Welcome to another edition of the ASTH newsletter. There is a new addition to our usual content. Many (well maybe two) people are interested in the executive and so we have added a short biography on two members of the council executive giving a brief summary of their interests, and including a particularly unflattering picture by which you are unlikely to recognise them should you meet in a darkened room. In the next edition two further council members will be included.

HAA2012 is now looming close. Don’t forget to book early for the ASTH workshop and meeting, and submit abstracts to both. Details are below.

The ASTH would like to welcome the following members who have joined since the last newsletter:
- Rebecca Adams
- Danny Hsu
- Nina Dhondy
- Joanne Beggs
- Penelope Motum

HAA2012 is now looming close. Don’t forget to book early for the ASTH workshop and meeting, and submit abstracts to both. Details are below.

We would also like to welcome those new members who wish to keep their contact details private.

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- Nina Dhondy
- Joanne Beggs
- Penelope Motum

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- Peter Wood
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2012 is flying by fast and we’re already less than six months to the HAA 2012 Congress to be held in my hometown, Melbourne. It will be held in conjunction with the Asia Pacific Society of Thrombosis & Haemostasis (APSTH) and therefore likely to be bigger than HAA Sydney, 2011 (Sydney-Melbourne rivalry aside). The Local Organising Committee has been working overtime as usual and the official program is due to be published shortly. It goes without saying that the success of the congress depends on your attendance, and I would also like to encourage as many abstract submissions as possible.

The ASTH council has been busy in the first few months of 2012. The Update of the Warfarin Reversal Guidelines was completed and submitted to the Medical Journal of Australia and is currently undergoing peer review.

The ASTH led a written submission to Department of Health and Ageing on the Review of Anticoagulation Therapies in Atrial Fibrillation (also known as the Sansom review) in conjunction with HSANZ and ANZBT. We believe that it provided a very balanced view on the Novel Oral Anticoagulants and there’s a reasonable chance that dabigatran and rivaroxaban will be available on Pharmaceutical Benefit Scheme for the indication of anticoagulation, both warfarin and NOACs, has gained ethics approval at a number of sites and hopes to start accruing cases soon.

The ASTH is exploring an association with the Seminars in Thrombosis and Haemostasis where members can access the journal electronically at a discounted rate and the ASTH might have an opportunity to contribute to the content of the journal. It is a work in progress and I will keep you updated.

Finally, immediate-past president Claire McLintock was short-listed to be on ISTH Council from 2012-2018. It would be marvellous to have an Asia-Pacific representative on ISTH council and I would like to wish her the very best of luck with the ballot.

**Huyen Tran**

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### APTIN UPDATE

The Asia Pacific Thrombocytopenia/Thrombosis Network (APTIN) supported by the ASTH and the Asian Pacific Society on Thrombosis and Haemostasis (APSTH) now has a live website [www.aptin.org](http://www.aptin.org) for ASTH members to access and be involved.

APTIN is an exciting opportunity for haematologists, scientists and nurses from around the Asia Pacific region to collaborate, interact, provide a forum for research and collate and publish data on specific disorders of thrombosis and haemostasis. Two networks are currently being established – The Anticoagulant Reversal and Events Study collaborative (ARES Collaborative) and the Asia Pacific Microangiopathic Thrombocytopenia Network (APMAT Network). They are both close to site initiation and patient recruitment and the APTIN website has information pertaining to both.

The ARES Collaborative is investigating significant haemorrhage or thromboembolic adverse events in people taking oral anticoagulants within Australia and New Zealand over the next 3 years, with a focus on observing management of people on warfarin or the new oral anticoagulants (NOAC) presenting to emergency departments. The ARES Collaborative is gaining momentum with much of the behind-the-scenes work completed. On the 9th March in Sydney, the initial ARES Steering Committee met to discuss the aims and objectives of the study and assured a commitment to participation in gaining relevant data. The protocol has been finalised, the data collection tool accepted, and ethics submission approved at Royal Perth Hospital and a National Ethic Application Form recently submitted by Jenny Curnow from Concord Hospital for sites in Queensland, NSW, Victoria and South Australia. Finishing touches are being made regarding site and patient on-line registration. We would welcome any new sites interested in participating in ARES Collaborative over the next few months.

The second network underway is APMAT, investigating the pathophysiology, diagnosis and treatment of a rare, poorly understood and life threatening condition of Thrombotic Thrombocytopenic Purpura (TTP). The initial Australian and New Zealand APMAT Steering Committee meeting occurred in Melbourne on 23rd March. The International Asia Pacific APMAT Committee will meet at the ISTH SCC meeting in Liverpool in June with the aim of formalising the network for the HAA/APSTH meeting in October in Melbourne. The protocol and data collection tool is being finalised and work on the logistics of blood collection well developed. It is an exciting opportunity for basic science research questions to be addressed in the Asia Pacific region for improved diagnosis and treatment of TTP.

If you required further information and seek involvement in APTIN please contact either Megan Sarson (asth@bigpond.com), Ross Baker (ross@wahaem.com.au) or the APTIN Project Officer, Claire Bell (claire.bell@health.wa.gov.au).
The ASTH Workshop will be held on 27th October. People are busy behind the scenes finalising the program and checking out the best venue within the Melbourne Conference & Exhibition Centre to ensure that delegates and sponsors enjoy another stimulating day of presentations and discussion. Thanks to Banksia, CSL Bioplasma, Grifols, Haematex, Novo Nordisk and Stago who have already committed to supporting the event.

There are two exciting new travel grants available this year. Firstly, the ASTH Beckman Coulter Travel Grant is specifically for ASTH members and will be awarded to the laboratory scientist who submits the best abstract to either the ASTH Workshop or HAA. The award is for $3,000 and will assist with registration for both events, travel and accommodation costs. Our thanks go to Beckman Coulter for their support of this award for the next three years. The deadline for abstract submission isn’t until 2nd July so there’s plenty of incentive and still enough time.

The ASTH International Emerging Investigator Awards have been established to assist investigators who are at the beginning of their research career in the field of thrombosis and haemostasis and who are not residents of Australia or New Zealand, to attend the HAA 2012 meeting, which of course is being held jointly with the Asia Pacific Society of Thrombosis and Haemostasis. Up to six awards will be made and each Award of AS3,000 will contribute towards the cost of travel, registration and accommodation for the meeting. There is no age restriction on the Award. The Awards will be made to the main author of the best eligible abstracts submitted to the HAA2012 ASTH stream. If you collaborate with international colleagues who are eligible please let them know about this great opportunity.

The option of a three year membership subscription has been successful with about one third of eligible members choosing to pay until 2014.

### CAREER SUMMARY

**Dr Joanne Joseph**  
**ASTH Council Member**

**Current position:**
- Staff Specialist, Department of Haematology and Stem Cell Transplantation, St Vincent’s Hospital, Sydney
- Conjoint Senior Lecturer, University of NSW
- Group Leader Haemostasis and Thrombosis Research, Blood Stem Cell and Cancer Research Program, St Vincent’s Centre for Applied Medical Research

**Fields of clinical and research interests/collaborations:**
- Diagnosis and management of patients with inherited/acquired bleeding and thrombotic complications due to platelet disorders
- Optimisation of methodology for platelet-microparticle detection and investigating pathological significance of microparticles in specific clinical settings
- Assessing effects of detergent sclerosants on the haemostatic system
- Involvement with Australasian multi-centre study to improve diagnosis of heparin induced thrombocytopenia

**Current membership:**
- Royal Australasian College of Physicians
- Royal College of Pathologists of Australasia
- Australasian Society of Thrombosis and Haemostasis
- International Society of Thrombosis and Haemostasis
- Haematology Society of Australia and New Zealand
- Australasian College of Phlebology
- Australian Haemophilia Centre Directors’ Organisation (Associate member)
- European Haematology Association

### CAREER SUMMARY

**Huyen Tran**  
**ASTH President**

Dr Tran completed his medical degree at Monash University and his dual fellowships in Clinical & Laboratory Haematology in Melbourne.

He spent two years at McMaster University in Ontario, Canada before returning to Australia to complete his Master of Clinical Epidemiology and join the Haematology Consortium as a senior haematologist.

His focus is on clinical research in haematology with particular interests in thrombotic, bleeding and platelet disorders, and obstetrics haematology.

Dr Tran was previously the Head of Laboratory Haematology at Monash Medical Centre. He was recently appointed as Head of the Haemostasis & Thrombosis Unit and Director of the Haemophilia Centre, at The Alfred Hospital, and elected as President of the ASTH.

He has an interest in medical education and currently oversees the Written Examination, Haematology Section for the Royal Australasian College of Physicians.
ASTH SCIENTIFIC WORKSHOP 2012

Call for Speakers and Posters

The 2012 ASTH workshop will be held all day Saturday October 27th in Melbourne at the Convention Centre.

The program has almost been finalised and registration forms are now on the website.

Paul Harrison from the UK will be talking to us on platelet function tests.

There will be an update on NOACS.

There are still a few times slots available if you have:
1. An interesting case, maybe something to do with Thrombophilia or platelets
2. Weird results you would like to talk about and discuss,
3. A new test or update of a current test
4. A hot topic

Contact me immediately if you’re interested in being included in the program.

Morning tea, lunch and afternoon tea is included as well as a sundowner from 4.30pm to 6pm.

Registration for the workshop is separate from the HAA.

We would like to call for posters especially from young scientists. These will be displayed next to the trade and prizes will be awarded at the end of the day. Please send me the title of your poster. Posters displayed at the workshop can also be submitted for the HAA.

Look forward to seeing you at this year’s meeting.

Please let me know if you require further information or assistance.

Grace Gilmore
08 9224 2404
grace.gilmore@health.wa.gov.au

NEW TRAVEL GRANTS FOR HAA 2012

ASTH is pleased to announce two new travel grants for HAA 2012. You must indicate your intention to apply for either grant when you submit your abstract.

The ASTH Beckman Coulter is worth $3,000 to a laboratory based ASTH member.


The ASTH International Emerging Investigator Awards are also worth $3,000 each and will be awarded to non ASTH members resident outside of Australia and New Zealand.


Platelet Workshop

Melbourne Exhibition and Convention Centre
October 27th – 28th, 2012

In conjunction with the 7th Congress of the Asian-Pacific Society of Thrombosis and Hemostasis and HAA 2012 - October 28 to 31, 2012.

TOPICS
• Platelet Biology, Megakaryopoiesis, Animal Models, Functional Analysis, and Platelet Death
  • From Basic Science to Clinical Translation
  • incl. Joint sessions with ASTH/APSTH

SIX INTERNATIONAL and >20 NATIONAL SPEAKERS
Incl. Peter Gross (CAN), Paul Harrison (UK), Bernhard Nieswandt (GER) and Yukio Ozaki (JAP)

+ Free Communication sessions on both days
  Plus Posters and Awards

**NETWORKING AND SOCIAL ACTIVITIES**

Abstracts and Registration Now Open
REGISTRATION – AUS$275 go to

HAA 2012
HSA&NZ ANZSTH ASTH

APSTH
This year’s HAA in Melbourne will host the 7th Congress of the Asian-Pacific Society on Thrombosis and Hemostasis (APSTH), and feature a greatly expanded programme of coagulation medicine and science and satellite symposia.

A particular highlight of the meeting will be the two-day Platelet Workshop commencing Saturday 27th October at the Melbourne Convention Exhibition Centre. The Platelet Workshop stems from a series of successful UK-Japan platelet conferences held over the last decade, most recently at the 2008 APSTH Congress in Singapore.

This year’s Workshop programme has been assembled by platelet experts from Australia, Japan and the UK and aims to cover the latest insights in basic science through to clinical translation. The Workshop will include symposia focussing on real-time thrombus imaging, platelet maturation and apoptosis, the role of platelets and microparticles in infection and inflammation, new animal models of platelet function and clinical studies of novel antplatelet therapies.

Keynote Workshop speakers include Yukio Ozaki (Japan), Paul Harrison (UK), Peter Gross (Canada) and Bernhard Nieswandt (Germany) as well as leading platelet scientists from Australia and Asia.

The Platelet Workshop will run state-of-the-art plenary symposia together with the ASTH Workshop on measuring platelet function (Saturday 27th 1400-1530) and with the combined HAA societies (Sunday 28th 1400-1530) on the clinical impact of platelet disorders.

Platelets will again be centre-stage for the ASTH’s premier event, the Barry Firkin Oration (Sunday 1200-1300), when Prof Ozaki will speak on “Novel platelet functions beyond haemostasis.”

Presentations from young and emerging investigators will be encouraged, with free communication and poster sessions during the main programme.

The Platelet Workshop will be a unique event for local scientists and clinicians, debating the exciting new insights in coagulation science and therapy with a truly world-class faculty. The programme will be of great interest to researchers in coagulation, vascular biology, and cardiovascular disease, to laboratory scientists in coagulation and a wide range of clinicians. Bringing together the diverse “platelet community” for these two days will provide a great opportunity for networking and collaboration, in an informal setting.

Online registration and a call for abstracts will soon be available via the conference website at www.fcconventions.com.au/HAA2012. Registration for the 2-day Workshop is only $275 and includes a riverside social function following the Saturday sessions.

Delegates attending the main HAA/APSTH Congress can also register for the Saturday Workshop sessions for a small additional fee. The Workshop will be held concurrently with the regular ASTH Workshop on coagulation testing and the APSTH Education Programme, also in the main conference venue.

The Melbourne Convention Exhibition Centre is ideally located in Melbourne’s entertainment precinct along the Yarra River, just a short walk from the city centre and a wide range of hotels.

Whether you are a confirmed platelet enthusiast or simply interested in the number one health challenge, cardiovascular disease, the 2012 Platelet Workshop is sure to provide new perspectives and challenge current beliefs.

Don’t miss this unique celebration of the smallest, but most intriguing, blood cell. We look forward to seeing you there!

Dr Chris Ward
Royal North Shore Hospital, Sydney

### UPCOMING MEETINGS

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<tr>
<th>MEETING</th>
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<tr>
<td>ASTH Scientific Workshop</td>
<td>Melbourne 27 October 2012</td>
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| XXIV ISTH Congress with 59th Annual SSC Meeting | Amsterdam, Holland 29 June-4 July 2013 | }
The Global Thrombosis Forum was held in the beautiful city of Barcelona from 2nd to 4th March 2012. Although a pharmaceutical sponsored meeting, the programme was entirely organised by an independent faculty with a high quality of speakers.

The programme was presented in arterial and venous thromboembolic streams, with a focus on clinical practice in the era of novel anticoagulants. Whilst the majority of the audience were cardiologists, 14% of those present were haematologists. With a predicted prevalence of atrial fibrillation in North America at 15 million by the year 2050 the enthusiasm for use of novel oral anticoagulants remains high. Morbidity and mortality remain a major concern to cardiologists and neurologists with a 50% mortality rate within one year of an atrial fibrillation related stroke and a 30 day mortality of 6%. For AF patients 75 years and older the stroke rate at 10 years is 30% and recent data from the ASSERT study indicate a relative risk of 2.5 for ischaemic stroke or systemic embolism if even 6 minutes of atrial fibrillation is documented over a one-month period.

Consequently current ACCP 9 guidelines recommend oral anticoagulation for non-rheumatic AF including paroxysmal AF for those with at least 1 CHADS2/VASC risk factor. With a time in therapeutic range of 70% required for effective warfarin therapy, we are likely to see increasing use of NOACs (Novel Oral Anticoagulants) for stroke prophylaxis in AF. Whilst a cautionary note was made of the Uchino (AHA 2011) meta-analysis of 31,097 patients in whom there was an odds ratio of 1.31 (1.03-1.67) for increased MI rates on dabigatran, the net clinical benefit was still in favour of the NOAC. When selecting patients for anticoagulation, the recommendation is that this is based firstly on stroke risk factors and bleeding risk assessment (HASBLED score – Hypertension, Abnormal renal/liver function, Stroke, Bleeding history, Labile INR, elderly >65y, Drugs or alcohol), followed by individual assessment of other factors to determine choice of agent and dose. Bleeding risk on NOACs was still considered acceptably low with much reference to net clinical benefit. Harry Buller presented a random sample of data from the ROCKET AF study, suggesting that even when antidotes were available for the new agents their use would be rare.

Whilst we are accustomed to having an antidote for warfarin and being able to measure its effect, information on improvement in clinical outcomes is lacking and thus there is no real denominator for these studies. This highlights the importance of the ASTH sponsored ARES collaborative soon to commence across Australia. By prospectively recording the occurrence, management and outcome of bleeding and thrombotic events occurring on both NOACs and warfarin, we should be able to better inform future clinical practice.