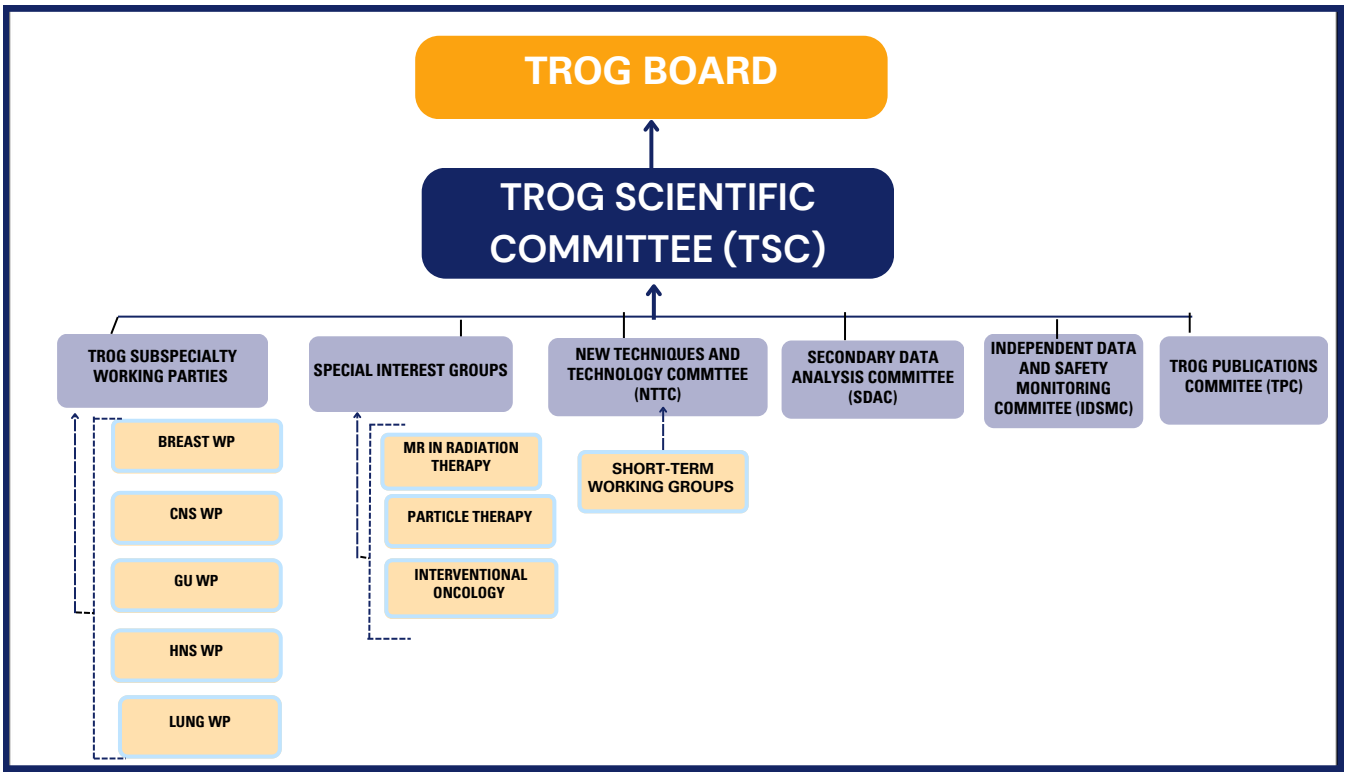
- Improving communication between the membership, various groups and the TSC
- Ensuring clarity about outputs from TROG committees
- Identifying barriers for members seeking to join a TROG committee
- Fostering and supporting early research careers
- Ensuring clarity and visibility of the new trial proposal pathway.

With this feedback in mind, TROG will introduce several new initiatives in 2025 including:

1. Expanding the TSC membership
2. Ensuring representation across groups
3. Forming an Emerging Investigator Group
4. Updating the new proposal submitting process, workflow and communication pathways.

Notable achievements in 2024 included:

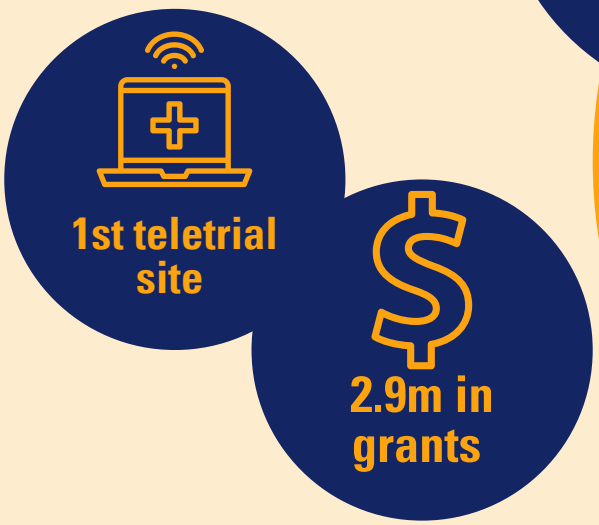
- 13 new trial proposals were submitted (5 Category A, 3 Category B,1 Category C and 4 Secondary Data Analysis requests)
- 9 trial proposal were accepted for development
  - Category A; TD 24.06 RATOC, TD 24.05 RATIONAL, 24.04 TAILOR BEV, 24.03 ULTRA-LUNG & TD 24.01 MODERN LUNG
  - Category B; TD 24.09 HIGH-FIVE, TD 24.08 FAST Forward Boost & 24.02 HN014
  - Category C; TD 24.07 Neoadjuvant high precision radiotherapy in NSCLC



Message from the

TROG Scientific Committee Chair (continued)

- Continuing trial activity with 24 open trials (10 of which were recruiting patients and 14 in follow-up) and 20 trials in development.
- 211 participants were recruited to trials, bringing overall accrual on TROG trials since inception to 15,560.
- TROG's first teletrial site was activated in February:
  - Royal Darwin Hospital is now recruiting to TROG 21.07 SOCRATES HCC (a teletrial site to Flinders Medical Centre, Adelaide, SA).
- TROG received more than $2.9M in grant funding including:
  - BIG 3-07/TROG 07.01 – DCIS (Prof Boon Chua) was awarded a $1.128 million NHMRC grant to help fund the completion of this 20-year trial.
  - TROG 21.07 SOCRATES HCC (Prof Alan Wigg and A/Prof David Pryor) was awarded a $200K Tour-de-Cure grant to extend recruitment.
  - TD 23.02 SMART (Dr Neda Haghighi) received a $50K Tour-de-Cure grant
  - TROG received a Cancer Australia 'Support for Cancer Clinical Trials (SCCT) Program 2024-2027' funding, which enables TROG to facilitate the development of innovative trials to improve radiation therapy care and outcomes for cancer patients, in alignment with the Australian Cancer Plan.
- 14 manuscripts were published relating to TROG studies including:
  - 12 manuscripts relating to TROG lead trials (Category A trials)
- Prof Shankar Siva became the first Australian to present the Presidential Symposium lecture on the practice-changing results of TROG 15.03/ANZUP 16001 – FASTRACK II trial at the American Society for Radiation Oncology meeting (pictured below).



- TROG 21.12 ASPIRE became a national clinical quality registry with the opening of the study at the Alan Walker Cancer Care Care Centre (NT), representing a significant opportunity for research into Indigenous health.

Another notable event was the 2024 Proton Planning Workshop hosted by the TROG Particle Therapy Special Interest Group (PT SIG) in July. More than 50 participants across four sites took part, generating a comparison proton and photon radiation therapy plan for a paediatric craniopharyngioma case and then presenting, discussing and comparing the plans. Thank you to A/Prof Scott Penfold who led the Proton Planning Working Group and workshop.

I would like to acknowledge and thank the 150+ members of the TSC, subspeciality working parties, special interest groups and the other TSC sub-committees for their dedication and participation in committee activities. They bring incredible expertise, new ideas, partnerships, and collaborations that support TROG's mission to advance radiation medicine research to improve outcomes for those affected by cancer.

TROG and the Scientific Committee will continue working closely with our members to ensure that our trials and new proposals address the key priorities in radiation oncology.

– A/Prof Hien Le, TROG Scientific Commitee Chair

Thank you to our

Committees

The TROG Working Parties are vital in shaping our research priorities by identifying gaps in research, developing new research concepts, reviewing the scientific merit of research proposals, and providing expert advice. Our tumour stream Working Parties are comprised of members from many craft groups and disciplines, with a focus on Breast; Central Nervous System (CNS); Genitourinary (GU); Head, Neck & Skin (HNS); and Lung cancers.

We acknowledge the valuable input of a number of other committees and special interest groups, whose work complements that of the working parties in guiding the TSC:

- **Secondary Data Analysis Committee (SDAC):** Oversees the development of guidelines and procedures for secondary analysis of TROG clinical trials data.
- **New Technologies and Techniques Committee (NTTC**): Ensures that up-to-date guidelines and procedures are available for implementing new and complex technologies in TROG clinical trials.
- **Independent Data and Safety Monitoring Committee (IDSMC):** Monitors progress of all TROG phase III and late phase II clinical trials in relation to quality processes and procedures, ensures the safety of patients and ensures that, wherever possible, each trial meets its primary objectives.
- **TROG Publications Committee (TPC):** Provides peer review in the form of independent scientific review of publication material and timelines, helping to maintain high standards and encouraging accurate, thorough and credible research reporting of TROG clinical trials.
- **TROG Special Interest Groups (SIG):** Composed of TROG members who have an interest in clinical trial research involving specific technology or techniques in radiation oncology. Current groups include the Particle Therapy SIG, MR in Radiation Therapy SIG and Interventional Oncology SIG.

If you would like to join a TROG committee, go to: www.surveymonkey.com/r/TROG_Join_a_Committee

Committee membership update

Thank you to the following TSC members who stepped down:

- Sashendra Senthi (Chair)
- Paul Keall (Medical Physicist Representative)

We welcomed three new TSC members:

- Hien Le (TSC Chair)
- Sweet Ping Ng (Deputy Chair)
- Joerg Lehmann (Medical Physicist Representative)

Thank you to the following TSC sub-committee, working party and SIG members who stepped down this year:

- Melissa James (Breast WP)
- Farhannah Aly, Anzela Anzela (HNS WP)
- Wee Loon Ong (CNS WP)
- Kristy Robledo (GU WP)
- Peta Forder (IDSMC)
- Julie Chu, Benjamin Harris, Milad Mirzaei, Amy Brown, Lois Holloway, Dion Forstner, Marcus Powers (MR in RT)

We welcomed 30 new Working Party (WP), committee and Special Interest Group (SIG) members:

- Rachael Wilks (Breast WP)
- Peter Kerstens, Laurel Schmidt, Yu Yang Soon, Lucy Sim, Jeremy Ruben (CNS WP)
- Marcus Hu, Anna Lawless, Vanessa Panettieri, Revadhi Chelvarajah, Lucy Sim, Justin Smith, Yuvnik Trada (HNS WP)
- Rachael Wilks (GU WP)
- Daniel Barker, John Shakeshaft, Sharon Watson (IDSMC)
- Trang Pham, Farhannah Aly (NTTC)
- Carrie-Ann Ng, Lucy Sim (SDAC)
- Feng-Yi Soh, James Corte, Jerome Gastaldo, Amy Walker (MR in RT SIG)
- Daniel Scandurra, Mikaela Doig, Eunji Hwang, Jeremy Ruben, Samuel Peet (PT SIG)

See the full lists of Committee members on page 56.

ICON
CANCER CENTRE

World-class cancer care

Australia's largest dedicated cancer care provider

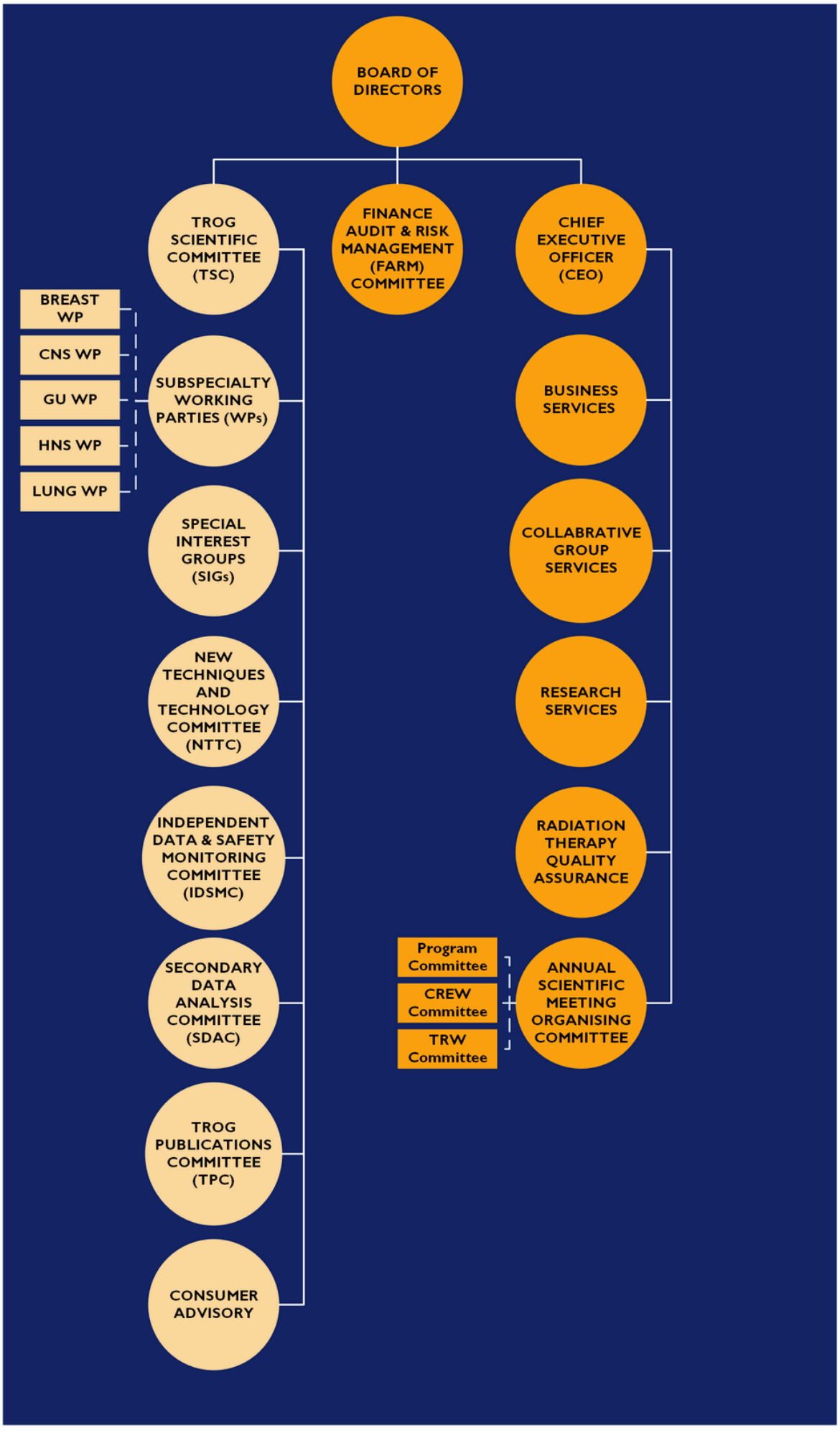
Radiation Oncology | Medical Oncology | Haematology | Clinical Trials

Icon Cancer Centre is part of Icon Group which has expanded globally into Malaysia, Singapore, Hong Kong, New Zealand, and the United Kingdom. Icon has a strong history of cancer research, now operating the largest private cancer clinical trials program in Australia.

Icon is committed to delivering the best care possible, as close to home as possible. We proudly offer:

- **40+** years experience delivering cancer care
- **42** cancer centres (and growing)
- **200+** internationally recognised specialists
- **Australia's largest** private cancer clinical trials program
- **No wait list** for consultation or treatment
- **World-class** technology and techniques

Our Organisational Structure



Our

Board of Directors

Associate Professor Purnima Sundaresan

Full Member, Director, President/Chairperson
(Elected as President 13 March 2024)
MBBS, BSc (Hons), FRANZCR, PhD
Consultant Radiation Oncologist Blacktown and Westmead Hospitals;
Clinical academic, The University of Sydney;
Associate Editor, *Journal of Medical Imaging and Radiation Oncology;*
Chair of Board, Head and Neck Cancer Australia.

Professor Trevor Leong

Full Member, Director, Past President
(President until 13 March 2024)
MBBS, MD, FRANZCR
Radiation Oncologist and past Director of Division of Radiation Oncology,
Peter MacCallum Cancer Centre;
Director AGITG, Company Secretary AGITG.

Associate Professor Hien Le

Full Member, Director
Chair, TROG Scientific Committee
(Appointed 3 June 2024)
MBBS, FRANZCR
Head of research, Royal Adelaide Hospital;
Radiation Oncologist, ICON Cancer Centre;
Council member RANZCR.

Dr Fiona Hegi-Johnson

Full Member Director
Chair, TROG Lung Working Party
Member, Finance, Audit & Risk Management Committee
(Term ended 13 March 2024)
MBBS (Hons 1), BSc. Med (Hons)
Radiation Oncologist, Breast, Lung & SABR Service,
Peter MacCallum Cancer Centre;
Senior Research Fellow, University of Melbourne.

Associate Professor Sashendra Senthi

Full Member Director
Scientific Committee Chairperson
(Term ended 2 June 2024)
BHB, MBChB, PhD, MPH, FRANZCR
Radiation Oncologist Alfred Health Melbourne;
Associate Professor Monash University.

Our Board of Directors

Professor Annette Haworth

Full Member Director
(Elected June 2019)
FACPSEM, PhD, MSc, BSc (Hons)
Professor of Medical Physics, University of Sydney;
Director, Institute of Medical Physics;
Life Member of TROG with more than 20 years serving on multiple clinical trials and TROG committees.

Dr Melissa James

Full Member Director NZ
(Elected 1 July 2021)
MBBS BSc (Hons) FRANZCR (UNSW)
Radiation Oncologist, Canterbury District Health Board New Zealand;
Senior Lecturer at Otago University, New Zealand.

Associate Professor Georgia Halkett

Full Member Director
(Elected 13 March 2024)
PhD, FIR, BMedRad(Hons), GAICD
Senior Research Fellow, Curtin University;
Co-lead Cancer Domain of Curtin Health Innovation Research Institute;
WA Board Director ASMIRT;
Board Member COGNO (Cooperative Trials Group for Neuro-Oncology).

Dr Gerry Adams

Royal Australian and New Zealand College of Radiologist (RANZCR) Representative
(Appointed 1 January 2023)
MBBS, FRANZCR, MAICD
Consultant Radiation Oncologist, GenesisCare, Bundaberg, QLD;
Published several research papers, reviews and book chapters; Presented at national and international conferences;
Active member of RANZCR Faculty of Radiation Oncology including Member, Quality Improvement committee.

Dr Tim Kuypers

Independent Director
Chair, Finance, Audit & Risk Management Committee
(Appointed 27 October 2014)
GAICD, PhD Economics, ACCA Diploma (Acc and Fin);
Special Advisor at Houston Kemp Economists.
Member of Metro Trains Melbourne Board Safety Committee
Standards Board Australia;
Experienced non-executive director and senior executive;
Significant expertise in highly regulated industries of transport and telecommunications.

Our Board of Directors

Mrs Susan Naeyaert

Independent Director
Member, Finance, Audit & Risk Management Committee
(Appointed 1 November 2021)
BPharm, Grad Dip SC(Pharm) MCom
Over 20 years' experience in pharmaceutical industry, health economics, pricing and government policy;
Experience in the US, Europe and Asia, with global and regional responsibilities;
Experience in cancer research, including at the European Organisation for Research and Treatment in Cancer (EORTC);
Previously investigated the use of Quality of Life instruments in randomised clinical trials.

Mr Andrew Beck

Independent Director
Member, Finance, Audit & Risk Management Committee
(Appointed 6 April 2022)
BArts (Hons), BLaw(Hons)
Experienced in-house lawyer and Chief Legal Officer at Pacific National, Australia's largest rail freight operator;
Accomplished in improving processes and generating valuable business outcomes;
Focused on solutions and results with expertise in risk management.

Mr Murray McLachlan

Independent Consumer Representative Director
Appointed 6 April 2022)
Deputy Chair of Cancer Voices NSW;
Health Consumer NSW Board member;
Volunteered with Cancer Council NSW;
Professional experience in the NSW public sector -policy and advocacy;
Personal cancer experience as both a person diagnosed with prostate cancer (successful treatment 2009) and as a long-term partner and carer of a person diagnosed with pancreatic cancer (passing in 2007).

Our

Capabilities and Services

Making clinical trials happen: From concept to publication

RESEARCH DEVELOPMENT

Our Research Development team fosters and promotes the design of high-quality, investigator-initiated trials by supporting them from new concept stage through to a complete robust protocol. This trial development support includes scientific review and feasibility assessment of proposals, establishing collaborations to enhance trial scope and impact, database development and support to help investigators develop trial budgets and submit funding applications.

TRIAL MANAGEMENT

The Research Operations team plays a pivotal role in managing clinical trials from start-up to completion, within our Central Trial Coordinating Centre. We focus on meeting site activation and participant recruitment goals, safeguarding participant safety with a risk-based monitoring approach, and ensuring data integrity and regulatory compliance. Services are tailored to meet the specific needs of each trial, and we offer support to the Trial Chair and Management Committee to ensure trials run efficiently.

RADIATION THERAPY AND IMAGING QUALITY ASSURANCE

We deliver a comprehensive quality assurance framework to collect, assess and standardise medical imaging and radiation therapy data for multicentre clinical trials. Through the development of risk-adapted quality assurance programs tailored to each project and the implementation of radiation therapy guidelines, we ensure the highest levels of trial integrity and trial participant safety.

COLLABORATIVE GROUP SERVICES

TROG's Collaborative Group Services provide sponsorship and oversight for clinical trials and research projects, extending our impact beyond individual studies. We offer flexible, investigator-focused support across the full research lifecycle – from grant administration and ethics submissions to legal, contractual, and regulatory compliance. Our experienced team works closely with researchers to customise support according to the complexity and needs of each project, helping members navigate the evolving landscape of clinical trial governance with confidence and efficiency.

BUSINESS SERVICES AND INFRASTRUCTURE

Our Business Services team provides a solid foundation for TROG's operational, financial, and engagement strategies. We have developed special infrastructure to support our members and research projects which includes our Trial Management Database, central imaging repository, clinical quality management system, financial management and IT resources such as as data storage, server access and real-time data back-up.

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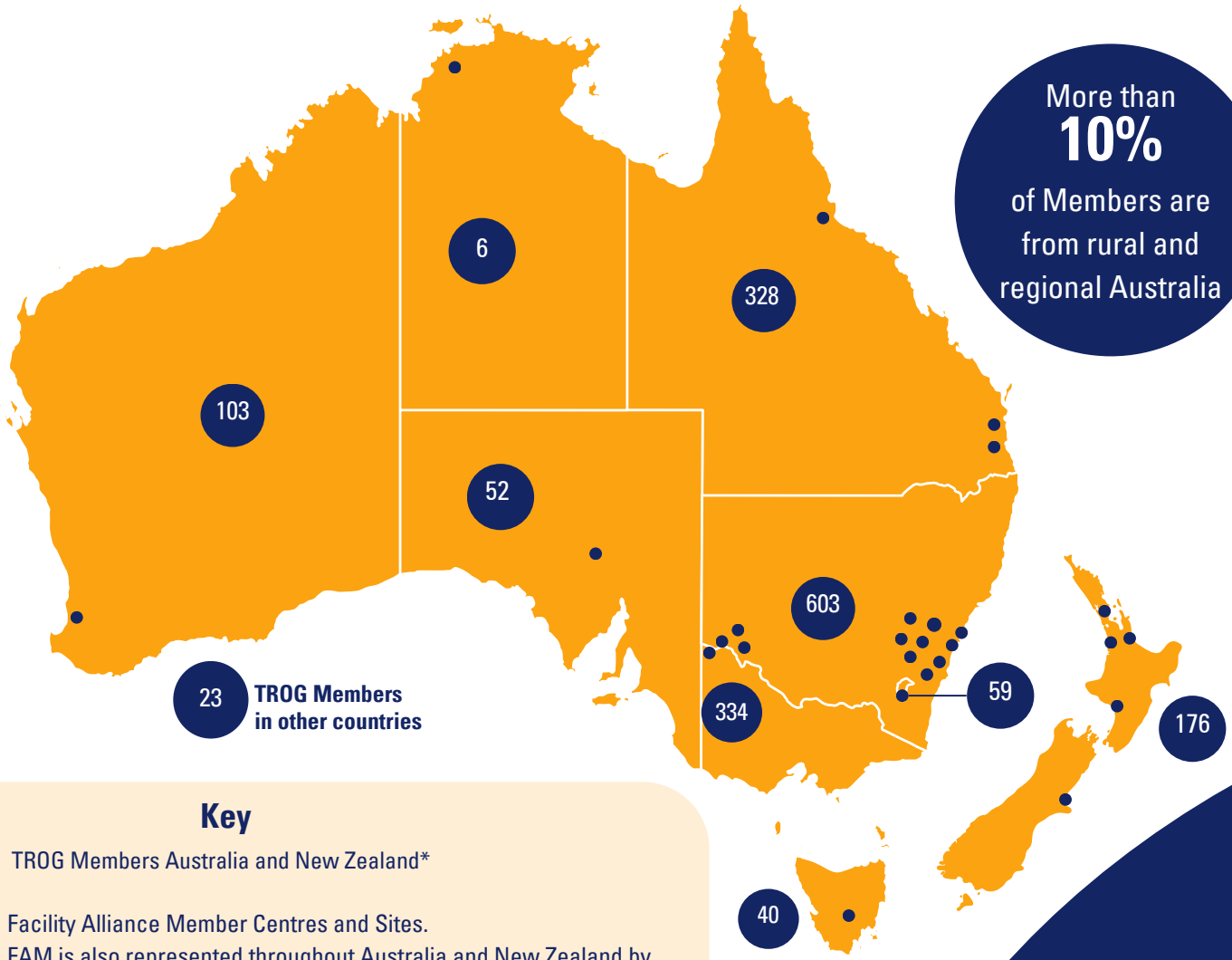
Our Membership

Our membership continues to grow, with a total of **1743** Members across Australia and New Zealand in 2024.



More than **10%** of Members are from rural and regional Australia

Key

TROG Members Australia and New Zealand*

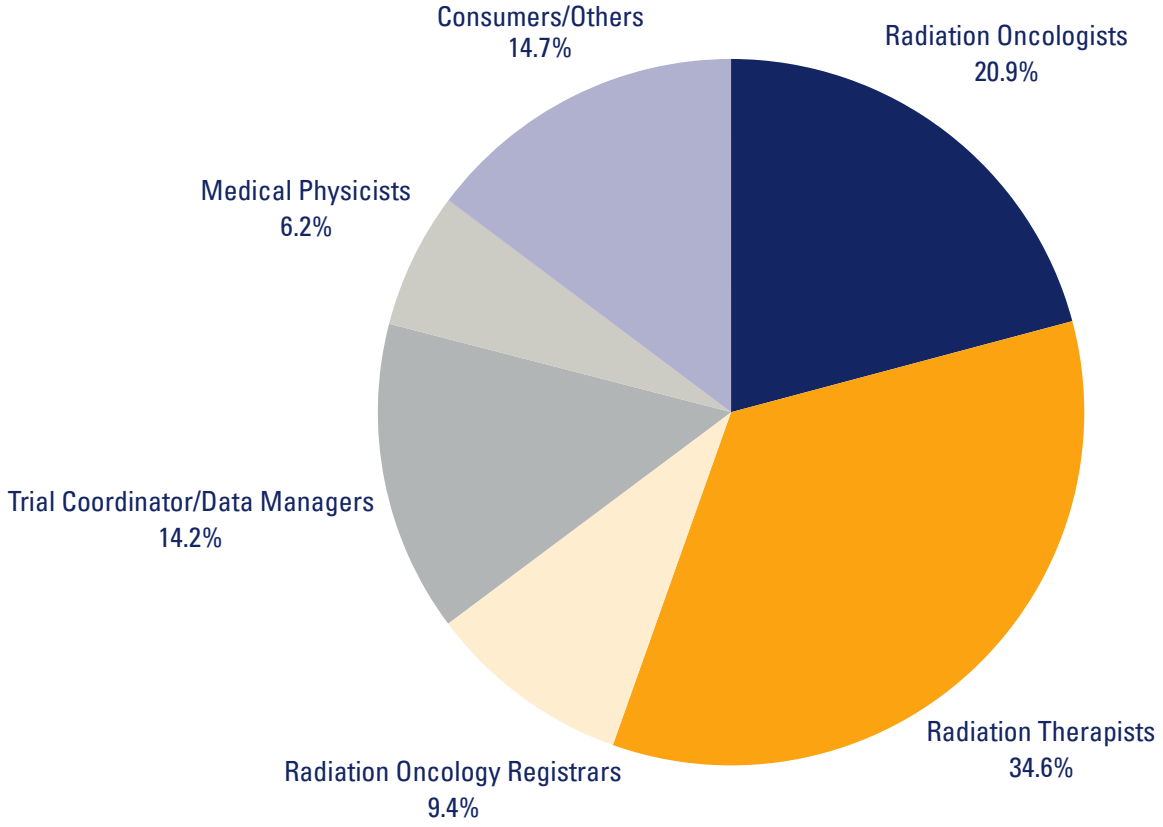
Facility Alliance Member Centres and Sites.
FAM is also represented throughout Australia and New Zealand by Icon Cancer Centres.

*Location data unavailable for 19 TROG Members.

Our Membership

We attract members from a wide range of radiation medicine disciplines, as shown in the figures below.

TROG Members by Discipline



DISCIPLINE	2024	FULL AND LIFE MEMBERS	AFFILIATE MEMBERS
Radiation Oncologists	357	170	187
Radiation Therapists	592	17	575
Radiation Oncology Registrars	160	5	155
Trial Coordinators/Data Managers	243	3	240
Medical Physicists	107	20	87
Medical Oncologists	13	7	6
Interventional Oncologists	9	1	8
Statisticians	9	1	8
Consumers/Other	253	14	239
TOTAL MEMBERSHIP	1743	238	1505

Our

Facility Alliance Membership

The TROG Cancer Research Facility Alliance Membership (FAM) continues to be a vital part of TROG's collaborative outreach, and this was especially true in 2024. With centres located across Australia and New Zealand, the unwavering support of our FAM members, combined with TROG's clinical trial implementation services, remains instrumental in advancing our shared goal of improving patient outcomes.

The TROG Central Operations Office acts as a central hub, offering specialised IT support, expert advice, and knowledge from subspecialty groups, while our Radiation Therapy Quality Assurance (RTQA) team is dedicated to delivering high-level services to our FAM partners.

Comprising 26 cancer treatment centres and hospital radiation oncology departments, our FAM members are essential to TROG's success, contributing through their participation in TROG investigator-initiated, scientifically rigorous clinical trials.

The TROG 2024 ASM in Newcastle provided an excellent opportunity to recognise and celebrate the commitment of our FAM members.

As always, TROG expresses its sincere gratitude to the facilities that contributed to our work through FAM throughout 2024, many of which enjoy the benefit of the longer-term, multi-year agreements. We endeavour to continue to grow and service our FAM in 2025.

Find out more about Facility Alliance Membership benefits

Details of FAM benefits and a full list of 2024 FAM members can be found on our website and via this link.

Become a TROG member today

Individual TROG Membership offers a wide range of benefits including:

- Access to TROG e-learning platform encompassing GCP training and more.
- Copies of trial documents including protocols.
- Minutes and presentations from meetings.
- TROG Policy and Procedures Manuals.
- Access to trial and RTQA resources.

Membership enquiries: Click here or email: trog@trog.com.au

Our Engagement & Outreach

TROG CEO Susan Goode embarked on a series of site visits to Radiation Oncology facilities across Australia and New Zealand throughout 2024, exploring opportunities for collaboration, including through the TROG Facility Alliance Membership (FAM) program. These visits were integral to fostering partnerships to strengthen TROG's research network and enhance our delivery of cutting-edge cancer research and treatment. Visits included:

Wellington Hospital, NZ
We had valuable discussions with clinicians on innovative approaches to patient-centred cancer care and research. The visit emphasised the need for regional collaboration and laid the groundwork for deeper partnerships between TROG and New Zealand's Wellington Hospital.

The Alfred, Melbourne, Victoria (Virtual)
Conducted virtually, the presentation to The Alfred in Melbourne, Victoria, included an overview of current TROG activities and opportunities to increase our engagement with TROG members, clinicians and health professionals from The Alfred.

Central Coast Cancer Centre, NSW
The visit to Central Coast Cancer Centre at Gosford Hospital on the NSW Central Coast focused on leveraging TROG's current trials that are already underway, as well as looking for opportunities to increase the number of trials open at the Centre.

Sunshine Coast University Hospital, Queensland
This visit highlighted the unique challenges and opportunities faced by facilities that service fast-growing communities. Susan met with the hospital's radiation oncology research team to discuss TROG's vision for extending clinical trial access to diverse populations, particularly in regional settings.

Dubbo Hospital, NSW
Dubbo Hospital, in central west NSW, is another key location in NSW's rural landscape. Here, the conversations revolved around building capacity for clinical research in underserved regions. The visit sparked discussions about how TROG's FAM could empower Dubbo Hospital to offer innovative trials, giving patients in this community access to advanced cancer treatments without needing to travel to metropolitan centres (pictured above).

Orange Hospital, NSW
Discussions at Orange Hospital, also in central west NSW. centred on trial opportunities for patients in rural areas. Acknowledging the disparities in access to cutting-edge treatments in these regions, this visit underscored TROG's commitment to bridging gaps in oncology care by supporting trial sites in more remote areas (pictured left).

Our Research Highlights

Throughout 2024, we reviewed a steady flow of new trial proposals and facilitated the development of a significant number of new trials. We also achieved milestones in our ongoing trials and continued to disseminate research outcomes in peer-reviewed journals, as demonstrated in the above snapshot of our highlights.

Our

Research Highlights

TROG's Radiation Therapy Quality Assurance (RTQA) and Imaging Quality Assurance programs provide a framework to monitor protocol compliance and data quality for clinical trials.

With advanced software and customised databases, the quality assurance team ensures medical imaging and radiation therapy planning and treatment data can be collected and analysed.

As highlighted in the infographic above, we provide a wide range of vital quality assurance services for trial sites including: risk assessment and monitoring; secure data transfer; robust data collection, storage and management; guideline and protocol development; new technology implementation; site credentialling and support; and centralised peer review.

Our

Research Highlights

TROG 17.02 OUTRUN Trial Findings Presented at World Cancer Conference

A new analysis including findings from the **TROG 17.02 OUTRUN** trial were presented at the IASLC 2024 World Conference on Lung Cancer in San Diego, USA, in September 2024.

The presentation: "Osimertinib with or without SRS for Brain Metastases from EGFRm NSCLC: Pooled Analysis of Two RCTs" reports on the findings from both the OUTRUN and LUOSICNS trials, together involving a total of 79 participants.

The trials compared upfront osimertinib and upfront stereotactic radiosurgery (SRS) in the management of untreated brain metastases in patients with epidermal growth factor receptor mutated (EDFRm) non-small lung cell cancer (NSCLC).

Congratulations to OUTRUN Trial Co-Chairs Dr Fiona Hegi-Johnson, Dr Chee Khoon Lee, and Dr Yu Yang Soon on sharing their latest findings.

TROG 20.01 CHEST RT Trial Reaches Recruitment

The **TROG 20.01 CHEST RT** (Chemotherapy and Immunotherapy in Extensive Stage Small Cell Lung Cancer with Thoracic Radiotherapy) clinical trial completed recruitment of its targeted 35 participants from eight trial sites across Australia in August 2025 and is now officially closed to recruitment.

Congratulations to the Trial Chairs, Dr Eric Hau and Dr Sagun Parakh, for their dedication and hard work to reach this milestone.

This trial will assess the safety and effectiveness of combining chemotherapy and immunotherapy with chest radiation therapy.

Trial follow-up is expected to continue until August 2027 and we anticipate that results will be available by mid-2028 and are optimistic about the potential of this innovative approach to transform patient care.

ICR-CTSU/2014/10049/TROG 14.02 RAIDER trial offers alternative approach for bladder cancer

Significant new phase II findings from the **ICR-CTSU/2014/10049/TROG 14.02** RAIDER trial first published in *European Urology* journal in October 2024 offer promise for the use of complex adaptive radiotherapy as an alternative to radical surgery for bladder cancer.

The trial, led by The Cancer Research Institute (UK), evaluated standard whole bladder radiotherapy (WBRT), standard-dose adaptive radiotherapy (SART) and dose-escalated adaptive radiotherapy (DART).

The study found that the DART approach was safe and feasible, with a relatively low rate of serious side effects and similar survival rates to those seen in patients undergoing cystectomy.

TROG Cancer Research was the Australian sponsor of the trial, as well as being responsible for trial co-ordination and Radiation Therapy Quality Assurance (RTQA) for the Australian trial centres. Congratulations to A/Prof Farshad Foroudi, and all the trial team.

Read the paper in European Urology.

Our

Research Highlights

A Decade of Delivering Valuable Results For Breast Cancer Patients

A decade on from the last participant completing treatment, the **BIG 3-07/TROG 07.01 – DCIS** trial is continuing to deliver valuable results.

Led by TROG Cancer Research, the international, randomised phase III study aimed to improve the treatment outcomes of women diagnosed with ductal carcinoma in-situ (DCIS) of the breast.

DCIS of the breast is characterised by abnormal cells in the milk ducts that haven't spread into the breast tissue, but in some patients, the DCIS may progress to become invasive breast cancer. Despite it being a common diagnosis, there has been relatively little research to improve the treatment outcomes of women with DCIS.

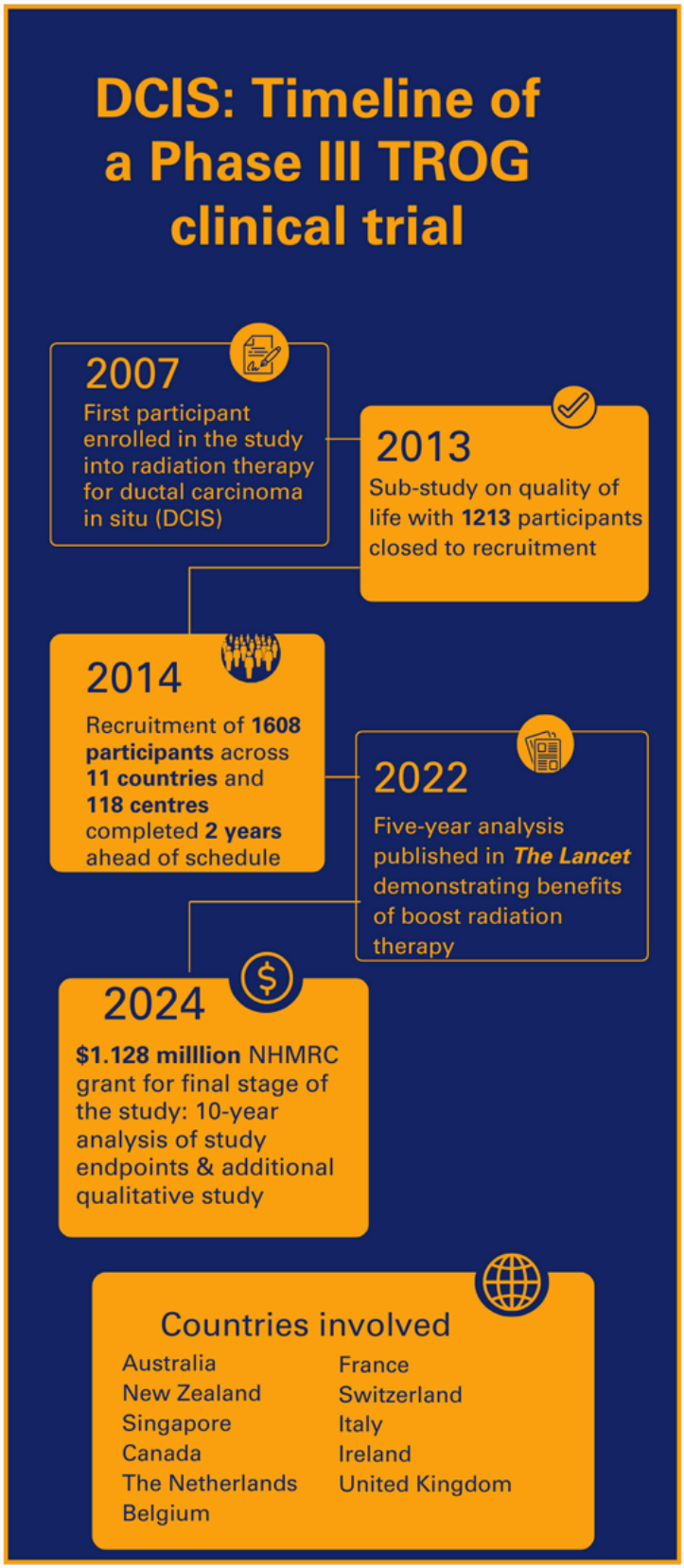
While radiation therapy after breast conserving surgery reduces the risk of invasive recurrence, it has short- and long-term toxicity. There has long been a lack of high quality evidence on the optimal radiation dose-fractionation for DCIS, to guide patients and clinicians in achieving treatment goals.

The DCIS trial aimed to shed light on the long-term efficacy and safety of different radiation doses and number of radiation therapy sessions to reduce the risk of recurrence and improve the safety and convenience of care for women with DCIS.

The first participant was enrolled in the study in 2007, and recruitment of 1608 participants from 118 centres across 11 countries was completed in 2014, two years ahead of schedule.

A substudy focusing on quality of life closed to recruitment in 2013, after accruing 1213 participants.

A network of biobanks in Australia, Canada, Italy and the UK have been in operation since study inception to enable the conduct of translational research focusing on biomarkers that predict the progression of DCIS to invasive breast cancer. (continued next page)



Our

Research Highlights

BIG 3-07/TROG 07.01 – DCIS: A Decade of Delivering Valuable Results

Several impactful papers detailing findings of the DCIS trial have already been published, including five-year analysis published in *The Lancet* in 2022. It demonstrated that boost radiation after postoperative whole breast irradiation improved local control of the disease in patients with non-low-risk DCIS, although there was an increase in toxicity experienced among those receiving the additional radiation therapy.

In 2024, the research team led by Chief Investigator Prof Boon Chua, from UNSW, was awarded a $1.128 million NHMRC grant for the final stage of the trial – 10-year analysis of the study endpoints, as well as an additional, novel qualitative study. This award enables continuation of our productive global collaboration to carry the trial to a successful conclusion. It will also support our new qualitative study to explore the lived experiences of the diagnosis, treatment and survivorship 10 years post-randomisation." Prof Chua said. "Collectively, our studies will generate the data to underpin development of a risk assessment tool and decision aid for women with DCIS."

That research is now underway to provide further valuable evidence to improve experiences and outcomes for women with DCIS.

The DCIS trial is led by TROG Cancer Research, and conducted in collaboration with Breast International Group (BIG 3-07); Canadian Cancer Trials Group (CCTG MA33); European Organisation for Research and Treatment of Cancer (EORTC Trial 22085-10083); Scottish Cancer Trials Breast Group (SCTBG); Cancer Trials Ireland (CTI); and the International Breast Cancer Study Group (IBCSG38).

> *"Collectively, our studies will generate the data to underpin development of a risk assessment tool and decision aid for women with DCIS."*
> – **Professor Boon Chua, Chief Investigator**

Our

Research Highlights

AGITG AG0407GR/TROG 08.08 TOPGEAR Trial Outcomes On World Stage

Globally significant results from the **AGITG AG0407GR/TROG 08.08 TOPGEAR** trial were released this year, providing evidence that is set to change practice globally around preoperative chemoradiotherapy for gastric cancer.

The findings were presented at the European Society for Medical Oncology (ESMO) Congress in Barcelona, Spain by Chief Investigator Prof Trevor Leong (pictured top right), and simultaneously published in the prestigious *New England Journal of Medicine* in September 2024.

The multidisciplinary study, led by the Australasian Gastro-Intestinal Trials Group (AGITG), involved 574 participants with resectable gastric cancer across 15 countries, and investigated whether adding concurrent radiation therapy to standard treatment would improve pathological complete response rates and overall survival compared to perioperative chemotherapy alone. Findings that the addition of preoperative chemoradiotherapy to perioperative chemotherapy did not improve overall survival compared to perioperative chemotherapy alone help answer a long-standing question about the optimal adjuvant regimen for potentially curable gastric cancer.

The trial involved the collaborative efforts of TROG, the European Organisation for Research and Treatment of Cancer (EORTC) and Canadian Cancer Trials Group (CCTG). TROG successfully led the RTQA program for TOPGEAR, enabling over 200 real-time pre-treatment radiation therapy plan reviews, nationally and internationally. This was a significant achievement, as it required careful navigation of time-zones, jurisdictions and treatment timelines.

We congratulate Study Chair Prof Leong, TROG Radiation Therapy Manager Alisha Moore, and all involved in the trial worldwide.

Prof Leong say the findings will change the way gastric cancer is treated around the world, reducing the treatment burden for patients who might otherwise have undergone repeated sessions of radiation therapy.

"We're very grateful to all the trial participants who have helped provide us with important new knowledge to improve our understanding of oesophago-gastric cancer," he said.

TOPGEAR participant: Mavis's Story

Mavis De La Pierre, a grandmother from Melbourne, Victoria, had no hesitation in signing up to take part in the TOPGEAR trial after she was diagnosed with stomach cancer six years ago.

Mavis, now 78, sought medical advice after experiencing some difficulties swallowing. Tests revealed a frightening diagnosis.

"I knew something was wrong, but I was so shocked when I was told that I had stomach cancer," she says.

Mavis was offered the option of participating in the TOPGEAR trial, which investigated whether adding radiation therapy to the standard gastric cancer treatment of chemotherapy then surgery would be beneficial.

"These type of studies are how people get to learn more about cancer," she says. "I just went with it."

Prior to surgery, she underwent three rounds of chemotherapy, followed by five weeks of radiation therapy, five days a week, as part of the TOPGEAR trial. Following her successful gastrectomy surgery, the surgeon told her the tumour had shrunk by 95%. While Mavis says the treatment was far from easy, the end-result of getting the cancer "all clear" after therapy and surgery made it worthwhile.

"Naturally I wanted to get better, and it worked for me. If being in a trial is helpful in learning the best way to treat people with the horrible 'C' – cancer – I'm happy to have taken part," she says.

Our

Research Highlights

TOPGEAR participant: Sebastian's Story

Sebastian Mysiorek's new life in Australia was thrown into turmoil when he underwent tests for gastric-related symptoms 10 years ago.

He first experienced reflux and stomach pain around 2006 in his home country of Poland. While gastroscopy showed some stomach tissue changes, doctors told him not to worry about it.

He moved to Australia in 2008 and settled in Melbourne, Victoria, with his wife Magdalena. However, in 2012 he started to experience stomach pain again, and his symptoms progressed to vomiting by 2014.

When his GP referred him for endoscopy, he learned the shocking diagnosis.

"That's when – BOOM – I was told I had stomach cancer," he says.

Sebastian, who was only 38 years old at the time of his diagnosis, was among the 2500 Australians diagnosed with gastric cancers each year. His GP asked if he might be interested in taking part the TOPGEAR trial, aimed to work out the best mix of therapies to treat gastric cancer.

He says the potential benefits and risks of the trial were explained to him, and he was keen to take part to contribute to scientific knowledge about how to treat gastric cancer.

"I thought by taking part, I might benefit and I can help doctors work out the best treatments" he says.

> *My way of thinking is that doing trials is the only way we can find a cure.*

"On the psychological side, I also thought I don't want to have regrets about not trying everything I can." I was 38 years old, I had no kids, I had nothing to lose – I thought 'let's go for it'," he says.

Sebastian underwent chemotherapy, which saw him lose weight, experience nausea and require a short stay in hospital. He was among the group of participants in the TOPGEAR trial who also received five weeks of radiation therapy, which didn't cause him any adverse effects. He then underwent total gastrectomy surgery.

Sebastian recovered well from surgery, and his cancer has now been in remission for nine years.
He has returned to normal daily life, and he and Magdalena are now enjoying life with their two young children. "They are my absolute miracles following my treatment," he says.

"My advice for anyone who has the opportunity to take part in a trial is: 'go for it'," he says. "I feel you have to exhaust all possible options on your journey, "he says "My way of thinking is that doing trials is the only way we can find a cure. At the end of the day, if we can find a better way of treating the cancer, it's a win."

Our

Collaborations

One of TROG's strategic goals is to develop collaborative networks. We are working to establish strong, mutually beneficial partnerships with national and international academic institutions, professional organisations, healthcare facilities and industry partners. One of the key collaborations we forged in 2024 is detailed below.

New International Collaboration: NRG Main Membership

TROG has forged a groundbreaking international collaboration, after being accepted as a main member site of the US cancer clinical cooperative group, NRG Oncology Group.

TROG is the first Australian cooperative trials group to be accepted as a main member of NRG Oncology, a clinical research consortium in the National Cancer Institute (NCI)'s National Clinical Trials Network (NCTN) which is comprised of more than 1,300 worldwide research sites.

The membership means that TROG – and trial sites that become an NRG affiliated member under TROG – will now have the opportunity to participate in NRG clinical trials. In 2024, eight sites gained affiliated NRG membership under TROG.

The membership will also help streamline access to other NCI-supported trials via the Canadian Clinical Trials Group (CCTG) and other applicable groups.

NRG Oncology has a focus on the following seven disease sites:

- Adult brain tumours (primary and secondary)
- Head and neck cancer
- Breast cancer
- Localised and locally advanced lung cancer (NSCLC and SCLC)
- Gastrointestinal cancer (including colorectal and non-colorectal)
- Genitourinary cancer (emphasising nonmetastatic prostate and bladder)
- Gynaecologic cancer (including ovarian, cervix and endometrial).

The first clinical trial that TROG will participate in as part of this new collaborative effort is NRG-HN014, a Randomised Phase III trial of Neoadjuvant Immunotherapy with Response-Adapted Treatment Versus Standard-Of-Care treatment For Resectable Stage III/IV Cutaneous Squamous Cell Carcinoma.

Recruitment is planned to commence mid-2025.

Our

Publications in 2024

TROG-led Studies

TROG 99.03 FOLLICULAR LYMPHOMA

Hershenfeld SA, Tobin JWD, Shelton V, Calvente L, Lajkosz K, Liu T, Brodtkorb M, d'Amore FA, Ludvigsen M, Baetz T, LeBrun D, Johnson N, Crump M, Hong M, Kuruvilla J, Tremblay-LeMay R, MacManus M, Tsang R, Hodgson DC, Gandhi MK, Kridel R. **Single gene mutations and prognosis in limited-stage follicular lymphoma treated with radiation therapy.** *Br J Haematol.* 2024 Aug 7. doi: 10.1111/bjh.19698.

TROG 09.02 CHISEL

Byrne A, De Abreu Lourenco R, Govindaraj R, Ball D, Le H. **A cost-effectiveness analysis of stereotactic ablative radiotherapy versus conventionally fractionated radiotherapy in the management of stage 1 non-small-cell lung cancer: Results from the TROG 09.02 CHISEL study.** *J Med Imaging Radiat Oncol.* 2024 Oct;68(7):843-850. doi: 10.1111/1754-9485.13755.

TROG 12.01 HPV OROPHARYNX

Corry J, Moore A, Kenny L, Wratten C, Fua T, Lin C, Porceddu S, Liu C, Ruemelin M, Sharkey A, McDowell L, Wilkinson D, Tiong A, Rischin D. **Radiotherapy quality assurance in the TROG 12.01 randomised trial and its impact on loco-regional failure.** *Front Oncol.* 2024 Feb 5;13:1333098. doi: 10.3389/fonc.2023.1333098.

TROG 12.02 PET-LAB

Gadbsy K, Pearl-Larsson T, Bebski V, Bone Saunders C, Wang T, Grogan M, Harvey J, Borg M, Taylor M, Babington S, Hui R, Boyle F, Ung O, Wang S-C, Kelly C, Latty D, Skyes J, Flower E, Balleine R, King M, Haul E, Graham P, Sharma R, Pathmanathan N, Lord S, Whiteside C, Grayson S, Foster S, Ahern V. **PET Scans for Locally Advanced Breast Cancer and Diagnostic MRI to Determine the Extent of Operation and Radiotherapy (PET LABRADOR): TROG 12.02.** *Br J Can Res.* 2024; 7(1):656-63. doi: 10.31488/bjcr.190.

TROG 15.03 FASTRACK II

Siva S, Bressel M, Sidhom M, Sridharan S, Vanneste BGL, Davey R, Montgomery R, Ruben J, Foroudi F, Higgs B, Lin C, Raman A, Hardcastle N, Hofman MS, De Abreu Lourenco R, Shaw M, Mancuso P, Moon D, Wong LM, Lawrentschuk N, Wood S, Brook NR, Kron T, Martin J, Pryor D. **FASTRACK II Investigator Group. Stereotactic ablative body radiotherapy for primary kidney cancer (TROG 15.03 FASTRACK II): a non-randomised phase 2 trial.** *Lancet Oncol.* 2024 Mar;25(3):308-316. doi: 10.1016/S1470-2045(24)00020-2.

TROG 16.02 Local HER-O

Phillips C, Pinkham MB, Moore A, Sia J, Jeffree RL, Khasraw M, Kam A, Bressel M, Haworth A. **Local hero: A phase II study of local therapy only (stereotactic radiosurgery and/or surgery) for treatment of up to five brain metastases from HER2+ breast cancer.** *Breast.* 2024;74:103675. doi: 10.1016/j.breast.2024.103675. Epub 2024 Feb 5.

TROG 17.02 OUTRUN

Robledo KP, Lefresne S, Soon YY, Sahgal A, Pinkham MB, Nichol A, Soo RA, Parmar A, Hegi-Johnson F, Doherty M, Solomon BJ, Shultz DB, Tham IW, Sacher AG, Tey J, Leong CN, Koh WY, Huang Y, Ang YLE, Low J, Yong C, Lim MC, Tan AP, Lee CK, Ho C. **Protocol for a systematic review with prospective individual patient data meta-analysis in EGFR-mutant NSCLC with brain metastases to assess the effect of SRS+osimertinib compared to osimertinib alone: the STARLET Collaboration.** *BMJ Open.* 2024 Jul 5;14(7):e078335. doi: 10.1136/bmjopen-2023-078335.

TROG 18.06 FIG

Albert NL, Galldiks N, Ellingson BM, van den Bent MJ, Chang SM, Cicone F, de Groot J, Koh ES, Law I, Le Rhun E, Mair MJ, Minniti G, Rudà R, Scott AM, Short SC, Smits M, Suchorska B, Tolboom N, Traub-Weidinger T, Tonn JC, Verger A, Weller M, Wen PY, Preusser M. **PET-based response assessment criteria for diffuse gliomas (PET RANO 1.0): a report of the RANO group.** *Lancet Oncol.* 2024 Jan;25(1):e29-e41. doi: 10.1016/S1470-2045(23)00525-9.

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Our

Publications in 2024

TROG 18.06 FIG

Barry N, Koh ES, Ebert MA, Moore A, Francis RJ, Rowshanfarzad P, Hassan GM, Ng SP, Back M, Chua B, Pinkham MB, Pullar A, Phillips C, Sia J, Gorayski P, Le H, Gill S, Croker J, Bucknell N, Bettington C, Syed F, Jung K, Chang J, Bece A, Clark C, Wada M, Cook O, Whitehead A, Rossi A, Grose A, Scott AM. **[18]F-fluoroethyl-ltyrosine positron emission tomography for radiotherapy target delineation: Results from a Radiation Oncology credentialing program.** *Phys Imaging Radiat Oncol.* 2024 Mar 13;30:100568. doi: 10.1016/j.phro.2024.100568

TROG 21.07 SOCRATES HCC

Wigg, A., Tibballs, J., Woodman, R. Stuart K, Le H, Roberts T, Olynyk JK, Strasser SI, Wallace M, Martin J, Haworth A, Hardcastle N, Fong Loo K, Tang C , Yoo Young L, Chu J, De Abreu Lourenco R, Koukourou A, De Boo D, McLean K, Buck J, Sawhney R, Nicoll A, Dev A, Wood M, Braund A, Weltman M, Khor R, Levy M ,Wang T, Potter M, Haridy J, Raj A, Duncan O, Zekry A, Collier N, Obeirne J, Holliday C, Trada Y, Tronidjaja J, George J, Pryor D. **A randomised controlled trial of Standard Of Care versus RadioAblaTion in Early Stage HepatoCellular Carcinoma (SOCRATES HCC).** *BMC Cancer.* 2024;24:813. doi:10.1186/s12885-024-12504-22.

Collaborative Studies and Projects

TROG 08.08 TOPGEAR

Leong T, Smithers BM, Michael M, Haustermans K, Wong R, Gebski V, O'Connell RL, Zalcberg J, Boussioutas A, Findlay M, Willis D, Moore A, Murray WK, Lordick F, O'Callaghan C, Swallow C, Darling G, Miller D, Strickland A, Liberman M, Mineur L, Simes J. **Australasian Gastro-Intestinal Trials Group, National Health and Medical Research Council Clinical Trials Centre, Trans-Tasman Radiation Oncology Group, European Organisation for Research and Treatment of Cancer, and Canadian Cancer Trials Group**. **Preoperative Chemoradiotherapy for Resectable Gastric Cancer**. *N Engl J Med*. 2024; 391;19.
doi: 10.1056/NEJMoa2405195.

ICR-CTSU/2014/10049/TROG 14.02 RAIDER

Webster A, Francis M, Gribble H, Griffin C, Hafeez S, Hansen VN, Lewis R, McNair H, Miles E, Hall E, Huddart R. **RAIDER Trial Management Group. Impact of on-trial IGRT quality assurance in an international adaptive radiotherapy trial for participants with bladder cancer**. *Radiother Oncol.* 2024 Oct;199:110460.
doi: 10.1016/j.radonc.2024.110460.

TROG 21.12 ASPIRE

Skelton K, Gorayski P, Penfold S, Murray A, Hamilton D, Yeo A, Jessop S, Hwang E, Dass J, Le H. **Australian Particle Therapy Clinical Quality Registry (ASPIRE) protocol (TROG 21.12): a multicentre prospective study on patients with rare tumours, treated with radiation therapy.** *BMJ Open.* 2024 Nov 27;14(11):e083044. doi: 10.1136/bmjopen-2023-083044.

Secondary data analysis studies

TROG 08.08 TOPGEAR & TROG 08.03 RAVES

Chlap P, Min H, Dowling J, Field M, Cloak K, Leong T, Lee M, Chu J, Tan J, Tran P, Kron T, Sidhom M, Wiltshire K, Keats S, Kneebone A, Haworth A, Ebert MA, Vinod SK, Holloway L. **Uncertainty estimation using a 3D probabilistic U-Net for segmentation with small radiotherapy clinical trial datasets.** *Comput Med Imaging Graph.* 2024 Sep;116:102403. doi: 10.1016/j.compmedimag.2024.102403.

Our 36th
Annual Scientific Meeting

Our 36th Annual Scientific Meeting (ASM) was a vital platform for advancing cutting-edge research in radiation therapy and enhancing collaboration among researchers from Australia, New Zealand and beyond.

More than 250 delegates joined together for the 36th ASM, held in TROG's hometown of Newcastle, NSW from 12-15 March 2024.

Co-convened by Dr Jane Ludbrook and Prof Joerg Lehmann, the meeting offered a wide range of insightful presentations and workshops. International speakers shared their expertise on the latest advances in radiation therapy: Prof Stephane Supiot, from France, presented on vascular remodelling during radiotherapy at low and ultra-high dose rates (FLASH) while Prof Stephen Kry, from the United States, presented at plenary sessions on both head & neck cancer and radiobiology.

> *Our ASM is always a wonderful opportunity to share learnings and to join together to look to the future of how we can continue to harness cutting-edge technology to fight cancer."*
> **– Ms Susan Goode, TROG CEO**

More than 50 speakers participated in the event, adding to the collective understanding of treatment and research, and fostering meaningful dialogue. Speakers included: Dr Gerry Adams, A/Prof Haryana Dhillon, A/Prof Harriet Gee, Dr Fiona Hegi-Johnson, Dr Deme Karikios, Dr Michael Jameson, Dr Susanne Rogers, and A/Prof Craig Underhill.

NEW TROG PRESIDENT WELCOMED

Associate Professor Purnima (Puma) Sundaresan (pictured above) was welcomed as new TROG President at the 2024 ASM. Puma is a consultant Radiation Oncologist at Westmead Hospital in Sydney, Associate Professor at the University of Sydney and a graduate of the Australian Institute of Company Directors. During her time as a TROG Director she has demonstrated exemplary leadership qualities, having served on numerous committees within TROG and externally.

A/Prof Sundaresan took the baton from former President Prof Trevor Leong (pictured bottom right), whose contribution over the previous two years was invaluable. We extend our heartfelt thanks to Prof Leong for his generous commitment to furthering the work of TROG. He remains on the Board of Directors for a transition period.

POPULAR WORKSHOPS

With more than 60 attendees, the **Clinical Research Education Workshop (CREW)** provided an opportunity for our members to increase their knowledge base, and helped equip them with the tools to conduct high-quality research and excellent data management.

The Technical Research Workshop (TRW), which featured a hands-on workshop, attracted a multidisciplinary audience of 65 attendees, including radiation oncologists, researchers, radiation therapists and medical physicists.

The **RANZCR SMART Workshop** attracted 37 participants, enabling the exchange of ideas and practical learning experiences.

Our

Research Excellence Awards

The 'Black Tie on the Beach' themed Gala Dinner at the ASM was a celebration of the achievements of the TROG team and membership, including presentation of the 2024 TROG Research Excellence Awards. We congratulate the winners:

Trial Excellence award: Prof Shankar Siva and the groundbreaking FASTRACK II trial team. Initiated in 2016, FASTRACK II was designed to offer an alternative for patients with kidney cancer who were not suited to surgery. This study was implemented across eight centres in Australia and the Netherlands to investigate the effectiveness of Stereotactic Ablative Body Radiotherapy (SABR) and assess its associated side effects. The study's success positions SABR as an excellent option, especially for patients with larger inoperable kidney tumours, where alternative treatments are limited.

Emerging Researcher award: Dr Lachlan McDowell, who has been a member of the TROG Head, Neck and Skin Working Party since 2017 and was elected to the role of Deputy Chair in 2020. He has been a member of the TROG Scientific Committee since 2022 and is the TROG representative on the Head and Neck Cancer International Group (NHCIG), serving as Co-Chair Young Investigator Subcommittee since 2020 and Deputy Chair of the Guidelines and Protocols Subcommittee.

Outstanding Contribution to Radiation Therapy Quality Assurance Award: A/Prof Nick Hardcastle (pictured right), Physical Sciences Research Lead at Peter MacCallum Cancer Centre and current Chair of the TROG New Techniques and Technologies Committee (NTTC). Nick has served as Trial Physicist on multiple clinical trials including but not limited to: TROG 21.07 SOCRATES HCC, TROG 19.06 DECREASE, TROG 15.03/ANZUP 16.001 FASTRACK II, AGITG/TROG 21.03 RESOLUTE and ALTG14/002/CT0135/TROG 16.01 NIVORAD, making significant contributions to the development and conduct of the radiation therapy quality assurance program. He has both contributed to and led multiple TROG working groups, allowing for the incorporation of new and complex technology into TROG.

ASM Committees, Exhibitors & Sponsors

THE ASM COMMITTEES

Many thanks to the ASM Organising and Program Committees for their tireless efforts in curating a program that encapsulated the latest radiation therapy developments in cancer research and clinical practice.

2024 EXHIBITORS AND SPONSORS

We were delighted to host a range of sponsors and exhibitors at the ASM, enabling them to engage with key decision makers. We extend our gratitude to all the ASM sponsors, particularly major sponsors Varian, Elekta and Icon, which make the ASM possible.

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Our

Consumer Engagement

We recognise the critical role consumers play in shaping and enhancing cancer research. Consumer involvement ensures our research remains patient-centred, relevant and impactful. In 2024, TROG strengthened its commitment to consumer engagement by expanding our initiatives, enhancing collaboration with consumer advocates, and further integrating consumer perspectives into trial development and governance. We continue to work towards the key objective of diversifying our research and ehancing access, incorporating patient-informed research and patient-centric study design, as outlined in our Strategic Plan 2024-2026.

Key Achievements in 2024

1. Expansion of Consumer Engagement in TROG Committees

- Increased consumer representation across TROG committees and working groups.
- Facilitated opportunities for consumers to contribute to trial design, ethics reviews, and clinical trial participant information materials.
- Valuable contributions from our TROG Scientific Committee (TSC) Consumer Representative Mr John Stubbs helped to ensure consumer perspectives were embedded in trial discussions and decision-making.

2. Strengthened Consumer Input in Clinical Trial Development:

- Engaged consumers in protocol development, to ensure trials reflect patient priorities and experiences.
- Integrated consumer feedback mechanisms to refine trial recruitment strategies.

3. Enhanced Communication and Outreach:

- Launched targeted consumer engagement campaigns via TROG's social media platforms to raise awareness and encourage participation in clinical trials.
- Strengthened partnerships with cancer support organisations to increase outreach and representation.

4. Consumer Involvement in the 2024 Annual Scientific Meeting (ASM):

- A number of consumers actively participated in sessions at the 36th ASM held in Newcastle, NSW, providing valuable insights that enriched discussions on design and conduct of cancer clinical trials.
- A dedicated panel discussion in the Clinical Research Education Workshop provided a forum for valuable dialogue between researchers and consumers about ways to boost meaningful consumer involvement in clinical research.

5. Consumer Leadership and Governance:

- Mr Murray McLachlan continued to serve as the Independent Consumer Director on the TROG Board, providing strategic guidance and advocating for greater consumer representation in decision-making.

Challenges and Opportunities

While significant progress has been made, we acknowledge there are ongoing challenges in attracting and retaining a diverse range of consumer partners who we can work with on a range of activities. To address these, we aim to:

- Expand consumer networks to ensure representation from diverse populations and cancer experiences.
- Strengthen training programs to support consumer-researcher partnerships.
- Share educational resources on consumer engagement in research with the TROG membership.
- Provide more opportunities for consumers to participate in and attend TROG ASM.

Looking Ahead

In 2025, TROG will continue to build on these foundations, ensuring consumer insights remain at the forefront of our research strategy. By fostering a culture of meaningful consumer engagement, we reinforce our commitment to delivering research that directly benefits those impacted by cancer.

Our Fundraising & Events

Trek4TROG team *rises* to Blue Mountains challenge

Our second annual Trek4TROG fundraising event saw an adventurous team of trekkers take on a spectacular one-day hike through the Blue Mountains, west of Sydney, in October 2024.

We want to say a big thank you to the team of nine trekkers, including TROG staff and members, who raised more than $9,000 towards our vital work in cancer research, with the support of many generous donors.

Under blue skies, the trekkers navigated a 16 km route from Katoomba Falls to Wentworth Falls, along the Grand Clifftop Walk, enjoying breathtaking views of the Jamison Valley.

The event was run in collaboration with Huma Charity Challenge, and the team was led by an experienced guide who shared insights about the environment and history of the area, including the Aboriginal dream-time legend of the iconic Three Sisters landmark.

TROG Cancer Research CEO Ms Susan Goode, who took part in the trek, expressed her gratitude to everyone involved, including all those who supported the event from the sidelines.

“A huge thank you to those who put their feet – and knees – on the line to take part in our second annual trek event,” she said.

“The weather was perfect, the scenery was beautiful and it was wonderful to spend the day with such inspiring people.”

Our Fundraising & Events

Myall Coast Veterans tee off to help fight cancer

The Myall Coast Veterans golf club swung into action with their annual TROG Cancer Research fundraising day on 7 November 2024, raising an impressive $5000 to support our work.

Continuing a decade-long fundraiser tradition, 85 players from the Veterans club teed off at Hawks Nest Golf Club for the 18-hole tournament. The golf was followed by an auction of vouchers and goods donated by many generous local businesses.

Myall Coast Veterans President Colin Clinch said the club reserved the day on their calendar each year to support TROG's work.

The fundraising total included money raised at an auction of goods donated by local businesses, contributions from the Hawks Nest Lady Veterans and Hawks Nest Veterans, as well as incredibly generous donation of $2000 from one individual.

Hays Charity Golf Day Success

We were thrilled to be nominated as the charity partner for Hays Newcastle's Charity Golf Day held on 5 September 2024 to raise both awareness and funds for TROG Cancer Research.

Hays staff and clients teed off at Shortland Waters Golf Club for a wonderful afternoon of sunshine, connection and golfing, which raised more than $3000 in support of TROG's work.

Thank you to Jess Schutt, Hays Business Manager, Facilities Management, Property and Soft Services, and all the Hays team who devoted their time and skills to host a fantastic event.

Glow Bowls Fundraiser Fun

TROG Cancer Research staff, family, friends and supports took to the bowling greens for an inaugural Glow Bowls fundraiser event in August 2024.

Generously hosted by Adamstown Bowling Club, the fun evening of lawn bowls raised both funds and community awareness about TROG's work, and is set to become a regular event on our social calendar.

Our

Study Portfolio

TROG Portfolio – Status by trial category

		CATEGORY				
		A	B	C	D	TOTAL
TRIAL STATUS	NEW PROPOSAL	0	0	0	0	0
	DEVELOPMENT	10	5	6	0	21
	START UP	0	0	1	0	1
	OPEN	11	4	9	0	24
	CLOSED	20	6	7	0	33
	COMPLETED	39	8	2	0	49
	DATA REQUESTS	0	0	0	28	28
	TOTAL	80	23	25	28	156

CATEGORY KEY

A: TROG initiated and sponsored trial
B: International trial with TROG as Australian Sponsor
C: Not led by TROG but TROG collaborates with the Sponsor
D: Consists of registries and special projects

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Our

Study Portfolio

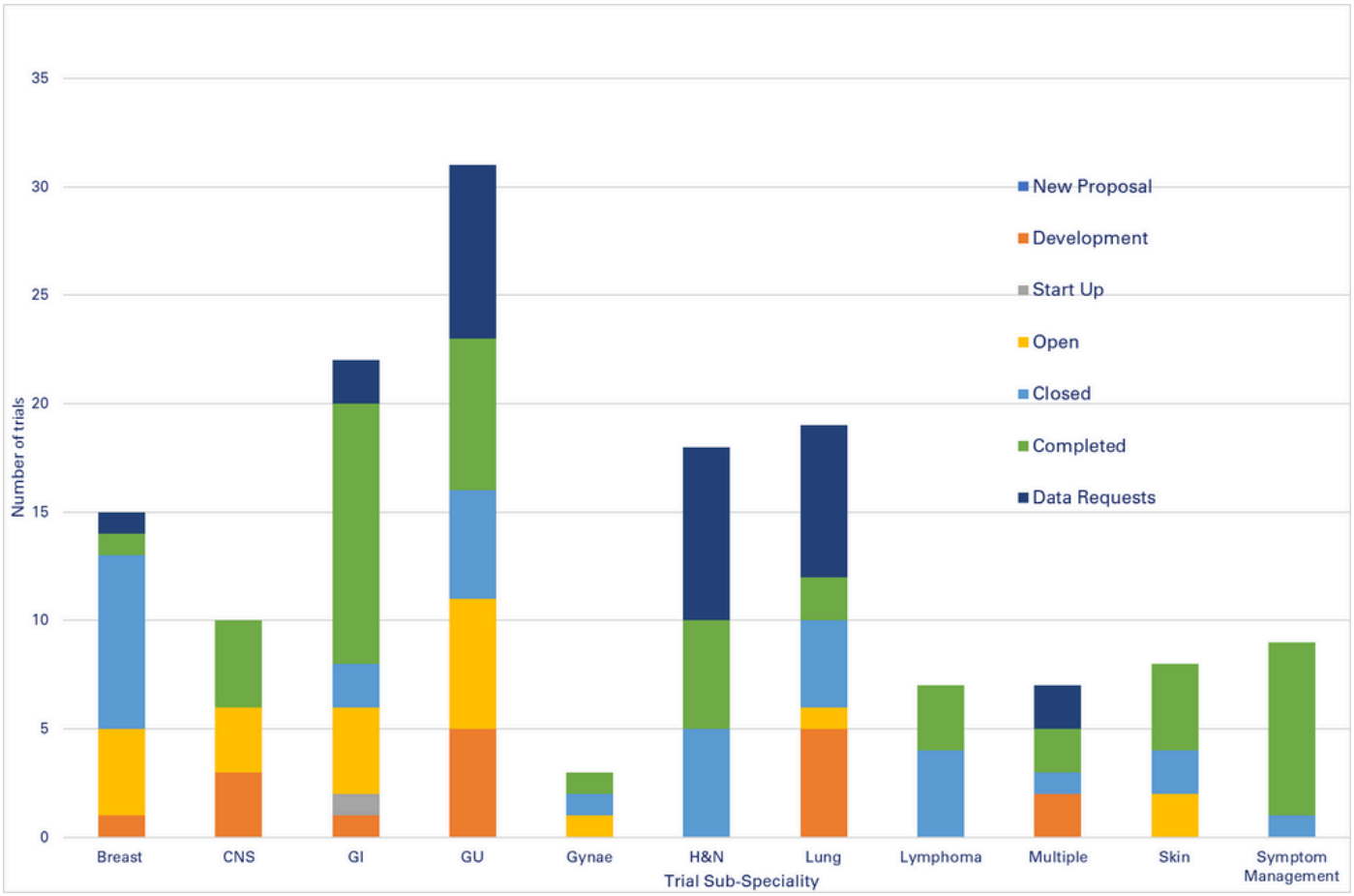
TROG Trials – Sub-specialty by Trial stage

	New Proposal	Develop-ment	Start Up	Open	Closed	Completed	Data Requests	TOTAL
BREAST	0	1	0	4	8	1	1	15
CNS	0	3	0	3	0	4	0	10
GI	0	1	1	4	2	12	2	22
GU	0	5	0	6	5	7	8	31
GYNAE	0	0	0	1	1	1	0	3
H & N	0	3	0	0	5	5	8	21
LUNG	0	5	0	1	4	2	7	19
LYMPHOMA	0	0	0	0	4	3	0	7
MULTIPLE	0	3	0	3	1	2	2	11
SKIN	0	0	0	2	2	4	0	8
SYMPTOM MANAGE-MENT	0	0	0	0	1	8	0	9
TOTAL	0	21	1	24	33	49	28	156

Our

Study Portfolio

TROG Portfolio – Sub-specialty by trial stage



Our

Study Portfolio: Recruiting trials

SAHMRI/TROG 21.12 ASPIRE

A/Prof Hien Le

Category A Multiple Cancers

Title: Australian Particle Therapy Clinical Quality Registry (ASPIRE)

Overview

ASPIRE is a prospective, observational, longitudinal study of paediatric, adolescent, young adult and rare adult tumour patients from a select group of tumour streams treated with radiation therapy. The aim of the ASPIRE registry is to enrol >5000 patients who have been treated with radiation therapy in order to better understand and compare the short and long-term benefits of the different types of radiation therapy. The information collected will help researchers learn more about radiation treatment.

Sponsor: South Australian Health & Medical Research Institute (SAHMRI) (Australian Bragg Centre for Proton Therapy and Research (ABCPTR) parent company)
Supporters: TROG Cancer Research
Funded by: Hospital Research Foundation Group grant
Status at 31/12/2024: Opened 27 March 2022 | Sites activated: 4 | Accrual: 244
Registry: ANZCTR, ACTRN12622000026729
Website: https://sahmri.org.au/research/programs/registry-centre/groups/australian-particle-therapy-clinical-quality-registry-aspire
Study email: ASPIRE@sahmri.com

TROG 21.07 SOCRATES HCC

A/Prof David Pryor & Prof Alan Wigg

Category A Gastrointestinal

Title: A randomised controlled trial of Standard Of Care versus RadioAblaTion in Early Stage HCC

Overview

Hepatocellular carcinoma (HCC) has one of the fastest rising incidence and mortality rate of any cancer, however, treatment options remain limited and 5-year survival is poor. Unlike most other cancers, the majority of people presenting with early-stage HCC are unable to receive curative intent local therapies or may progress following initial treatment with thermal ablation or transarterial therapies. Emerging data supports a role for stereotactic ablative body radiotherapy (SABR) as a well-tolerated, non-invasive treatment with high rates of local control with some centres now considering it a new standard of care. However, randomised evidence comparing the various treatment options in the first line setting is lacking and the majority of guidelines do not currently endorse its use leading to highly variable utilisation around Australia and internationally. SOCRATES HCC seeks to address this evidence gap by comparing SABR to other current first line treatments (thermal ablation, transarterial therapies) for non-surgical candidates with solitary (≤8cm) early-stage HCC.
SOCRATES HCC aims to set a new benchmark in the management of HCC, improving access to effective curative intent therapies and enhancing inter-disciplinary collaboration.

Sponsor: TROG Cancer Research
Collaborators: Australasian Gastro-Intestinal Trials Group (AGITG)
Supporters: Abdominal Radiology Group of Australia and New Zealand (ARGANZ) & Gastrointestinal Society of Australia (GESA)
Funded by: Medical Research Future Fund (RCRDUN, 2021); Tour De Cure, 2024
Status at 31/12/2024: Opened 10 October 2022 | Sites activated: 19 of 20 | Accrual; 73 of 218
Registry: ANZCTR, ACTRN12621001444875

Study email: SOCRATES_HCC@trog.com.au

Our Study Portfolio: Recruiting trials

TROG 19.06 DECREASE

Prof Shankar Siva & A/Prof Arun Azad
Category A Genitourinary
Title: DarolutamidE + Consolidation RadiothErapy in Advanced proStatE cancer detected by PSMA

Overview
In the era of PET imaging, many sites of disease that are not visible on conventional imaging (such as CT scans) will be found on Prostate Specific Membrane Antigen (PSMA)-PET scans. These macroscopic sites of disease are the main cause of cancer progression after completing androgen deprivation therapy for prostate cancer. Darolutamide is an indicated treatment for men with Non-Metastatic Castrate Resistant Prostate Cancer (M0 CRPC) with an increasing PSA level. Radiation therapy to sites of disease that have not completely resolved after a few months of drug therapy has been shown to improve patient outcomes, including longevity, in other cancers like lung cancer. With the evolution of PSMA PET scanning, in prostate cancer, there is a unique opportunity to replicate these findings in low-volume prostate cancer.

In 87 men with castration-resistant prostate cancer with no evidence of metastases on conventional imaging but detectable disease on PSMA-PET/CT scan, the DECREASE trial will compare the treatment outcomes of men taking Darolutamide with or without treating the small metastasis seen on the PSMA PET scan with radiation therapy. Led by Prof Shankar Siva and A/Prof Arun Azad, DECREASE aims to evaluate if the combination (Darolutamide + RT) is better than Darolutamide alone at controlling PSA levels and further spread of prostate cancer. The DECREASE trial, if successful, will meaningfully extend disease control in men receiving Darolutamide.

Sponsor: TROG Cancer Research
Collaborators: Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP)
Funded by: Bayer (Investigator-Initiated Research grant).
Status at 31/12/2024: Opened: 02 June 2021 | Sites activated:17 of 17 | Accrual: 64 of 70
Registry: ClinicalTrials.gov, NCT04319783

Study email: DECREASE@trog.com.au

TROG 18.06 FIG

A/Prof Eng-Siew Koh & Prof Andrew Scott
Category A Central Nervous System
Title: Prospective, multicentre trial evaluating FET-PET In Glioblastoma

Overview
The FIG trial is investigating how the addition of FET-PET imaging to standard MRI imaging affects radiation target volume delineation and treatment planning for Glioblastoma, as well as determining the accuracy and management impact of FET-PET in distinguishing pseudoprogression from true tumour progression and / or tumour recurrence.

Sponsor: TROG Cancer Research
Collaborators: The Australasian Radiopharmaceutical Trials Network (ARTnet) and The Cooperative Trials Group for Neuro-Oncology (COGNO)
Funded by: Medical Research Future Fund, Cure Brain Cancer Foundation and the Australian Brain Cancer Mission / Cancer Australia
Status at 31/12/2024: Opened 14 December 2021 | Sites activated: 11 of 11 | Accrual: 225
Registry: ANZCTR, ACTRN12619001735145

Study email: FIG@trog.com.au

Our

Study Portfolio: Recruiting trials

TROG 18.01 NINJA

Prof Jarad Martin & Dr Mark Sidhom
Category A Genitourinary
Title: Novel Integration of New prostate radiation schedules with adJuvant Androgen deprivation

Overview
In men with intermediate and high-risk prostate cancer, the NINJA trial is comparing two different radiation therapy treatment schedules called stereotactic body radiotherapy (SBRT). The aim is to develop better methods of treatment for prostate cancer using this type of treatment, and further understand what causes some of the side effects of treatments. It is hoped this research will potentially improve the accuracy and quality of radiation therapy treatment in prostate cancer.

Sponsor: TROG Cancer Research
Collaborators: Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP).
Funded by: Investigator Initiated grant from Mundipharma, Cancer Australia PdCCRS Grant, investigator funds and in-kind support from recruiting sites.
Status at 31/12/2024: Opened 16 January 2019 | Sites activated: 20 of 21 | Accrual: 384 of 472
Registry: ANZCTR, ACTRN12618001806257

Study email: NinjaTrial@calvarymater.org.au

Our Study Portfolio: Trials with Participants in Follow-Up

EORTC 22033-26033/TROG 06.01

Category B Central Nervous System
Study title: Primary chemotherapy with temozolomide vs. radiotherapy in patients with low grade gliomas after stratification for genetic 1p loss: a phase III study
Lead Researcher: Dr Claire Phillips
Primary Sponsor or Lead Organisation: EORTC (TROG)
Study email: TRIALS@trog.com.au

TROG 07.01/BIG 3-07 DCIS

Category A Breast
Study title: A randomised phase III study of radiation doses and fractionation schedules in non-low risk ductal carcinoma in-situ (DCIS) of the breast
Lead Researcher: Prof Boon Chua
Primary Sponsor or Lead Organisation: TROG
Study email: DCIS@trog.com.au

TROG 08.06 STARS

Category A Breast
Study title: A Randomised comparison of anastrozole commenced before and continuing during adjuvant radiotherapy for breast cancer versus anastrozole and subsequent anti-oestrogen therapy delayed until after radiotherapy
Lead Researcher: Prof Peter Graham
Primary Sponsor or Lead Organisation: TROG
Study email: SESLHD-StarsTrial@health.nsw.gov.au

TROG 12.02 PET LABRADOR

Category A Breast
Study title: PET scans for locally advanced breast cancer and diagnostic MRI to determine the extent of operation and radiotherapy
Lead Researcher: A/Prof Verity Ahern
Primary Sponsor or Lead Organisation: TROG Cancer Research
Study email: Tracy.Pearl-Larson@health.nsw.gov.au

ICR-CTSU/2014/10049/TROG 14.02 RAIDER

Category B Genitourinary
Study title: A randomised phase II trial of adaptive image guided standard or dose escalated radiotherapy in the treatment of transitional cell carcinoma of the bladder
Lead Researcher: Prof Farshad Foroudi
Primary Sponsor or Lead Organisation: ICR (TROG)
Study email: RAIDER@trog.com.au

EORTC 1308/TROG 15.02 ROAM

Category B Central Nervous System
Study title: Radiation versus Observation following surgical resection of Atypical Meningioma: a randomised controlled trial (The ROAM trial)
Lead Researcher: Dr Neda Haghighi
Primary Sponsor or Lead Organisation: EORTC (TROG)
Study email: ROAM@trog.com.au

Our

Study Portfolio: Trials with Participants in Follow-Up

TROG 15.03/ANZUP 16.001 FASTRACK II

Category A Genitourinary
Study title: Focal Ablative STereotactic RAdiosurgery for Cancers of the Kidney - a Phase II Clinical Trial
Lead Researcher: Prof Shankar Siva
Primary Sponsor or Lead Organisation: TROG Cancer Research
Study email: FASTRACKII@trog.com.au

ICR-CTSU/2015/10052/TROG 16.03 CORE

Category B Multiple
Study title: A randomised trial of Conventional care versus Radioablation (stereotactic body radiotherapy) for Extracranial oligometastases
Lead Researchers: Prof Farshad Foroudi & A/Prof David Pryor
Primary Sponsor or Lead Organisation: ICR (TROG)
Study email: CORE@trog.com.au

TROG 17.02 OUTRUN

Category A Lung
Study title: Randomised phase II trial of Osimertinib with or without stereotactic radiosurgery for EGFR mutated NSCLC with brain metastases
Lead Researchers: Dr Yoo Yang Soon, Prof Chee Lee & Dr Fiona Hegi-Johnson
Primary Sponsor or Lead Organisation: TROG Cancer Research
Study email: OUTRUN@trog.com.au

USYD/TROG 17.03 LARK

Category A Multiple
Study title: Liver Ablative Radiotherapy utilising Kilovoltage intrafraction monitoring (KIM)
Lead Researchers: Dr Yoo Young (Dominique) Lee & A/Prof Tim Wang
Primary Sponsor or Lead Organisation: University of Sydney
Study email: shona.silvester@sydney.edu.au

TROG 20.01 CHEST RT

Category A Lung
Study title: Chemotherapy and Immunotherapy in extensive stage small cell lung cancer with thoracic radiotherapy (CHEST RT)
Lead Researchers: Dr Eric Hau & Dr Sagun Parakh
Primary Sponsor or Lead Organisation: TROG Cancer Research
Study email: CHESTRT@trog.com.au

Our Study Portfolio: Other Trials

Trials led by other organisations with TROG involvement or support

PRIMARY SPONSOR AND/OR LEAD ORGANISATION	TRIAL NUMBER (TROG TRACKING NUMBER)	STUDY ACRONYM	STUDY TITLE	SUB-SPECIALITY	STATUS
Breast Cancer Trials (BCT)	ANZ 1601/BIG 16-02 (16.04)	EXPERT	A randomised phase III trial of adjuvant radiotherapy versus observation following breast conserving surgery and endocrine therapy in patients with molecularly characterised low-risk luminal A early breast cancer	Breast	Recruiting
Australasian Gastro-Intestinal Trials Group (AGITG)	(21.03)	RESOLUTE	Randomised Phase II Trial to Evaluate the Strategy of Integrating Local Ablative Therapy with First-Line Systemic Treatment for Unresectable Oligometastatic Colorectal Cancer	Gastro-intestinal	Recruiting
	CTC 0245/AGITG AG0118PS (18.04)	MASTERPLAN	Randomised phase II study of Mfolfirinox And STEreotactic Radiotherapy for Pancreatic cancer with high risk and Locally AdvaNced disease	Gastro-intestinal	Recruiting
	AGITG AG0407GR (08.08)	TOPGEAR	A randomised phase II/III trial of preoperative chemoradiotherapy versus preoperative chemo therapy for resectable gastric cancer	Gastro-intestinal	In follow-up
Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP)	ANZUP 1801 (21.02)	DASL-HiCaP	Darolutamide Augments Standard Therapy for Localised Very High-Risk Cancer of the Prostate (ANZUP 1801). A randomised phase 3 double-blind, placebo-controlled trial of adding Darolutamide to androgen deprivation therapy and definitive or salvage radiation in very high risk, clinically localised prostate cancer.	Genitourinary	In follow-up
	ANZUP 1303 (14.01)	ENZARAD	Randomised phase 3 trial of radiation plus androgen deprivation therapy with or without enzalutamide for high risk, clinically localised, prostate cancer	Genitourinary	In follow-up

Our

Study Portfolio: Other Trials

Trials led by other organisations with TROG involvement or support

PRIMARY SPONSOR AND/OR LEAD ORGANISATION	TRIAL NUMBER (TROG TRACKING NUMBER)	STUDY ACRONYM	STUDY TITLE	SUB-SPECIALITY	STATUS
Australia New Zealand Gynaecological Oncology Group (ANZGOG)	ANZGOG 1910/2020 (21.04)	ADELE	ADjuvant tislelizumab plus chemotherapy after post-operative pelvic chemoradiation in high risk EndometriaL cancer: a randomised phase 2 trial	Gynaeco-logical	Recruiting
Melanoma and Skin Cancer Trials (MASC)	MASC 03.18 (21.01)	I-MAT	Immunotherapy Merkel Adjuvant Trial	Skin	Recruiting
Regeneron Pharmaceuticals	R2810-ONC-1788 (17.11)	CPOST	A randomised, placebo-controlled, double-blind study of adjuvant Cemiplimab versus placebo after surgery and radiation therapy in patients with high risk cutaneous squamous cell carcinoma	Skin	In follow-up

Quality Assurance Projects

The quality of radiation therapy delivery has been shown to significantly impact clinical outcomes including patient survival. TROG has a strong and longstanding commitment to improving radiation therapy standards by supporting research studies and initiatives that serve as valuable tools for quality assurance in clinical trials.

INVESTIGATOR/S	PROJECT ACRONYM	PROJECT TITLE	DESCRIPTION
Lead by: Joerg Lehmann, with Catherine Clark, Peter Greer and Mohammad Hussein	SEAFARER	Sensitivity assessment system to improve quality in Radiation Oncology treatment	The SEAFARER project enables clinical radiation therapy departments to assess the performance of their Patient Specific Quality Assurance (PSQA) process. PSQA, alongside other quality assurance measures, plays an important role in delivering safe radiation therapy. PSQA tends to be resource intensive, and it has been shown to not always identify problems with treatment plans (Kry et al 2014). Through simulation of realistic and clinically relevant treatment delivery errors, the SEAFARER project allows departments to test the sensitivity of their PSQA process. Following a successful international pilot for a stereotactic spine case (Lehmann et al 2022) the project is now being upgraded and expanded to other treatment sites. SEAFARER was awarded funding through Cancer Australia via the priority-driven Collaborative Cancer Research Scheme (2022). TROG is proud to be a collaborator on this important work.
Principal Investigator: Peter Greer	VESPA	Virtual EPID Standard Phantom Audit	This TROG-supported project provides valuable dosimetric data and continues to help facilitate TROG's credentialing program. VESPA is a novel remote method for external dosimetric Treatment Planning System (TPS)-planned auditing of intensity modulated radiation therapy (IMRT) and volumetric modulated arc therapy (VMAT) using an electronic portal imaging device (EPID). TROG greatly appreciates the continued efforts and support of Prof. Peter Greer in the provision of this valuable tool.

Our

Sponsors 2024

We are grateful to the following organisations for their support and sponsorship:

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Free Affiliate membership is also available to anyone qualified or training in a radiation therapy-related discipline.

For more details, visit the TROG website Membership section.

Our

Committee Members

TROG would like to thank the members of all our Committees, Working Parties and Special Interest Groups for their enormous efforts during 2024, particularly as the majority of this work is performed on a voluntary basis.

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- Paul Keall (Stepped down March 2024)

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Our Year in Pictures

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