Hi all

I hope all is well with you all. There’s a great buzz about the campus! Welcome back to returning students and congratulations to all our new undergraduate and postgraduate students who have gained a place in one of our programs. It is an incredibly busy time of year for staff, making their final preparations for teaching, and for some this coincides with the juggle of grant-writing deadlines.

Enrolments

This week I have had the pleasure of welcoming over 800 undergraduate students. Enrolment for our programs is exceptional this year, and is testament to the success and reputation of the School’s suite of undergraduate programs in Human Movement, Physiotherapy, Occupational Therapy, Podiatry, Nuclear Medicine, Radiation Therapy, Medical Imaging, Health Science and Clinical Exercise Physiology.

The School also maintains a healthy profile in its Divisional Honours (23), PhD (57) and post graduate programs in MSc Occupational Therapy (43), Physiotherapy (46), Musculoskeletal & Sports Physiotherapy (34) and Medical Sonography (177). The Graduate Diploma in Medical Sonography excels with a further 393 students and 15 in Breast Imaging! In total, the School has achieved a record year, for the first time exceeding 3000 students!
Welcome New Staff
Welcome to new staff: Gavin Tempest – who joins the Exercise for Health and Human Performance Group as a Research Assistant, and Sandhya Maranna (Sandy) – who joins the Medical Sonography team as Lecturer.

Farewell to Teresa Cross (Medical Sonography) who leaves us to pursue adventures outside the University. Farewell and congratulations also to Tanya Luzzi who has been appointed to a full time, continuing post as an Academic Services Officer at UniSA’s School of Commerce.

Welcome to School of Health Sciences Alumni who now receive the School Newsletter
The Newsletter is circulated to current students, School staff and internal and external stakeholders. I am delighted to welcome the Alumni who now receive the School Newsletter. Please keep us posted of your activities and we are always interested in your news.

Graduation Thursday 20th March (10.30 am)
Last year there was an amazing turn out of academic and professional staff for the March graduation ceremony. Thank you. It means a lot to students and parents to see their tutors and to share in the celebration of their success. I do hope to see as many of you there as possible for this wonderful and memorable occasion for our students.

Office space for iCAHE PhD Students and Divisional Honours students
It is School policy that PhD students should be affiliated with one of the five current research groups, and where possible the research students are physically located within the group. The physical location of research students within the research groups has worked well in Exercise for Health and Human Performance (EHHP); Health and Use of Time (HUT), Body in Mind (BIM) and the Nutritional Physiology Research Centre (NPRC). However, due to space limitations and growth of PhD numbers in iCAHE, room CB-30 will become a dedicated PhD space for iCAHE with immediate effect. Also, over the next few weeks we will provide a few ‘hot desk’ areas for the Divisional Honours students and occasional sessional staff in the Centenary Building (CB-10).

Google Scholar profile
Google Scholar is rapidly gaining ground as the search engine of choice to check out the research profile of an individual or a group of individuals. The reasons for this are that it is simple to access, free and completely accessible via the web. It is easily set up to provide alerts when your research is cited and this more often than not leads to the full text of the paper, chapter, thesis or web page citing your work. A great advantage therefore is it retrieves more than journal articles and includes preprint archives, conference proceedings, and institutional repositories. This coverage is far greater than Scopus and therefore provides a better indication of a researcher’s overall impact and profile. I encourage you to set up a Google Scholar Profile. Thank you to those who have done this over the last few weeks. It takes about 10 minutes and is really easy to set up with instructions on the library web page (Google Scholar Citations). This also includes how to add this to your staff home page. The library are aware of my request to staff in the School of Health Sciences, and have kindly offered to help. So, if anyone wants help, please email the Academic Library Services Team, and they will happily assist.

Combination of HUT, NPRC and EHHP
The research groups: Health and Use of Time (HUT), Nutritional Physiology Research Centre (NPRC), and Exercise for Health and Human Performance (EHHP) will be combined to form one large capacity research group in the next few months. The combined research from the three groups led by Professors Tim Olds (HUT), Jon Buckley (NPRC) and Associate Professors Jim Dollman and Gaynor Parfitt (EHHP), resulted in an ERA 2012 rating of 4 ‘Above World Standard’ for Human Movement and Sports Science, marking a great achievement for staff across these research groups. Our aim is to achieve the highest rating of 5 in the 2015 round! The name, infrastructure, staffing and governance of the combined group will be determined in consultation with the Sansom Institute, group leaders and the School’s Associate Head: Research, Associate Professor Susan Hillier.

ERA 2015 Excellence for Research in Australia (Public consultation on journals)
The next round of Excellence in Research for Australia (ERA) will take place in 2015. Further to public consultation regarding the ERA submission process, the ARC has launched a further consultation to on the quality of journals and conferences. Follow the link: Public Consultation on the Draft ERA 2015 Journal and Conference List. The consultation opened from February 3rd and closes on March 14th.

Launch of High Performance and Exercise Physiology Clinic
The official launch of the High Performance & Exercise Physiology (HPEP) Clinic will take place on Thursday, 17 April 2013 at 10.30am. The HPEP clinic has involved both infrastructure development as well as an innovative approach to providing services in the areas of clinical exercise physiology, rehabilitation and physical performance testing. This development looks sensational, delivers a dedicated first class research space for clinical services and sports science, and accommodates postgraduate students. The Exercise Physiology Clinic component of the development allows for up to four consult rooms that service the community inclusive of Medicare, DVA and supervised student clinical
assessments and exercise services. The clinic also plays a significant role in meeting the placement requirements of our Bachelor of Clinical Exercise Physiology and Graduate Diploma in Clinical Exercise Science students.

Reduce sitting time in the workplace
At a recent Occupational Health and Safety meeting we discussed the issue of increasing requests for adjustable height stand desks. The School policy at the current time is to review each request on the basis of a recommendation from a medical practitioner. However, we are increasingly aware of the deleterious effects of excessive sitting time at work, aptly described in a recently released publication and video from VicHealth on reducing sitting time at work http://www.vichealth.vic.gov.au/Publications/Video-Gallery/Reducing-prolonged-sitting-in-the-workplace.aspx.

Apparently, in a working lifetime the average office worker spends about 80,000 hours sitting. According to research (see Did you Know? below), every hour spent sitting is associated with various chronic health conditions and reduces lifespan by 22 minutes! Wow! That's 32,266 hours or 1,344 days or 3.7 years of life! The research encourages regular short movement breaks during the working day, to get up and walk about the office, to have face to face contact meetings instead of email, and to have standing rather than sitting meetings.

Contributions to the HLS Newsletter
Thanks again for all your contributions to the Newsletter. The link to the newsletter is sent to all students and staff in the School of Health Sciences, selected UniSA staff and external stakeholders and more recently, to the School’s alumni. It is also publicly available on the Health Sciences Website. News about research, national appointments, community engagements, awards, achievements and sporting endeavours, etc., are welcomed, so please continue to keep myself and Kylie Fogarty kylie.fogarty@unisa.edu.au informed of all your news. I hope you enjoy this Newsletter!

Keep smiling and best wishes for 2014
Roger ☺

Did you know?

‘Chipmunking’ – is the act of listening to recorded university lectures at twice the speed in a desperate attempt to cover an entire semester’s lecture material just before the exams! A popular pastime during swot vacation week. Makes the lecture sound like it is being delivered by Alvin or one of the other chipmunks!

Dr Steve Milanese

If you sit less you will live longer - sedentary behaviour (too much sitting, as distinct from too little exercise), assessed as daily sitting time, leisure-time sitting, time spent sitting in cars or television viewing time, is associated with higher mortality risk – particularly from cardiovascular disease. “Every single hour of TV viewed may shorten life by as much as 22 min” Ref: Veerman et al. (2011) Television viewing time and reduced life expectancy: a life table analysis. British Journal of Sports Medicine Source Link

Professor Tim Olds

Prediction of maximal heart rate – the guesstimate of 220-age!
Heart rate (HR) is a fundamental measure in submaximal exercise testing, as is the reliance on knowing the client’s maximal HR (HRmax). The strong linear relationship between heart rate (HR) and oxygen uptake (VO_2) allows the maximal oxygen uptake (VO_2max, the criterion measure for cardiorespiratory fitness) to be estimated and provides a sound basis for using HR as a guide to prescribing exercise intensity. For example, a range of 70-85% of an individual’s HRmax, (which corresponds to about 50-70% VO_2max), is often recommended as a stimulus to improve or maintain cardiorespiratory fitness for exercising in clinical and adult fitness settings.

Given the strong relationship between HRmax and age (HRmax declines by about 7b/min per decade) and the risks involved in measuring HRmax in a maximal effort test, HRmax is often estimated on the basis of age. The most common equation is Age-predicted maximal heart rate = 220 – age.

Given the popularity of this equation, and its widely recommended usage in most established exercise physiology and exercise prescription textbooks, it may come as some surprise to know that the equation was never based on original research. The revelations of the study by Robergs and Landwehr on the history of the 220-age equation are startling. Its derivation is based on anecdote and inference. In addition to the wide prediction error associated with HRmax prediction equations, the 220-age equation also grossly underestimates HRmax in older adults.

The range of error in predicting HRmax from age is evidenced in the study of Tanaka et al. Their meta-analysis on almost 19,000 participants from 351 studies, reported a standard deviation of 7 to 11 b/min in maximal HR across a
broad age range (18 - 81 y). Whilst more accurate equations to predict maximal HR have been established (e.g., $HR_{max} = 208 - 0.7 \times \text{age}$), it nevertheless remains the case that whatever equation is used from the wide choice of $HR_{max}$ prediction equations available\(^3\), the variation of $HR_{max}$ with age, and hence the inherent error in predicting $HR_{max}$ from equations, must be taken into account. For example, the equation $HR_{max} = 208 - 0.7 \times \text{age}$ predicts a maximal HR of 173 for a 50 year-old individual. Even with a conservative standard error of estimate - say 9 b/min - the 95% confidence interval for $HR_{max}$ for 50 year olds lies between 155-191 b/min. Given this variability in $HR_{max}$, the estimated $HR_{max}$ could place some 50 year-olds at risk of over exertion during $\%HR_{max}$-based exercise protocols. Therefore, care should be taken when prescribing exercise using an absolute HR, since this range could be near maximal in certain populations (e.g. elderly) and may increase the risk of adverse events such as cardiac complication. The HR is also prone to added variability from factors such as environment (e.g. temperature and humidity), medical conditions (e.g. hypertension) and medication (e.g. beta blockade). More detail on this can be found below:


Professor Roger Eston

Just for a smile 😊

Q. A recent divorcee walked into a bar with a crocodile and asked the bartender:  
"Do you serve lawyers here?"
"Sure."
"Good. One beer for me and a lawyer for my crocodile."

Q. What do Penguins sing on a birthday?  
A: Freeze a jolly good fellow.

Q: What do you call cattle with a sense of humour?  
A: Laughing stock.

Q. What starts with a T, ends in T and is full of T?  
A: Teapot

Q. What do you get if you cross a fish and two elephants?  
A: Swimming trunks
STAFF NEWS AND APPOINTMENTS

- The Health and Use of Time Group are proud to announce the selection of Dr Carol Maher to represent the University of South Australia in the 2014 Governor’s Leadership Foundation program, a 10 month program that aims to develop wiser leadership for the benefit of the South Australian community and is designed to broaden and enhance leadership capability within organisations and the public. Costs associated with the program are supported by the School of Health Sciences.

- The International Centre for Allied Health Evidence (iCAHE) is delighted to welcome two staff in the new capacity of Post-Doctoral Research Fellow.
  - **Dr Lucyllynn Lizarondo** will continue her work on exploring strategies for implementing research evidence into allied health practice. She will work closely with health consumer advocate groups through iCAHE’s partnerships with the Health Consumers Alliance and SA Health (Allied Health Advisory Groups) to further her research on evidence implementation. Lucy will also continue her work on the development and evaluation of a clinical performance evaluation framework across a range of allied health settings. This research project will assist in better on-the-ground evaluation of clinical services and performance that will inform service purchasing decisions and service accountability.

  - **Dr Julie Luker** is an experienced physiotherapist with particular interests and expertise in the fields of stroke management and rehabilitation of older adults and inter-disciplinary models of team based care. She completed her PhD in 2012 in which she investigated the implementation of acute stroke clinical guidelines and the factors that influence the quality of care patients receive. Julie brings to iCAHE her formal partnership arrangement with the Stroke Research Group at the Florey Institute of Neurosciences, Melbourne University where she is conducting implementation research funded by a part-time NHMRC post-doctoral Australian Research Fellowship. This work is assisted through success in securing an early research grant from Melbourne University. Julie also brings her research partnership with Hunter Medical Research Institute, University of Newcastle as a member of a national research team on a grant funded Phase 2 trial (AREISSA: Altering the Rehabilitation Environment to Improve Stroke Survivor Activity). Julie is a lead researcher in AREISSA’s qualitative sub-studies. Julie is actively involved in stroke service planning and implementation through SA Health's Statewide Stroke Clinical Network, and clinical guidelines development at national and international levels.

  Julie and Lucy have expressed a shared enthusiasm for developing their research careers at UniSA and to contributing to iCAHE’s work in implementation research and supporting allied health professionals.

- **Dr Mary Russell** has been elected Chairperson of the Forum of Chairs of the National Registration and Accreditation Scheme. The Forum is a peak group for cross professional leadership within the scheme and has a key role in liaison with government and other stakeholders. The Forum comprises the Chairs of each of the 14 health practitioner registration boards and senior executive of AHPRA.

- **Dr Maureen McEvoy** has become a member of the Australian Physiotherapy Association, Physiotherapy Business, Education and Leadership Symposium 2014 Committee. The theme for Symposium 2014 is 'New Frontiers: plan for your future'. Symposium 2014 will explore innovative strategies and solutions to help keep Australian physiotherapy ahead of the game - the program will be guided by the APA’s *InPractice 2025* report. The Symposium is being hosted at the Pullman Cairns International from Friday 31 October until Sunday 2 November, with pre-Symposium Workshops being hosted Thursday 30 October.’

- **Dr Amber Mosewich** has been nominated for the ESSA (Exercise and Sports Science Australia) University Liaison Network (ULN).

- Congratulations to **Dr Ashleigh Smith** who has been accepted to present and is a finalist for the *Aspire Academy* Early Career Researcher Award for Exercise Science & Health for the 6th Exercise & Sports Science Australia Conference. Abstract is titled "The influence of a single short period of aerobic exercise on intracortical excitability and neuroplasticity".
TEACHING AND LEARNING

ALLIED HEALTH EVIDENCE BASED THEORY AND PRACTICE (REHB 5102) - SUMMER SCHOOL

The end of January also marked the end of another successful Research Summer School for allied health students. Twenty five students enrolled from nine countries were introduced to the practice and theory of biostatistics, research methods and evidence based practice. Students are encouraged to publish their systematic review (generated from the assignments given in class) and at the moment it looks like there will be at least six reviews intended for publication. A colloquia of review findings will be held on 4 March (P3-20, 2 00 pm start), with pairs of students presenting for five minutes each on what they found from their review, and the clinical implications. We welcome anyone wanting to come and hear evidence updates on a range of clinical allied health topics. A timetable of the presentations will be available from iCAHE Director, Professor Karen Grimmer closer to the time. We wish the students well as they continue their studies.

Congratulations to the lovely Emma Jonnek on celebrating her 21st Birthday!
## 2014 Honours Students

### Division Honours

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<th>First Name</th>
<th>Last Name</th>
<th>Project</th>
<th>Supervisors</th>
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<tbody>
<tr>
<td>Timothy</td>
<td>Cocks</td>
<td>Does the possession of an emergent schema predict pain reconceptualisation following pain education</td>
<td>Lorimer Moseley, David Butler</td>
<td>BiM</td>
</tr>
<tr>
<td>Jasvir</td>
<td>Bahl</td>
<td>The development of a subjective assessment framework for individuals presenting for clinical exercise services</td>
<td>Kade Davison, Jim Dollman</td>
<td>EHHP</td>
</tr>
<tr>
<td>Stuart</td>
<td>Gollan</td>
<td>The effects of short-term heat exposure on the lactate threshold in well-conditioned athletes</td>
<td>Kevin Norton, Adam Hewitt</td>
<td>EHHP</td>
</tr>
<tr>
<td>Belinda</td>
<td>Lawford</td>
<td>Walking for fitness and management of chronic low back pain: A feasibility study</td>
<td>Katia Ferrar, Julie Walters</td>
<td>EHHP</td>
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<tr>
<td>Ruth</td>
<td>Brunt</td>
<td>Chronic condition care plans: the experiences in a newly established GP Superclinic</td>
<td>Shylie Mackintosh, Gisela Van Kessel</td>
<td>iCAHE</td>
</tr>
<tr>
<td>Brooke</td>
<td>Osborne</td>
<td>The effectiveness of simulation training to teach foetal biometry measurement skills in mid trimester pregnancy</td>
<td>Kerry Thoirs, Nayan Parange</td>
<td>iCAHE</td>
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<tr>
<td>Christopher</td>
<td>Bailey</td>
<td>Where can I buy something to eat: Mapping food purchasing options within a local government area</td>
<td>Richard McGrath, Caroline Adams</td>
<td>N/A</td>
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<tr>
<td>Yee Tiing</td>
<td>Law</td>
<td>Surveying the health needs, issues and knowledge of international and new arrival students within the School of Health Sciences at UniSA</td>
<td>Janette Young, Sara Jones, Sharron King</td>
<td>N/A</td>
</tr>
<tr>
<td>Michelle</td>
<td>Beatty</td>
<td>What competencies do registered nurses require to effectively supervise care workers in the aged care setting? Perspectives of registered nurses and care workers.</td>
<td>Terri Gibson, Catherine Hall, Anne Hofmeyer, Megan Corlis, Alison Ballantyne</td>
<td>NRC</td>
</tr>
<tr>
<td>Shang Jun</td>
<td>Chua</td>
<td>The 'Vital' nature of aeromedical nursing care for rural and regional hospital patients being transported to higher-level care</td>
<td>Barbara Parker, Matt Haren</td>
<td>NRC</td>
</tr>
<tr>
<td>Mitra</td>
<td>Javanmard</td>
<td>An investigation of the issues encountered by overseas trained midwives (OTMs) of Culturally and Linguistically Diverse (CALD) backgrounds working in the Australian Health Care System (AHCS) and the potential of this to impact on maternal and neonatal care</td>
<td>Helen Bradley, Adrian Esterman</td>
<td>NRC</td>
</tr>
<tr>
<td>Sian</td>
<td>Knight</td>
<td>Investigating the barriers and enablers to the use of validated screening tools for delirium by nurses in the ICU and surgical/orthopaedic wards</td>
<td>Luisa Toffoli, Amanda Bobridge</td>
<td>NRC</td>
</tr>
<tr>
<td>Simon</td>
<td>Owens</td>
<td>An exploration into graduate nurses' transition to advanced practice within a major metropolitan Emergency Department</td>
<td>Adrian Esterman, Craig Phillips, Kevin O'Shaughnessy, Lemuel Pelentsov</td>
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<tr>
<td>Brittany</td>
<td>Johnson</td>
<td>Start Right Eat Righ Plus: enhancing a long day care nutrition program by developing a parental component</td>
<td>Rebecca Golley, Gilly Hendrie</td>
<td>PMB</td>
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<td>Ji Hyun</td>
<td>Cho</td>
<td>Relationship between Mediterranean dietary patterns and physical/mental health</td>
<td>Natalie Parletta, Andrea Gordon, Kerin O’Dea, Dorota Zarnowiecki</td>
<td>SPH</td>
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<tr>
<td>Eve</td>
<td>Raets</td>
<td>Rate of upgrade to invasive breast cancer following diagnosis of atypical hyperplasia at core biopsy: should women be undergoing surgical biopsy? A systematic review</td>
<td>Alison Coates, Annika Steffen, Liz Buckley</td>
<td>SPH</td>
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With Honours

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<tr>
<th>Given Name</th>
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<tr>
<td>Ngoc-Thursday</td>
<td>Ho</td>
<td>Medical Radiation</td>
<td>Roadmap to obesity: tracking time trends in Australian childhood obesity</td>
<td>Carol Maher, Tim Olds, Natasha Schranz</td>
<td>HUT</td>
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<tr>
<td>Marcie</td>
<td>Packer</td>
<td>Medical Radiation</td>
<td>Sit less, be less tired? Sedentary time, physical activity and fatigue in stroke survivors</td>
<td>Coralie English, Toby Cumming</td>
<td>iCAHE</td>
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<tr>
<td>Justin</td>
<td>Parker</td>
<td>Podiatry</td>
<td>Randomised clinical trial between Pedimed and sorboline on treatment of xerosis</td>
<td>Rolf Scharfbillig, Sara Jones</td>
<td>iCAHE</td>
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<td>Catherine Yen-Ming</td>
<td>Lee</td>
<td>Medical Radiation</td>
<td>Validation of the AsTex tactile assessment tool in a healthy population</td>
<td>Ryan Causby, Susan Hillier</td>
<td>iCAHE</td>
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<tr>
<td>Madelaine</td>
<td>Kavanagh</td>
<td>Physiotherapy</td>
<td>3D kinematics and muscle activation during repetitive lifting in people with chronic flexor-pattern lower back pain?</td>
<td>Steve Milanese, Julie Walters, Ben Corso</td>
<td>iCAHE</td>
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<tr>
<td>Ines</td>
<td>Serrada</td>
<td>Physiotherapy</td>
<td>Upper limb rehabilitation early following stroke – what is current practice?</td>
<td>Susan Hillier, Michelle McDonnell</td>
<td>iCAHE</td>
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<tr>
<td>Daniel</td>
<td>Wong</td>
<td>Podiatry</td>
<td>Neuromuscular responses to footwear and lateral wedge insoles in people with medial knee osteoarthritis</td>
<td>Dominic Thewlis, John Arnold</td>
<td>EHHP</td>
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<tr>
<td>Ee Lin</td>
<td>Woon</td>
<td>Physiotherapy</td>
<td>Effects of RockTape® on markers of exercise-induced muscle damage following eccentric exercise</td>
<td>Carmel Nottle, Steve Milanese</td>
<td>EHHP</td>
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<tr>
<td>Muhammad Fairuz</td>
<td>Jum’ee</td>
<td>Medical Radiation</td>
<td>The impact of timing of radiotherapy treatment on survival of glioma patients: a retrospective study</td>
<td>Donna Matthews, Michala Short, Andrew Potter</td>
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<tr>
<td>Jessica</td>
<td>Spirat</td>
<td>Medical Radiation</td>
<td>Surveying the health needs, issues and knowledge of international and new arrival students within the Division of Health Sciences at UniSA</td>
<td>Janette Young, Sara Jones, Sharron King</td>
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<tr>
<td>Aloysius</td>
<td>Chan</td>
<td>Physiotherapy</td>
<td>Golf swing and lower-back pain – What can 3D analysis tell us?</td>
<td>Julie Walters, Katia Ferrar, Ben Corso</td>
<td>N/A</td>
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<tr>
<td>Rima</td>
<td>Nawzad</td>
<td>Medical Radiation</td>
<td>Sedentary behaviours and adiposity in obese and healthy-weight youth</td>
<td>Margarita Tsiros, Tim Olds, Alison Coates</td>
<td>NPRC - HUT</td>
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<td>Minh</td>
<td>Chau</td>
<td>Medical Radiation</td>
<td>Illicit stimulant use and substantia nigra morphology</td>
<td>Jason White, Kerry Thoirs, Gabrielle Todd</td>
<td>PMB</td>
</tr>
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SCHOOL FIRST PUBLICATION SCHEME

Congratulations to **Abby Tabor** who was recently awarded a payment under the School First Publication Scheme for her publication entitled 'Perceptual bias in pain: A switch looks closer when it will relieve pain than when it won’t' published in Pain.

ICAHE COOPERATIVE PARTNERSHIP WITH UNICARE

The International Centre for Allied Health Evidence (iCAHE) and The University of Adelaide Unicare Health Service have signed off this month on a cooperative arrangement to support implementation of the Australian Primary Health Care Research Institute (APHCRI) Research Project: Functional decline in community dwelling older people and Medicare 75+ Assessments. The aim of this research is to provide health services and consumers with tools to identify functional decline early and to maximise people's long term independence, safety and quality of community life. UniCare clinics will facilitate consumer recruitment into this project and clinic staff will participate in interviews to inform the Project. University of South Australia students on placement at the Playford clinic will also participate in the project. This partnership is already identifying multiple opportunities for evidence-based practice implementation partnerships.
SANSOM INSTITUTE CLINICAL TRIAL FACILITY

Louise Massie

"Are you conducting a clinical research study? Are you supervising a student conducting a clinical research study? Do you need assistance with recruiting subjects? Do you need a space to meet with your volunteers?

The Sansom Institute for Health Research Clinical Trial Facility may be able to assist you. To find out how we can help and a tour of what we can offer please contact Louise Massie, Clinical Trials Coordinator on 83022097 or louise.massie@unisa.edu.au

SHOWCASE: PhD and Honours Research

PHYSICAL ACTIVITY, SEDENTARY BEHAVIOUR AND PSYCHOLOGICAL STRESS AS PREDICTORS OF METABOLIC SYNDROME IN RURAL AUSTRALIAN ADULTS

Braden Mitchell – PhD candidate

Rural Australian adults are anecdotally thought to live relatively stress-free, healthier and more active lifestyles than their urban counterparts. However, this ‘agrarian myth’ has been challenged by reports indicating considerable inequalities in health between rural and urban populations. In particular, rural populations report higher levels of lifestyle related diseases and some mental health disorders. Numerous studies of Australian urban populations have posited physical (in)activity to play a major role in the pathogenesis of the metabolic syndrome (MetS), a significant predictor of cardiovascular disease and type-2 diabetes. However, previous studies of rural adults specifically, have relied on self-report measures of physical activity, while studies of sedentary behaviour are limited. In addition, recent evidence suggests a role of psychological distress as a predictor of MetS in rural Australian adults, but investigations of psychological stress are limited.

As the basis of my Honours thesis I sought to further investigate the associations of physical activity, sedentary behaviour and psychological stress with the presence of MetS, specifically in rural adults. Coming from an exercise physiology background I was particularly interested in associations with lifestyle activity rather than structured exercise. To achieve this, we used baseline data from a larger walking intervention study currently being undertaken in regional South Australia which purposefully excluded those regarded as being sufficiently active by the IPAQ. As a first in this population, accelerometers were used to objectively measure both physical activity levels and sedentary behaviour. Psychological stress was measured both subjectively using self-report questionnaires and objectively using salivary cortisol samples.

Physical activity was represented as the average time per day spent undertaking light- and moderate- to vigorous-intensity, while sedentary behaviour was represented as the average time per day participating in activities below the light-intensity cut-off. Results showed that light-intensity physical activity and sedentary behaviour were significantly associated with the presence of MetS. Notably, logistic regression models controlling for covariates in women, showed that sedentary behaviour remained a significant predictor of MetS, independent of MetS.

Analyses of psychological stress did not yield any significant results, however underlying diurnal cortisol profiles suggestive of long-term elevated psychological stress were observed in men with MetS compared to those without.

Further work post-honours focusing on associations of physical activity measures with raw health outcomes in women identified sedentary behaviour as a significant predictor of HDL-C, triglycerides and fasting blood glucose. These remained significant after controlling for percentage body fat as measured by BIA and after controlling for MVPA for triglycerides and fasting plasma glucose. Similarly, light intensity activity was a significant predictor of HDL-C and fasting plasma glucose, with fasting glucose remaining independent of percentage body fat and MVPA.
AUSTRALIAN SONOGRAPHERS ASSOCIATION

Jessie Childs and Associate Professor Kerry Thoirs presented at the South Australian Branch meeting of the Australian Sonographers Association on 12 November 2013.

Jessie who is currently undertaking the second year of her PhD under the supervision of Adrian Esterman (Chair of Biostatistics, School of Nursing) and Associate Professor Kerry Thoirs, spoke about her PhD research. Jessie presented her aims and results so far. Her research centres around developing a reliable and valid technique to measure the liver using two dimensional ultrasound and the development of a reference interval for the measurement.

Kerry spoke about how to critique a journal article. She pointed out the various assessment rating tools available and walked delegates step by step through the assessment of the integrity of an article.

NETBALL SA ~ ADELAIDE METROPOLITAN NETBALL ACADEMY

Dr Mary Magarey

Dr Steve Milanese and I are supervising an Honours Physiotherapy student, Tessa Rawolle, who is currently undertaking a research project in collaboration with Netball SA and their Adelaide Metropolitan Netball Academy program of elite junior netball players at ETSA Park through the City Nights competition on Tuesday nights. Over 100 teams participate in the competition on Tuesday nights alone and a further high number play junior competition on Friday nights.

Tessa’s project involves trialling an Injury Report Form in a pilot study to determine its usefulness in capturing data related to injuries associated with netball. Injury data are collected from the elite junior players in the AMNA group through their team managers, through the sports trainer staff in the first aid room and through a Facebook link to the form via Survey Monkey that has been sent to all participating clubs to try to capture those injuries that are not severe enough for the player to seek treatment from the first aid room. Follow-up interviews are held with those who complete the forms during the subsequent few days to determine whether the form has captured the relevant information in the most appropriate way.

The information gained from this pilot study will be used to develop a robust injury reporting form specific to netball that will be used to record all injuries through a full winter netball season, probably at Intermediate level of competition (U17s). Inters are in the age group where the players have yet to reach elite standard, where they are supported by physiotherapy coverage with all major city based netball clubs but where their movement patterns tend to be still developing. Therefore, this is an ideal age in which to determine the causes of injury in the sport, with the long term goal of implementation of targeted injury prevention training for players in this age group once the key causes of injury have been identified. Such injury prevention programs are likely to involve movement and technique awareness and training so that the players mature with more optimal movement patterns for injury prevention and longevity in the sport. The effect of implementation of an injury prevention package would then be evaluated in this cohort.

These last steps are a long way beyond Tessa’s project – for now, a pilot study to determine the robustness of the Injury Report Form that has been developed on the basis of one used in SANFL U18 football research over the last 5 years (Chalmers et al 2013, Scase et al 2012).

Tessa, Steve and I have been roaming the netball courts at ETSA Park on a Tuesday night, dressed in custom made T-shirts to attract attention to the research project, working to inform team managers and players of the project so that we can obtain as much information about injuries and the form as possible for the research.
RESEARCH GRANTS / FUNDING

EXPERIENCE PLUS GRANT – HDR AND HONOURS NETWORKING

Deb Williams

The School Research team was recently awarded an 'Experience Plus' Grant of $2,000 to support a monthly 'networking lunch' for HDR candidates and Honours students as part of the Telemachus: Research Training (or TRT for short).

As HDR candidates and their supervisors know, these TRT sessions are run through the year on a weekly basis, which are aimed at supporting candidates as they traverse their studies, to improve communication across different research groups and provide a peer support network for our candidates.

In 2014 we are aiming to involve Honours students more in these sessions, to provide them with peer support, opening their eyes to further research and possibly tempt them into joining us for a PhD once they finish Honours.

Thanks go to the Experience Plus program for helping to support this initiative to further enhance the research training experience for our students.


- Childs J. Australian Sonographers Association for PhD research into ultrasound liver measurements $330.

OPPORTUNITIES – Business Development Unit

The purpose of the Foundation is to support health, educational or social research to encourage and advance investigation into the cause, prevention, diagnosis and treatment of any condition that may affect the general health, education or welfare of children in South Australia and the Northern Territory. Each year the Foundation disburses approximately $1,000,000.

Grant Entitlements

- The Foundation funds grants to universities, research institutes, health services and other organisations in South Australia and the Northern Territory for research projects into conditions that may affect the health, education and welfare of children.
- The Research must be undertaken in South Australia or the Northern Territory.
- Research must be related to the fields of Medicine, Education, Dentistry, Nursing and Midwifery, Social Sciences, Environment, Mental Health and Allied Health Professions.
- Applications for research grants can be made under one only of the following categories:
  - Basic science
  - Clinical studies
  - Community-based studies.
- The maximum funding per grant will be $75,000. Research may be completed over 1 or 2 years.
- Alternatively, researchers applying for the first time as Chief Investigator may elect to apply for an Early Career Grant of a maximum of $35,000.

Two-step Application Process

- Researchers complete an Expression of Interest (EOI) online on this website.
- Short-listed applicants will be invited to submit a full Grant Application for funding.

Expressions of Interest (EOI) Open Date

24 February 2014
Expression of Interest Closing Date
21 March 2014 at 5pm

Announcement of Shortlisted Applicants
16 May 2014

Full Grant Applications Closing Date (for shortlisted applicants)
27 June 2014 at 5pm

Notification to Applicants Regarding Grant Application Outcome
October 2014, following ratification by the Foundation Board.

For further information please click on the link below

The Wicking Trust seeks to achieve enduring, positive impact in the areas of vision impairment, care of the aged, problems associated with ageing and Alzheimer’s disease. The Wicking Trust is proud to have established partnerships with Vision Australia and the Microsurgery Foundation.

The Wicking Trust underwent a major review in 2011 - 2012 which resulted in the refocus of granting, as outlined in these guidelines. The key changes for 2013 include:

- Retaining the strategic focus on Alzheimer’s disease and ageing;
- To support and invest in organisations which are seeking to make a systemic impact in the ageing and/or Alzheimer’s sectors;
- To fund fewer and more significant programs rather than funding smaller grants for promising projects;
- To create a Wicking Review Panel to encourage review and dissemination of the outcomes arising from Wicking funded programs;
- To conduct an Annual Wicking Symposium to profile funded organisations across the ageing and Alzheimer’s sectors;
- To cease funding detailed medical research into Alzheimer’s disease;
- To cease funding the Incubation Program; and
- To seek Expressions of Interest and then only to invite applications from shortlisted organisations.

The Goal

The goal of the Trust is to achieve systemic change through enduring, positive impact in the areas of care of the aged, problems associated with ageing and Alzheimer’s disease.

The Focus

To invest in organisations that are seeking to make a systemic impact in the wellness and quality of life of the aged and/or those with or at risk of Alzheimer’s Disease;

- Support the development and implementation of innovative concepts;
- Support the translation of research into practice;
- Enhance the sharing of learnings and knowledge across the sector; and
- To substantially support a small number of organisations over a number of years to achieve impact.
Areas of Interest

Organisations in the aged and/or Alzheimer's sector that:

- foster innovation;
- conduct pilot programs and trials;
- have a commitment to evidence-based research;
- evaluate their outcomes and impact;
- proactively share knowledge across the sector;
- directly or indirectly lead to positive impact for the aged and/or those with Alzheimer's in metropolitan and/or rural Australia;
- nurture leadership and the professional development of staff;
- demonstrate an understanding of 'best-practice' and emerging trends in the sector in Australia and overseas;
- work collaboratively with other organisations in the sector and take a multi-disciplinary approach;
- leverage resources; and
- are well regarded by, and influence key decision-makers including government.

Each grant will be in the order of $100,000+ per annum and will usually span 3-5 years in duration to achieve impact.

Other Information

Organisations and funded programs must be charitable at law and conducted within Australia.

The Trust prefers not to fund:

- Organisations/activities that do not fit the goal of the Trust;
- Organisations/activities that may be more suited to corporate sponsorship or investment; and
- Organisations/activities that may be more suited to government funding

Expressions of Interest should be submitted electronically by 1 May 2014.

For further information please contact Senior Business Development Manager Bruce.Chadwick@unisa.edu.au
PUBLICATIONS BY STAFF AND STUDENTS

   
   5 year IF = NA; 2 year IF = 1.483 (50/83 Healthcare Sciences and Services)
   
   **Abstract**

   
   Impact factor not available
   
   **Abstract**

   
   5 year IF = 1.875; 2 Year IF = 2.305
   
   **Abstract**

   
   5 year IF = 5.755; 2 Year IF =5.237 (1/84 Sports Sciences)
   
   **Abstract**

   
   5 year IF = 2.389; 2 year IF = 2.335 (23/83 Biology)
   
   **Abstract**

   
   **No Abstract**

   
   5 year IF = 0.523; 2 Year IF =0.265 (64/84 Sports Sciences)
   
   **Abstract**

   
   5 year IF = 2.651; 2 Year IF = 2.408
   
   **Abstract**

   
   5 year IF = 4.244; 2 year IF = 3.730 (7/56 Multidisciplinary Sciences)
   
   **Abstract**

    
    5 year IF = 4.244; 2 year IF = 3.730 (7/56 Multidisciplinary Sciences)
    
    **Abstract**

    
    5 year IF = 2.237; 2 Year IF = 2.533
    
    **Abstract**

Impact Factor not available

Abstract


Impact Factor not available

Abstract


5 year IF = 2.141; 2 year IF = 2.781; 18/50 Respiratory System

Abstract

**PRESENTATIONS / UPCOMING CONFERENCES**


**SAVE THE DATE – AUSTRALIAN SOCIETY FOR MEDICAL RESEARCH**

**ASMR SA Annual Scientific Meeting will be held on Wednesday 4th June, 2014 at the Adelaide Convention Centre, as part of ASMR Medical Research Week® 1-7 June 2014.**

The ASMR scientific meeting provides an excellent venue for researchers from all disciplines in South Australia to meet and have a great discussion about their research. This meeting is also a great opportunity for students to practise their presentation skills and share their research.

64 oral presentations and over 60 posters available this year.

Honours, PhD students and early Post-doctoral fellows are strongly encouraged to submit abstracts and attend the meeting.

Abstract will be open on Monday 10th March and closed on Friday 4th April 2014.

For further information please contact saumya.samaraweera@unisa.edu.au or shervi.lie@mymail.unisa.edu.au
2014 Program - *Open for registrations*

People Development and Performance, based in the Human Resource Unit, each year offers a suite of development activities open to Academic staff of the University of South Australia.

The program aims to:
- assist people develop and extend their skills and capabilities,
- share knowledge among staff about good practice, enhance understanding of the University and its processes,
- build collaboration and networks to support our efforts, assist people develop and extend their skills and capabilities.

Workshops offered as part of the 2014 program include:

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<tr>
<th>Workshop</th>
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<th>Time</th>
<th>Register Link</th>
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<tr>
<td>Introductory Seminar for new Course Coordinators</td>
<td>Thursday 6 March (9am - 12.30pm)</td>
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<td>Resilience at Work</td>
<td>Friday 14 March (9am - 1pm)</td>
<td>REGISTER HERE</td>
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<tr>
<td>Introductory Seminar for new Program Directors</td>
<td>Monday 17 March (9am - 12.30pm)</td>
<td>REGISTER HERE</td>
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<td>Time Management for Researchers</td>
<td>Wednesday 19 March (9am - 12.30pm)</td>
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<tr>
<td>Academic Promotions Training</td>
<td>Tuesday 15 April (11.30am - 1.30pm)</td>
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<tr>
<td>Two Real Hours - NEW</td>
<td>Friday 16 May (9.30am - 11.30am)</td>
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<tr>
<td>Successful Mentoring - An Introduction</td>
<td>Thursday 19 June (9am - 1pm)</td>
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<tr>
<td>Working with Chinese People and Students</td>
<td>Friday 20 June (9am – 4pm)</td>
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**MID-YEAR BREAK SERIES**

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<th>Workshop</th>
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<tr>
<td>Political Nous: Understanding Influence</td>
<td>Thursday 10 July (9am - 1 pm)</td>
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<tr>
<td>Performance Development and Management</td>
<td>Friday 11 July (9am - 12pm)</td>
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<tr>
<td>Introduction to Government</td>
<td>Wednesday 16 July (9am - 12.30pm)</td>
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<td>Turbocharge your Writing</td>
<td>Thursday 17 July (9am - 12.30pm)</td>
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<tr>
<td>Presenting your Research with Confidence</td>
<td>Friday 18 July (9am - 12.30pm)</td>
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<th>Workshop</th>
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<tr>
<td>Structural Editing</td>
<td>Wednesday 6 August (9am - 1pm)</td>
<td>REGISTER HERE</td>
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<tr>
<td>Shameless Self Promotion for Researchers</td>
<td>Thursday 7 August (9am - 12.30pm)</td>
<td>REGISTER HERE</td>
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<tr>
<td>Finishing that Article</td>
<td>Friday 15 August (9am - 12.30pm)</td>
<td>REGISTER HERE</td>
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<tr>
<td>The Strategic Researcher</td>
<td>Thursday 18 September (9am - 12.30pm)</td>
<td>REGISTER HERE</td>
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<tr>
<td>Adaptive Leadership</td>
<td>Friday 19 September (9am - 1pm)</td>
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<tr>
<td>Managing Self</td>
<td>Friday 17 October (9am – 1 pm)</td>
<td>REGISTER HERE</td>
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<tr>
<td>Strategies for Communicating your Research</td>
<td>Friday 14 November (9am - 12.30pm)</td>
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<tr>
<td>Performance Development and Management</td>
<td>Monday 17 November (9am - 12pm)</td>
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Details of workshops and seminars offered, along with registration information available on the [Development Program for Academics](#) web site.
School of Health Sciences supports new ‘Practitioner Award’ at 2014 Exercise and Sports Science Australia Conference

The Exercise and Sports Science Australia and Sports Dieticians Australia Biennial Scientific Conference are leaving the east coast for the first time to be held in Adelaide in April 2014. The conference chairs and organising committee (including Professor Roger Eston) have ensured this will be a high calibre event and a very worthy stage to showcase our research. The School of Health Sciences has excellent representation already with a key note from Professor Lorimer Moseley and invited presentations from Professor Kevin Norton, Professor Tim Olds, Associate Professor Gaynor Parfitt and Dr Kade Davison scheduled. We should aim to build on this with numerous free paper presentations as well, and to help with motivation there are very lucrative prizes for students and ECRs on offer.

To acknowledge the fact that many of the delegates at these events are Clinical Exercise Physiology and Exercise/Sports Science Practitioners rather than academics, UniSA has sponsored the inaugural practitioner award for an abstract submission on a case study or literature review undertaken as part of practice. The award is worth ($5000 first prize) and it would be fantastic for a UniSA alumnus to win it. So spread the word through your industry and alumni networks. More information can be found here: http://www.essa.org.au/2014conference/awards/#Prac.
SCHOOL ADMINISTRATION

FAMILY RESPONSIBILITY LEAVE

Please note that absences for family responsibilities must be supported by the following evidence:

i) In the case of carer responsibilities, apart from five (5) single day absences per year, all absences must be supported by a medical certificate from a registered health practitioner, a statutory declaration or other documentation stating the illness of the person concerned and that the illness is such as to require care by another.

ii) All other absences must be supported by evidence that is reasonable with respect to the type of leave taken.

EMPLOYEE ASSISTANCE PROGRAM

This is to advise that the Employee Assistance Program provider has been changed from Assure Program to Broomhall Young. The change will be effective from 1st March 2014.

OHSW Services Unit has updated their website with the details of the new provider, which can be found on the following link


CASUAL STAFF WHS&IM INDUCTION

Do you employ casual/sessional staff? If so, can you please provide them with the following induction information. This induction is designed to familiarise them with UniSA's WHS & IM policies, procedures and responsibilities within their work environment and across the School.

The New Casual Staff Induction (OHS) 2014 booklet can be found on the following link.

https://teamsites.unisa.edu.au/hsc/hls/Manuals/Forms/AllItems.aspx
STUDENT NEWS

PHOEBE STEINFORT – VACATION SCHOLARSHIP

Maureen McEvoy

Phoebe Steinfort is a graduate of 2013 Bachelor of Physiotherapy (Honours) who took up a Vacation Scholarship in December with iCAHE. Phoebe entered the final year of data that have been collected over the past four years from physiotherapy students and some occupational therapy and podiatry students on knowledge, attitudes, confidence and behaviours toward evidence based practice. The data that was collected before and after the courses Evidence Based Practice (EBP) 1 and 2 was collated, analysed for an honours project completed in 2012. Phoebe's task involved entering the 2013 data that was collected before and after completion of the course EBP3. In addition to entering the data and gaining experience with the statistical software program PAWS (Predictive Analytics Software), Phoebe undertook some initial analysis of the data, met with other members of the iCAHE research team and was guided by statistician Alvin Atlas.

The value of the vacation scholarship for iCAHE is in adding to a databank on outcomes from EBP training. The longer term picture is that if we can build an understanding of outcomes from the current EBP training programs, we can then measure the effect of future intervention strategies. In addition, the plan for 2014 is to follow-up some of the graduating physiotherapy students (those involved in the EBP3 pre-post study) with a more in-depth qualitative enquiry about their abilities, confidence and support to use an EBP approach in their workplace.

CONFERENCE REPORT - AUSTRALASIAN SOCIETY OF PSYCHOPHYSIOLOGY

Gavin Tempest

In November 2013 I attended the 23rd annual meeting of the Australasian Society of Psychophysiology at the University of Wollongong.

The three-day meeting was attended by a number of leading researchers within psychophysiology from Australasia. The presentation and workshop topics ranged from psychology, psychiatry and neuroscience, with the focus to understand the relationships between the brain and behaviour.

I presented a paper titled 'Insight into the neural basis of why we feel how we feel during exercise'. This work involved the novel application of common psychophysiological techniques to study brain activity during exercise. I felt this work was well received. It gave me a great opportunity to obtain constructive feedback on my research and I enjoyed some intuitive discussions with other researchers. The meeting was relatively small which made networking all the more accessible. The conference gave me a great opportunity to develop new ideas with others and to learn about the research in different groups around Australasia.

I wish to thank the School of Health Sciences for providing the support to attend this conference.
NEPAL
Dr Arjun Burlakoti

Nepal is the home country of Dr Arjun Burlakoti, a lecturer in UniSA Human Anatomy department. It is almost seven times smaller than South Australia and bordered by China and India. Last December 2013, the Senior Lecturer and Stream Leader in UniSA Human Anatomy Dr Nicola Massy-Westropp and her family, Arjun and his wife spent their holiday touring Nepal and India.

The team visited many places mainly around the Central and Western part of Nepal. That included historical places of the capital valley Kathmandu, 1500 years old Buddhist temple named Swayambhunath (Monkey Temple), Arjun’s village (world’s 8th highest mountain, Mount Manaslu 8163 meter can be viewed from here), 2nd largest Nepalese city called Pokhara, Mount Annapurna and Mount Fishtail region (Ghandruk) and Nepal’s largest national park (Chitwan National park).

Arjun is a medical doctor with a surgical background. During the tour, the team visited the medical college from which Arjun graduated and also the hospital and private clinic where Arjun used to work as a General Surgical Medical Officer before migrating to South Australia.

Arjun is from a beautiful village named Salbas Dhading which lies about 150km northwest to Kathmandu (1400 meters from sea level). The team stayed in the village for two days.

Arjun took the opportunity to examine some patients in the local health centre during his stay. He also volunteered to perform a few minor surgeries.

Arjun was quite lucky to conduct a vaginal delivery in the local health centre, it was the morning of 5 December 2013, Arjun and his team were enjoying a public ceremony when he was suddenly approached by a middle aged woman (a relative of the patient) requesting him to go with her. He did not know the reason but he quietly followed her. She took Arjun to the local health post. The local doctor was not available at the health post. Arjun took a very quick history, went through the documents, and performed a quick general assessment of the mother and the foetus. Vital signs were within normal limit. He repositioned the patient on the delivery table, established a secured intravenous line. Everything went well, however the lady needed a small episiotomy (planned small surgical incision on the perineum, as a prophylaxis cut against soft tissue trauma). After the delivery of the baby, placental cord was clamped and cut properly, baby boy was examined (vital signs were perfect, weight 3.5 kg, height 48 cm, head circumference 34 cm), and placenta was delivered (controlled cord traction) 17 minutes after the delivery of the baby. Birth passage was inspected thoroughly, wound was repaired with absorbable suturing (available in the same centre), and bleeding was secured. Arjun attended the mother and baby four times during his 11 days of stay there. Arjun has got experience delivering and assisting (both normal and assisted deliveries) more than 40 deliveries as a part of his 52 weeks of rotational internship training from his medical school.

The team also trekked to Ghandruk which is famous for its culture and the majestic view of Mount Annapurna (7,937 meter) and Mount Fishtail (~ 7000 meter). Following the trek, they spent a couple of days in Pokhara and Chitwan National Park. The National Park is famous for its wildlife and dense jungle. They visited the elephant breeding centre, did an early morning jungle drive and rode an elephant to observe wildlife that included elephants, rhinoceroses and their babies, different species of deer, crocodiles and birds.

During the whole tour, the team enjoyed a variety of Nepalese dishes. And a few of our team members didn't mind suffering from diarrhoea!! After spending thirteen days in Nepal, Dr Nicola’s family left for India. Arjun and his wife went back to their village again where they spent 11 more days.

Please enjoy some pictures (see below) from Nepal.
Arjun – Mt Annapurna region trekking (Nepal)

Arjun’s grandfather (85yrs) working in a rice mill

View of Mt Annapurna and Mt Fishtail (Nepal)

Dr Arjun Burlakoti with his and Dr Nicola Massy-Westropp families (Nepal)
SOUTHERN INDIA
Dr Harsha Wechalekar

I still distinctly remember the morning we left for India. A taxi was waiting outside to take us to the airport. My husband, elder daughter Gauri, my mother-in-law and I were stuffing things into our respective bags and my husband was screaming at the door to hurry up with little Isha, my 16 month old roaming aimlessly, completely oblivious - as only a 16 month old can be of the chaos. Finally, we managed to squeeze ourselves into a special cab we had booked; our luggage containing gifts for countless relatives and us, competing for space. I was a bit stressed, as this was the first trip overseas with Isha. We managed to board the flight on time and before take-off I remembered that I had left all the milk bottles in the freezer. I did not mention this to anyone as I didn't want to lose my reputation at home of being a 'supermum'. This trip was special for all of us, not only because we were nostalgic to visit our place of birth but for the first time we were travelling together as a family. The 14 hour journey, including the stopover at Singapore, despite our fears how Isha would cope, was unexpectedly good and peaceful.

We reached Mumbai (a city on the West Coast) the country's financial capital, and the home of Bollywood. We stayed for couple of days, visiting our relatives and enjoying Mumbai street food. We then travelled to Nagpur, my husband’s hometown, situated at the centre of India and also called the Orange City, famous for its oranges. Here my husband dedicated most of his time giving free medical consultation to patients. We get loads of kind, warm-hearted invitations from our old patients and acquaintances who we looked after years ago and who are eagerly waiting for our return. The love, affection and warmth we get from them with no expectation of a return favour, always forces us to think what made us leave them. These thoughts never quite manage to escape conscious and unconscious memory and bother us for days, forcing us to question the wisdom of our decision to leave our home country. From Nagpur we flew to Kolkata (formerly Calcutta; the erstwhile capital of India), to visit the headquarters of the Ramakrishna Mission Ashram and nearby local centres (these are spread throughout the country but started their service in West Bengal, the state Kolkata is capital of), including a charitable hospital. This hospital caters for a large population which suffers from lack of basic medical services and equipment, and is run entirely on charity. It is in desperate need of equipment and any readers interested in helping are requested to contact the writer of this article.

The final leg of our journey saw us visit Thiruvananthapuram (previously known as Trivandrum) in the state of Kerala. My home town, where my parents still live, is a picturesque city (in a picturesque state) on the Southern tip of the West Coast. Kerala has a population of around 30 million (twelfth largest state of India as far as population is concerned), with highest literacy rates among all 35 Indian states. It is famous for its backwaters, tropical greenery, beaches, temples, palaces, ayurvedic (traditional Indian medicine) centres, spices, handicrafts and much more. At Thiruvananthapuram, our day used to start with a visit to a nearby temple to offer prayers, followed by hot breakfast, a welcome change. For the time being, regular exercise and health foods took a back seat, as the food was too tempting to resist! The popular breakfast foods are rice pancakes (Idlis) with coconut chutney, rice noodles (Idyappam) with potato stew; a substitute was a brunch with slightly sweet rice pancakes (Appam) with mouth-watering chicken curry. Our first visit was to Kovalam, a beach town by the Arabian Sea 15 km from Thiruvananthapuram. The literal meaning of Kovalam is ‘a grove of coconut trees’, it is said to be the paradise of Southern India. We all, particularly the kids, enjoyed the warm tropical waters of the beach. They rollicked in the sand and water, and it was a feat of no small magnitude getting them out. We went on a boat ride to several other nearby beaches of Hawah, Samudra and lighthouse. These tropical beaches were spectacular with forests, backwaters and the palm fringes adding to the beauty. After the trip to the beach, we looked forward to our planned lunch at a beach resort. The main meals in Kerala are traditionally served on a banana leaf called Sadya. The meals include rice (red rice), mixed vegetable curry (Aveal) with grated coconut, sambar (Lentil with veggies), Thoran (different varieties are available the special ones are made out of banana shoots and bitter gourd), different varieties of yogurt based preparations and of course pickle, pappadum, payasam (sweet); the non-vegetarian options include local seafood, chicken and lamb. Each meal, called a
'thali', has about 15-20 different varieties. A banana – there are more than a dozen different varieties- traditionally follows a meal, with an amazing number of sweet and savoury banana based snacks.

We then moved on to Kochi, Kerala’s busiest city, from where we drove to one of the largest waterfalls called Athirappilly. The drive is through the midst of a thick forest which is crossed by several small rivers and streams. The nearby bird sanctuary of Kumarakom is worth a visit. Spread over 14 acres, it has many migratory birds from the Himalayas, and has some excellent trekking trails. Unfortunately a planned visit to the jungle resort of Munnar (where we planned to go for elephant safari) did not eventuate, neither did a visit to a local temple known as the Sri Padmanabhaswamy temple; the latter has been in the news as more than three trillion dollars worth of gold assets were discovered recently and is the richest temple in the world. In the sanctum santorum, the deity (Sri Padmanabham) reclines on a serpent and is worshipped daily.

This idyllic interlude over, we came back to Thiruvananthapurum and to my parents. The main intention of my visit to India this time was really to spend time with my parents, especially my mum who is sadly deteriorating from dementia. My wish and prayer for my next visit is to still be able to see my parents and my mother retains enough memory to still be able to call me ‘ponu mole’ (dear daughter in Malayalam, my mother tongue).
REECE HOMFRAY

LAST January Raewyn Todd and her husband Gordon dusted off their bikes to ride the short distance from their home to Unley for the Tour Down Under street party.

The party was fun but the bike ride was even better. Almost 12 months later they’re now both hooked on cycling.

It has helped Raewyn manage a back injury and lose 32kg and now she’s gearing up for the Bupa Challenge Tour on January 24.

The pair both work for UniSA in the city, where Raewyn is the school manager for health sciences.

“We followed the Tour Down Under anyway because UniSA is one of the sponsors,” Raewyn said. “And this year we said ‘why don’t we ride our bikes to the street party in King William St?’

“So we did and a few days after I started biking to work, which is about 7km. Then my husband started riding as well and we got hooked.”

As well as commuting to and from work, Raewyn and Gordon embark on weekend rides lasting anywhere from 2-5 hours.

“We ride everywhere except when we have to get groceries,” she said.

“For me, it’s just good to be mobile, and in the last year and a half I’ve lost 32kg so it has changed my life.”

Raewyn has signed up for the 33km leg of the Bupa Challenge Tour from Yankalilla to Victor Harbor.

Riders have the choice of four distances, including the full 154km from Unley. Visit www.tourdownunder.com.au to register.