



VOLUME 21, NUMBER 5 OCTOBER 2016

The HGV aims to provide a dynamic continuing education program in which all persons with an interest in Histology and Histotechnology are freely invited to participate.

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ABN 49725 623 468 http://www.hgv.org.au

Committee Page

The members of the Histology Group of Victoria 2016 are:

Name Institution

Adrian Warmington St. John of God Pathology (Victoria)

Mark Bromley Melbourne Pathology

Elizabeth Baranyai Cabrini Health

Samantha Arandelovic St. John of God Pathology (Victoria)

James Cvetkovski

Peter MacCallum Cancer Centre Kellie Vukovic Sue Sturrock Peter MacCallum Cancer Centre

Kristy DeGeorge **Austin Pathology** Jesenka Jefic **Austin Health**

Maria Flynn Melbourne Pathology

Meghan Leo Histolab

Kellie Madigan Leica Biosystems Aysha Yang Du **Box Hill Hospital**

Hoang Yuyin Walter & Eliza Hall Institute of Medical Research

Kerrie Scott-Dowell Dorevitch Pathology/Leica Alison Boyd St. Vincent's Pathology

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50 words - no logos/no pictures

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Author enquiries and readers wishing to contribute articles or reports can contact the Editor - editor@hgv.org.au

Please email articles (preferably Microsoft Word format) for inclusion in the next edition to editor@hgv.org.au All items submitted for publication will then become the sole property of the Histology Group of Victoria Inc.

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BLURB FROM THE BUSH

Our recent two scientific meetings have been at St Vincent's Pathology and at the new Peter MacCallum Cancer Centre. Following our Peter MacCallum meeting, a survey was released for those that attended to make comment upon the scientific meeting including rating the venue. Overwhelmingly, the response was that the venue was excellent. Whilst the committee has a concern around the potential parking in the area, we felt that the venue itself was our best option going forward for scientific meetings. Our last meeting of the year in November will be held at Peter MacCallum, and our intention will be to hold meetings in an ongoing fashion in 2017.

All members should hopefully have seen a call for abstracts for the 2017 National meeting in Hobart. If you are interested in delivering an oral presentation, a workshop or a poster, please register by through the National Conference website portal.

http://www.nationalhistologyconference.com/abstracts

Our November meeting is also our HGV AGM. In this edition there are nomination forms for the HGV committee. If you are interested in participating in the operation of the HGV, your input would be greatly appreciated.

Adrian Warmington HGV President



Agilent Pathology Solutions

Dako's integration with Agilent

Agilent will complete its operational integration of Dako by merging Dako Australia into Agilent Technologies Australia on November 1, 2016.

You will continue to work with the same account managers, applications specialists and field service engineers but you will need to update some of the information in your systems to place orders and process payments. Details of the changes are listed on our website at www.dako.com/dako-is-agilent.

We remain committed to providing quality products and services as your trusted partner and your contacts will continue to provide the support you have come to expect from Dako.

If you have any questions, please speak with your Account Manager or contact the Customer Care team at CustomerCareAU@agilent.com

Read more at www.dako.com/dako-is-agilent



Under the Microscope with Alistair Townsend, Medical Scientist in Charge-Royal Hobart Hospital

1. What was your first part-time job?

Working in the automotive department of K-Mart

2. How long have you worked in histology?

24 years

3. When people ask, "So, what do you do?" How do you explain Histology?

When a surgeon cuts bits out of you and a pathologist makes a diagnosis on the bits – I do all the scientific testing in the middle.

4. What is a skill you'd like to learn and why?

Finding food and water in the wild – because you never know when you might need it!

5. If you won the lottery, what would you do?

I'd continue working in Histology but work part time. I'd put some money aside for a space flight; donate some money to charities (cancer research, RSPCA and the Salvo's) and then take my mum to Machu Picchu and the Galapagos islands. I'd also like to go to each tennis Grand Slam tournament in a calendar year.

6. Who do you most admire in life?

There is no one person I admire. I admire people like Shaun Burgoyne (Hawthorn AFL player) for his skill and commitment in his sport but also because he maintains a great balance with his family life; people like Cate Blanchett because she is a bloody good actress and for her philanthropy; someone like the Pope Francis who has devoted his life to improve the lives of others without personal gain.

7. If you could witness any event of the past, present or future, what would it be?

I'd love to witness the first meeting of humans and an extra-terrestrial species.

8. What is the best conference you have ever attended?

Midland Celebration (Birmingham UK) 2006; the speakers were great, there was a wide variety of topics, the social program was really good and the trade were very competitive on who could spend the most on the bar!

9. If you could only keep five possessions, what would they be?

There would be one or two photos. As long as I have good health and a good memory I'd be happy.

10. What is your dream holiday destination and why?

Way too many to list.

Reported by Kellie Vukovic



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Lean Lab? Think LOGOS One.



Review of Scientific Meeting-New Peter Mac Tour

There was quite a large turnout as most people were interested in having a sticky beak at the new facility. It certainly appears to be a magnificent building. The colour purple pervades.

I think we were all impressed with the food presented before the meeting, and all the hi-tech equipment in the lecture theatre was equally impressive, and going to take a bit of time for some of us to learn how to use. Fortunately Sue was on hand to demonstrate the touch screen computer that ran not only the presentation but also raised and lowered the screens, and set the lights.

Sue presented a very interesting talk about the transition from the Old Peter Mac building at East Melbourne to the New building we see today. She told us that this was actually the third incarnation of the hospital.

She is a wise woman our Sue. She didn't put all her eggs in one basket during the move, making sure that working machines were at the old place, still working until some of the new ones got up and running in the new. From the sounds of it, it was an enormous task for her and all of her staff. Despite a few hiccups due to management not listening, as usual, to the people on deck, the move was successfully achieved.

Some of the expensive mistakes made were dropping of the electron microscope by the removalists. I hate to think what that cost to repair! Another gem was the introduction of the red buttons all over the hospital to cut off all power in case of an emergency. Of course all the "tourists" coming to see the new hospital had to ask "what does this button do" as they pushed it, of course. And so everything went down, from operating theatres to computers to machines in the middle of molecular runs, the list was endless. After more than a few power outages, management realized that it probably wasn't a good idea to have these buttons all over the hospital. Sue came up with the ingenious idea of putting a plastic drinking cup over the offending red button.

Again, when the people putting the lab together didn't listen and didn't put adequate supports on the bench which was going to carry a number of heavy microtomes and water baths etc. Sue saw that the entire bench was going to collapse under the weight of it all. She returned to the old building and pulled the supports out from the old bench there and brought them to the new building and put them in herself.

In the end, it all came together nicely and all the staff of the histology lab at Peter Mac should be congratulated on a successful transition to the new facility.

The following page shows some pictures of the new facility including the Loft, which I believe has great food, so much so that quite a few people from the Royal Melbourne Hospital are coming across the connecting bridge to have their lunch there instead of at their cafeteria. A table and chair outside the lab with magazines for the staff. All the usual histology equipment, cutting stations, tissue processors and cut up room, plus the infamous red button covered by a cup.

Elizabeth Baranyai Cabrini









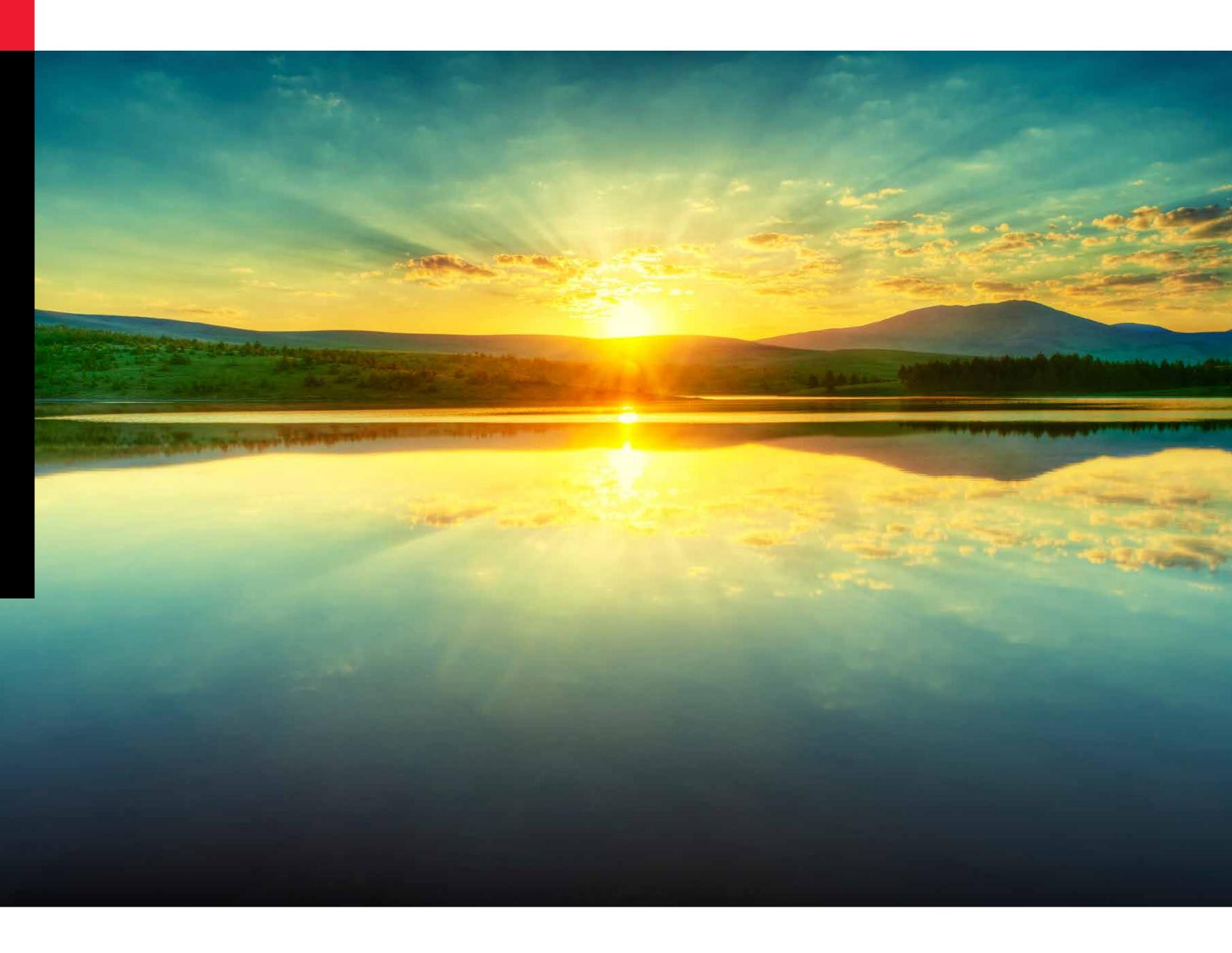








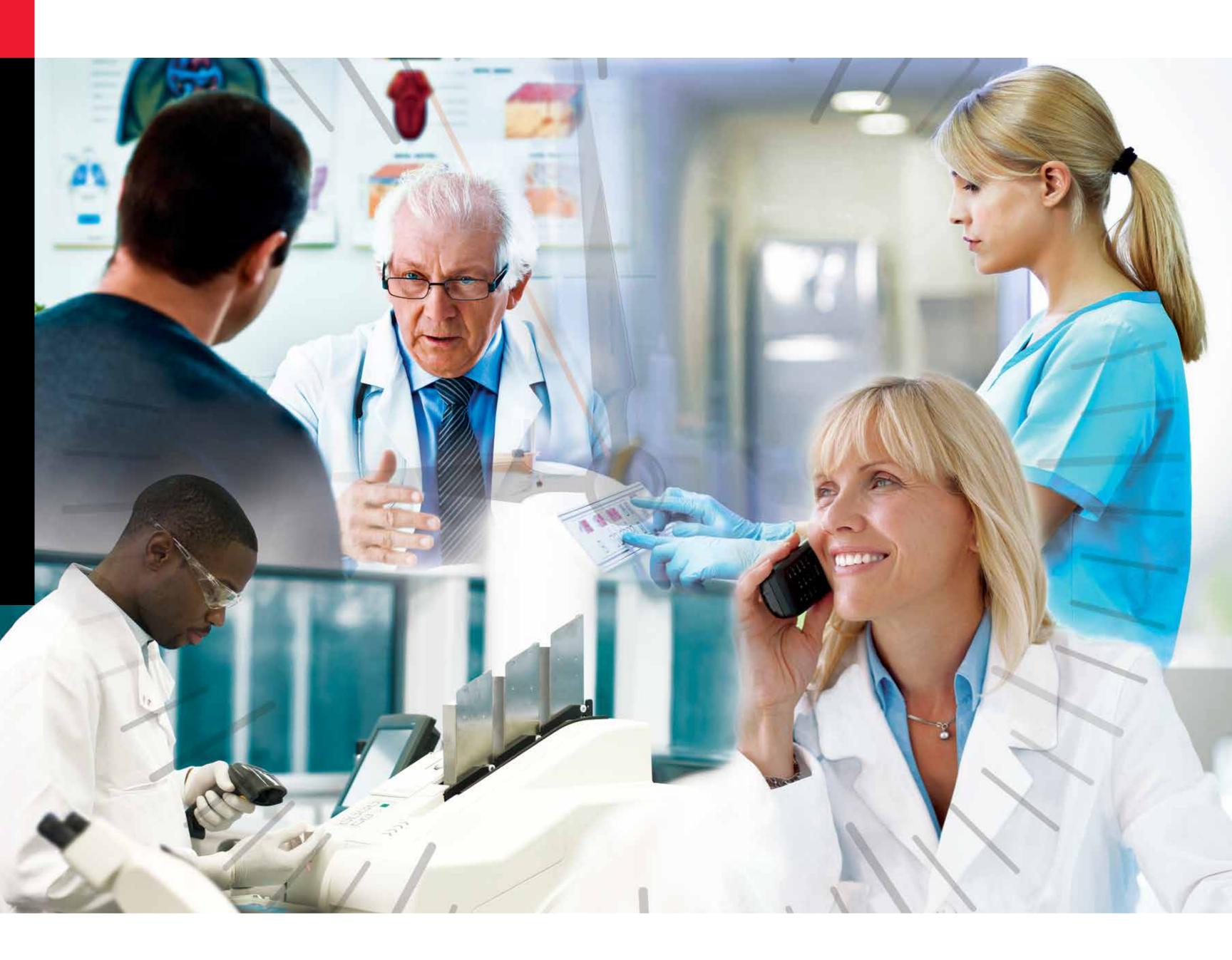




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Nomination Form for Election to the Committee of Management of the Histology Group of Victoria Inc.

Thursday 10th November, 2016 Peter MacCallum Cancer Centre

Nominated Person		
Institution		•••••
Email Address		
Position Nominated For	President	
(Please tick box)	Treasurer	
	Secretary	
	Committee Member	
(If you receive Paraffinalia you are a me	·	
Name of Member	Signature	
Nominations must have the consent of		
Signature of Nominee		
Nominations must be returned no late	er than Thursday 3rd N	ovember, 2016.
Please scan and email nomination form	to:	

Please scan and email nomination form to: secretary@hgv.org.au



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Journal Review: Recent Advances in the Field of Anti-cancer Immunotherapy

Henrique Neves, Hang Fai Kwok □ BBA Clinical 3 (2015) 280–288

This article looks at Immunotherapy as the forefront of anti-cancer therapies, with its degree of specificity to general high effectiveness and fewer side-effects. It details how anti-cancer therapies specifically inhibit the malignant activity of cancer cells, while leaving healthy cells unaffected and reminds us of the balance of therapeutic good and the potential toxicity.

The use of immunotherapy has allowed a means to both specifically block protein–protein interaction and deliver cytotoxic events to a tumour-specific antigen. It is the objective of this review to give an overview on current immunotherapy treatment for cancers using monoclonal antibodies. Three exciting targets for immunotherapy are highlighted, TNF-α Converting Enzyme (TACE), Cathepsin S and Urokinase Plasmogen Activator, as well as the advances made with one of the most used monoclonal antibodies in cancer therapy, Rituximab; as well as Herceptin. TACE, Cathepsin S and Urokinase Plasminogen Activator are proteins that show an abnormally high expression in cancer cells. This makes them the perfect targets for inhibition through the use of monoclonal antibodies.

TACE is over-expressed in various tumour cells, such as those from ovarian cancer, breast cancer, pancreatic ductal adenocarcinoma, colorectal carcinoma, gastric cancer stem cells, gastrointestinal stromal tumours (GIST), non-small cell lung carcinoma and head and neck cancer. This protein has also been associated in governing endothelial cell migration and pathological angiogenesis, which are equally relevant to tumour growth. Chemotherapy may activate TACE, leading to growth factor shedding and tumour resistance.

Another promising target being investigated is Cathepsin S, a proteolytic enzyme. Cathepsin S has been demonstrated to be highly expressed or upregulated, contributing to the development and progression of the cancer phenotype, particularly colorectal.

Urokinase Plasminogen Activator may be useful in mammary carcinoma, lung cancer and other solid tumours. Unfortunately, some of the issues with finding a solution to human breast cancer include its high genetic heterogeneity, different molecular profiles and varied clinical behaviour. One of the targets being focused on, in an attempt to eradicate this type of tumour, is the urokinase plasminogen activator protein. The article goes on to describe the crucial role this protein plays in growth factors this system, in the release and processing of latent growth factors.

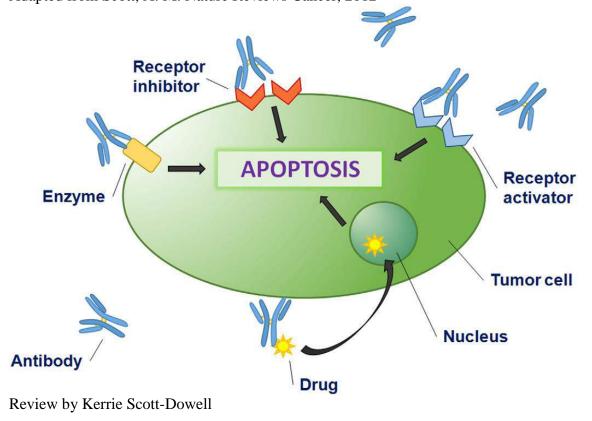
Herceptin and Rituximab are both monoclonal antibody therapies available for use today. Both can have some serious side effects, but also offer great

effectiveness in some patients. Herceptin, the only antibody therapy approved by the FDA that targets the human epidermal growth receptor 2 protein.

Although monoclonal antibodies are at the forefront of immunotherapy, particularly due to their effectiveness and specificity, along with their safety of use; they are not the only forms of immunotherapy being investigated and applied. The article also touched on some of the most prevalent immunotherapies available, these are adoptive cell transfer, the use of nucleic acids and dendritic cells.

While the number of available therapies keeps growing and the possibilities are truly exciting, the article made it quite clear that the use of antibodies, especially monoclonal antibodies, is a truly promising path for the fight against cancer. The article was interesting and detailed and I particularly liked the reminder of the pitfalls and limitations of these treatments. I have also included a figure from the article that showed some of the mechanisms that may be used by therapeutic antibodies to combat cancer cells -see Fig 1.

Fig1 Direct tumour cell killing by antibodies. This event may occur through receptor antagonist activity, which occurs when an antibody blocks dimerization, downstream signalling and kinase activation, resulting in inhibition of proliferation and, finally, apoptosis (such is the case with TACE binding and the therapeutic antibody Herceptin). It can also be triggered by antibodies binding to a tumour cell surface receptor, leading to its activation and, consequently, apoptosis; which is represented by the mitochondrion. Finally, an antibody may bind to an enzyme, leading to signalling abrogation, neutralization and cell death. Conjugated antibody therapies are based around delivering a payload – for example, a drug, toxin, small interfering RNA or radioisotope – to a tumour cell. Adapted from Scott, A. M. Nature Reviews Cancer, 2012



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41108	X Large	1000 pcs	\$102.71



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41006	Large	1000 pcs	\$107.88
41007	X Large	1000 pcs	\$107.88



Nitesafe Gloves - Blue

Pro-Val NiteSafe powder free examination gloves offer outstanding strength, dexterity and comfort. A high quality nitrile single-use glove, perfect for use where latex free gloves are required.

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41008	Small	1000 pcs	\$175.35
41009	Medium	1000 pcs	\$175.35
41010	Large	1000 pcs	\$175.35
41011	X Large	1000 pcs	\$175.35



Chemoprene Gloves - Green

Chemoprene disposable neoprene gloves offer outstanding permeation resistance to acids, bases, alcohols and even cytotoxic chemotherapy drugs. Their superior formulation allows the glove to resemble the fit and feel of latex, while providing better elongation and tensile strength than nitrile. Not only are our neoprene gloves latex free, making them ideal for latex allergy sufferers, they offer superior comfort levels to most other types of disposable gloves.

Code	Size	Carton	Price ex GST
41073	Small	1000 pcs	\$203.74
41074	Medium	1000 pcs	\$203.74
41075	Large	1000 pcs	\$203.74
41076	X Large	1000 pcs	\$203.74



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41068	Large	500 pcs	\$193.72
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4:27 PM 12/10/16 Accrual Basis

HGV inc. Balance Sheet As of June 30, 2016

	Jun 30, 16
ASSETS Current Assets Chequing/Savings	
Histology Group of Victoria ING	6,451.59 50,433.20
Total Chequing/Savings	56,884.79
Accounts Receivable Accounts Receivable	4,075.00
Total Accounts Receivable	4,075.00
Total Current Assets	60,959.79
TOTAL ASSETS	60,959.79
LIABILITIES Current Liabilities Accounts Payable Accounts Payable	-600.00
Total Accounts Payable	-600.00
Total Current Liabilities	-600.00
TOTAL LIABILITIES	-600.00
NET ASSETS	61,559.79
EQUITY Opening Bal Equity Retained Earnings Net Income	61,136.71 -1,877.39 2,300.47
TOTAL EQUITY	61,559.79

4:10 PM 12/10/16 Accrual Basis

HGV inc. Profit & Loss July 2015 through June 2016

	Jul '15 - Jun 16
Income Advertising Event Income	13,150.00
2016 Trivia Event Income - Other	1,025.00 2,325.00
Total Event Income	3,350.00
Other income Sponsorship	1,104.99 1,775.00
Total Income	19,379.99
Expense Committee meeting expenses Event expenses Expenses	785.10 7,802.57
Bank fees Insurance Web Hosting	120.00 2,590.24 507.61
Total Expenses	3,217.85
Fees and permits Honorarium Newsletter Refund Scientific meeting	240.40 2,000.00 1,422.90 426.70 1,184.00
Total Expense	17,079.52
Net Income	2,300.47

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HVG AGM 2016 AGENDA

Histology Group of Victoria Incorporated Annual General Meeting

The Histology Group of Victoria hereby provides notice of the 2015/2016 Annual General Meeting

Thursday 10th November 2016 Peter MacCallum Cancer Centre 305 Grattan Street, Melbourne

6:45pm

Opened:

- **1. Minutes AGM 2015**
- 2. President's Report
- 3. Financial Report
- **4. Life Membership Motion:** To accept Alison Boyd as a Life Member for services to the HGV.
- 5. Election of office bearers and committee
- 6. General Business

Meeting Closed:

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See page U9, cat. no. UM-WBG



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See page U5, cat. no. UM-EC2800



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HISTOLOGY GROUP OF VICTORIA INC 2015 AGM MINUTES

Thursday 12th November 2015

Peter MacCallum Cancer Centre 7 St Andrews Place, East Melbourne

Opened 6:45pm

Apologies:

None

Present:

The meeting register lists all members present at the meeting which indicates

that the meeting was quorate.

Previous Minutes:

It was moved and seconded that the minutes of the Annual General Meeting held on the 15th November 2014 be accepted as a true and accurate record.

Kerrie Scott/Mark Bromley. Motion Carried

President's Report (Adrian Warmington):

The President's Report was presented to the meeting highlighting the events of the year

Treasurer's Report (Mark Bromley):

Net Income \$8446.46 Total Equity \$59259.32

The financial statements and annual statements in accordance with Schedule 1 Regulation 15 of the *Associations Incorporation Reform Act 2012* were presented at the meeting. It was moved and seconded to accept the financial reports. Adrian Warmington/Kerrie Scott. **Motion Carried**



Org. No. A0035235F

Nominations and Election of Office Bearers and Committee:

The following nominations were received

President Adrian Warmington
Treasurer Mark Bromley
Secretary Vacant

Ordinary Committee

- 1. Elizabeth Baranyai
- 2. Kristy De George
- 3. Maria Flynn
- 4. Kellie Vukovic
- 5. Alison Boyd
- 6. Sue Sturrock
- 7. Meghan Leo
- 8. Yuyin Hoang
- 9. Kerrie Scott-Dowell
- 10. Samantha Arandelovic
- 11. Kellie Madigan
- 12. James Cvetkovski
- 13. Vacant
- 14. Vacant

As nominations did not exceed any of the vacancies, all nominees are automatically elected to the office bearer and committee positions.

Other Business:

None

Meeting Closed 6:53pm



Org. No. A0035235F

"Immunohistochemistry updates and Developments"

Speaker: TBA

Date: Thursday 10th November 2016

Time: 6:00 - 6:45 Refreshments

6:45 – 7:45 Presentation

Venue: Foyer - Level 7 Lecture Theatre B

Peter MacCallum Cancer Centre

VCCC Building

305 Grattan Street, Parkville

(Opposite Royal Melbourne Hospital)

Parking:

- 1) VCCC enter off Flemington Road (\$14 for 1-2 hours)
- Wilson Parking 33 Bedford Street,
 North Melbourne (Pay by credit card at machine & display ticket \$3 after 4pm)
- 3) University of Melbourne Royal Parade Car Park-10 Royal Parade, Parkville (Pay & display - \$8 after 5pm)



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Future Events: 2016

Org. No. A0035235F

12-14 February

Fifth International Workshop in Diagnostic Immunohistochemistry

Venue: Mantra Twin Towns, Coolangatta Tweed Heads Qld/NSW

Thursday 18thst February

Scientific Meeting-RIMT Student Project Presentations

Venue: Peter Mac

Thursday 14th April

Scientific Meeting: Basic Molecular

Venue: Peter Mac

Thursday 16th June

Scientific Meeting: Haematoxylin Blues and other Jazz

Venue: St. Vincent's

Friday 29th July

Trivia night

Venue: Metropolitan Hotel

263 William St.

Melbourne VIC 3000

Thursday 15th September

Scientific Meeting: The New Peter Mac tour

Venue: Peter Mac

September 16-21

NSH Symposium/Convention Longbeach, California USA

September 30- October 2

Histotechnology Society of NSW Histotechnology Group of Queensland Joint State Conference Port Macquarie Panthers

Thursday 10th November

Scientific Meeting/AGM: New Antibodies

Venue: Peter Mac







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