Annual Statement 2008/09



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Our Vision

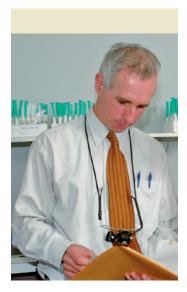
The Skin and Cancer Foundation, through its commitment to research, education and treatment in Dermatology Medicine, strives to attain the standard of "Centre of Excellence", for which it is recognised internationally.

The Foundation provides a base for research into new treatments, whilst addressing current and growing needs of Victorians in every type of skin disease and associated condition.

From unique, highly specialised dermatology services, to education for school children through to health professionals, our commitment is to provide leadership and expertise that will ensure world's best practice and latest breakthroughs in dermatology, both now, and in the future.

Our mission can be summarised as endeavouring to:

- Provide world-class dermatology services and care to the community.
- Contribute to the education in dermatology of medical students, specialist trainees, dermatologists, general practitioners and the community.
- Promote global outcomes by supporting and contributing to dermatology research throughout Australia.





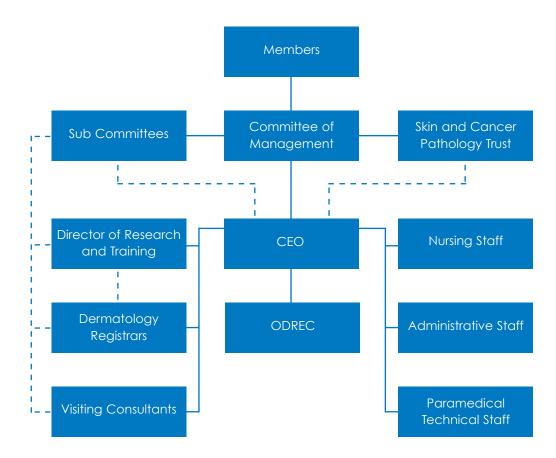




The Skin and Cancer Foundation gratefully acknowledges the patronage of Professor David de Kretser AC, Governor of Victoria.

Governor de Kretser maintains regular updates on the important work of the Foundation and its significance to the Victorian community. In turn this inspires greater confidence in members and staff to continue working towards the Foundation's vision.

Organisational Chart



Corporate Governance



Associate Professor Peter Foley (President)



Dr Mei Mui Tam (Vice President)



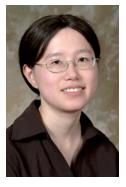
Dr Michael Rich (Treasurer)



Associate Professor Christopher Baker (Immediate Past President)



Dr Chris McCormack (Committee Member)



Dr Michelle Goh (Committee Member)



Ms Kathryn Watt (Committee Member)



Dr Alvin Chong (Committee Member)



Dr Mignon Moyle (Committee Member)



Dr Hugh Roberts (Registrar Representative)



Dr Jim Butler (ExOfficio Member)



Dr Gregory Goodman (ExOfficio Member)



Dr Edward Upjohn (ExOfficio Member)

President's Report



The last 12 months have been a period of consolidation for the Skin and Cancer Foundation. After the tumultuous transition from our old home at 95 Rathdowne Street to our new purpose built facility at 80 Drummond Street, Carlton, we have taken the opportunity over the last year to settle in and ensure we achieve our core goals.

Clinical services at the Skin and Cancer Foundation continue to expand. Each year sees more dermatologists join the clinical team. We now have 48 specialist consultants attending on a regular basis, with some having provided up to 20 years of dedicated service. Special acknowledgment is made of Nicholas Downes on his retirement from practice this year and the great contribution over many years he has made to the Foundation. The oral mucosa continues to provide a valuable service with Jonathan Tversky continuing on, ably receiving dermatological input from Eric Poon and now Carol Burford. The hyperhidrosis clinic team has been joined by Lee Mei Yap, whilst Mignon Moyle has become an integral part of the radiotherapy/Grenz Ray clinic. Diana Tran is busy with the melanoma follow up clinic and Adam Sheridan is sharing his surgical expertise with registrars, whilst providing care

for our patients. After 12 months overseas undertaking a Mohs' micrographic surgery fellowship in the USA, Dr Edward Upjohn has returned to strengthen the long established Mohs' service. Dr Tim Rutherford has returned from 12 months in Western Australia to also join this team. Katherine Armour has enthusiastically joined the phototherapy/biological therapies clinics that now run on Wednesdays, Thursdays and Fridays. With six new fellows, all of whom have spent part of their training at Foundation clinics or as Foundation registrars, joining the ranks in the New Year, it is hoped that this enthusiasm will continue and we will see more young dermatologists joining the team at the Foundation.

One area of considerable change at the Foundation is the addition of further research staff. Jan Campbell, Simon Cumming and Marlene Rennie have moved across from St. Vincent's Hospital. Education, Database Management and epidemiological studies are the main interests of this team. The major projects currently being undertaken are a summative assessment of the antenatal booklet that has been given to the families of each newborn child in Victoria for the last two and a half years and the Australian Psoriasis

Registry. With support from the Australasian College of Dermatologists, Epiderm and industry, the Foundation hosts this latter national web-based service. The pilot project has been completed and we are now seeing a national rollout with education of site staff being conducted by the team. The goal behind the project is to establish the safety and effectiveness of treatments for psoriasis in the Australian population in real world conditions, not the sanitised world of short-term clinical trials. This valuable audit tool will also allow us to look at the co-morbid states that occur in the setting of moderate to severe psoriasis. The research team is also expanding its involvement into other clinical areas. Discussions have taken place to look at database developments and trials for the hyperhidrosis and Grenz Ray therapy clinics.

Dr Rosemary Nixon's
Occupational Dermatology
Research and Education
Centre continues its worldclass research focussing on
contact dermatitis. Dr Jennifer
Cahill, having completed her
dermatology training and
spending time overseas, returns
to expand this unit. Helen
Saunders has also been a
valuable addition to this
unique service.

A move to a new home and an ever increasing number of staff members has seen the employment of Sue Edwards as our front-of-house Administrative Manager and Heather Edmonds as a Human Resources consultant. Together with our Communications Manager, Fiona Gillen, Sue and Heather have overseen the introduction of a number of policies and procedures, essential for workplace harmony in the 21st Century. A recent staff survey has highlighted some of the areas in which the Foundation can continue to make further headway, providing an enjoyable and safe work environment, whilst continuing to focus on clinical service, research and education.

The 2009 Friends of the Foundation Breakfast, held in the Great Hall of the National Gallery of Victoria was another outstanding success. Fiona Gillen is to be congratulated for the work she put in to this project and should be well satisfied with the positive feedback we have received on this event. Ross Oakley provided an entertaining and thought-provoking presentation on his experiences, particularly with regard to the Victorian, and now Australian, Football Leagues. Now that we are happily settled in our

new home, hopefully the Breakfast will again become a permanent fixture on the Foundation's calendar.

The Clinical Trials Department continues to give the Foundation the opportunity to provide new treatments before they are generally available. This helps our patients and also helps the Foundation to raise its profile within the research community.

Considerable time and effort has been dedicated throughout the year to a strategic review of the organisation. Stephen Emmett of Matrix on Board has facilitated meetings focussing on the Foundation's vision, values and mission. The strategic review follows on from an in depth review Professor Robin Marks undertook into skin cancer services at the Foundation. By the time of the Annual General Meeting, a final full day strategic review and planning meeting will have been completed and we will be waiting on the final report mapping what we hope will be a very bright future moving into the next decade.

The Skin and Cancer
Foundation remains Victoria's
centre for post graduate
training in Dermatology and
the focal point for professional

development activities of Fellows of college.

I would like to thank all the clinicians and patients, along with the staff at the Foundation for their support over the last 12 months. The CEO, Joe Mercuri, and Nurse Manager, Jane English, have provided valuable experience and guidance during our period of transition and stabilisation.

The Committee of Management has worked tirelessly this year and I take this opportunity to express my gratitude. In particular I would like to acknowledge Kathryn Watt (our 'outside legal voice') and Hugh Roberts (our registrar representative). As part of our strategic review there are plans to expand breadth and skill set of the Committee of Management.

The future of the Skin and Cancer Foundation looks extremely bright and I hope that further involvement with the Victorian dermatological community, as well as further interaction with outside organisations, will only increase with time.

Associate Professor Peter FoleyPresident, Skin and Cancer Foundation

Professorial Report



Research at the Department of Dermatology at St Vincent's Hospital has undergone dramatic changes in the past 5 years since Robin Marks retired. In response to the changed research funding climate with reduced available 'soft money' from pharmaceutical companies and philanthropic organizations, our focus has shifted away from community education and health services research to laboratory based research.

Laboratory research is more costly and requires greater infrastructure, but ultimately will make competitive research grants through agencies such as the NHMRC and ARC attainable, and secure our long term future.

The key ingredients to competitive research are ideas, facilities, people and collaboration. While our patient interactions feed an abundance of new ideas, with the recruitment of our senior scientists Dr Nick Rufaut from Ag Research in New Zealand, and Ass Prof Leslie Jones from CSIRO and our steady stream of PhD candidates we have the people. Until our laboratory is delivered in 2011 we rely heavily on our collaborators for

use of their facilities. Of course this exposes us to different disciplines, new technologies and new ideas.

We have had enormous success in our research in the past years, with Leona Yip (PhD candidate) discovering 2 new gene loci for female androgenetic alopecia, Dr Hope Dinh (MD candidate) proving that both the epithelial and mesenchymal stem cells within the hair follicle display relative immune privilege and have the potential to be 'universal donor stem cells'. Dr Anousha Yazdabadi (PhD candidate) discovered the pathomechanism of the Ludwig pattern of hair loss seen in female androgenetic alopecia and also explained why miniaturization of hair follicles is reversible in alopecia areata but not androgenetic alopecia. Mr Martin Lee (Science Honours) discovered that hair stem cells can be injected intravenously and then home to injured muscle and undergo myogenic differentiation. This is a far superior delivery mechanism as cells disperse diffusely across the injured tissue. Mr Ryan De Cruz discovered a new genetic mechanism for monilethrix that has led to a new field of

research trying to ascertain why there are so many keratin intermediate filaments and how we switch between them.

Perhaps the main highlight was the publication earlier this year in Nature Genetics and the accompanying editorial entitled Hair, lost in translation earlier this year that was a continuation of Jack Green PhD work on Marie Unna Hereditary Hypotrichosis (MUHH). Identification of the MUHH mutation led to the discovery of an new mechanism of genetic disease involving non-coding DNA influencing protein translation in the cytoplasmic ribosomes.

Accompanying this research has been a number of review articles in high impact Dermatology and general medical journals as well as book chapters in key Dermatology Textbooks such as Rook, Bologna and also the Oxford Textbook of Medicine. My textbook Minor Surgery won the BMJ book prize for the best book in 2008 and sold over 10,000 copies worldwide. 2009 also saw the release of another best seller - the 3rd edition of the Therapeutic Guidelines - Dermatology.



Overall in 2008/9 there were 26 publications with a cumulative impact factor of 90, making this past year the best yet in the Department's 15 year history. Next year we will host the World Congress of Hair Research in Cairns. This is a major scientific event that will bring together over 500 delegates from all over the World. Plenary speakers include Nobel Laureate Peter Doherty,

Ralf Paus, George Cotsarelis, Emi Nishimura and myself.

Despite our successes, our future is not secure. We require more than ever the support of the General Dermatology Community to overcome the threats challenges and obstacles to the sucess of Dermatology Research.

Professor Rodney Sinclair

CEO Report



Overview

The 2008/09 financial year has been very hectic; with the conclusion of the refurbishment works at 80 Drummond Street and the relocation from 95 Rathdowne Street (both significantly delayed) presented a number of challenges for the Management Group.

Unfortunately a number of issues delayed construction completion by eight weeks and the three week relocation plan had to be reduced to three days. The support, co-operation and "can do attitude" shown by our staff members was exemplary and reinforced my belief of their commitment to the Foundation. I would like to take this opportunity to thank all the staff for their contributed in the seamless transition with no noticeable change to the Foundation's high quality clinical services provided.

Operational Review

The Audited accounts show a loss of \$486,000 this year compared to a profit of \$2,895,000 last year. Once you deduct the profit on sale of Rathdowne Street (\$2,885,000) the movement is only \$496,000. The major items that contributed to this increase loss were:

- Timing of loan facility fee payments
- Increase in depreciation expense for new assets
- One off costs related to the establishment of the new facility
- Additional labour required due to the relocation
- Increase in stock to service additional capacity

The joint venture with Melbourne Pathology has continued to grow and distribution this year has increased by 4.2% compared to last year.

The redevelopment of the 80 Drummond Street site was completed in September 2009, due to construction delays clinics were rescheduled a number of times which reduced income, which resulted in increased expenditure to maintain patient service levels.

Operational costs at 80 Drummond Street are higher than 95 Rathdowne Street which reflects the increase in capacity and cost to run a state of the art facility we now enjoy.

Conclusion

When you consider the extraordinary events that occurred in 2008/09 you can only feel proud and privileged to work with such a group of dedicated individuals with a common goal. The future direction and structure of the Foundation needs to be reassessed and must incorporate both commercial and professional considerations in a balanced manner; this is currently being undertaken by the Committee of Management.

To all those that contributed over the past year, thank you for a job well done.

Joe Mercuri

Chief Executive Officer

Clinical Report



We are very pleased to announce a number of new consultants and clinical sessions that commenced in 2009:

Dr Mignon Moyle joined us working with Radiotherapy/ Grenz ray therapy consultants; Dr's James Butler and Michael Webster, on a fortnightly basis.

Dr Timothy Rutherford, who commenced in February, now provides Mohs' micrographic surgery sessions on a monthly basis. Dr Rutherford completed his fellowship in advanced Cutaneous Surgery, Mohs' micrographic surgery and laser surgery in Perth 2008.

In addition to the Mohs' surgical team, Dr's Greg Goodman and Phil Bekhor, we welcomed Drs Vanessa Morgan and Edward Upjohn back to the team. Dr Morgan has resumed not only Mohs' micrographic surgery but also hyperhidrosis clinical services on a monthly basis.

Dr Katherine Amour started consulting with Associate Professor Peter Foley at the Wednesday PDT/Phototherapy clinics.

Dr Adam Sheridan joined the team in March, providing monthly surgical clinics.
Dr Sheridan brings with him a wealth of surgical experience, having undertaken an ACD and American College of Mohs' Surgery accredited fellowship in advanced

cutaneous surgery, Mohs' micrographic surgery and laser surgery (Perth 2004). The additional service at the SCF also provided the opportunity for immediate surgical management of patients, particularly those attending the Transplant clinic. Dr Michelle Goh returned from the UK to assist Dr Alvin Chong with the Transplant clinic.

We are also very pleased to welcome back Mr Dean White who joins our wonderful Plastic and Reconstructive Surgery team.

Professor Rodney Sinclair ceased providing consulting services at the Skin and Cancer Foundation. Professor Sinclair has been a valued contributor to the Foundation, from his work as both a committee member and former past president of the Foundation, to his clinical work and registrar training in the Hair and Nail clinics. Nail clinics continue to be conducted on a monthly basis, with Dr's Anne Howard and Con Dolinitis consulting. Hair clinic services continued to be conducted on both a monthly basis, with Dr Jack Green consulting, and a scheduled clinic every six weeks with Dr's Jill Cargnello and Annette Callan.

Dr Stefanie Marcella commenced work in February as our Medical Officer. Dr Marcella assists Associate Professor Peter Foley with Trial and Research projects and clinical.

We especially wish to acknowledge the wonderful contribution to the Skin and Cancer Foundation of Founding Member Dr Nick Downes. Nick ceased clinical services at the Skin and Cancer Foundation in August 2009. Dr Carol Burford has now joined the Foundation and is continuing the Oral Mucosal clinic with Dr Jonathan Tversky.

Nursing staff successfully sourced funding and external expertise in the redevelopment of the Australian Dermatology Nurses Association (ADNA) website and rebranding of the organization. The aim of the redevelopment was to increase educational and support opportunities, with the site launched at the Annual Conference held at Broadbeach.

Trial staff Mary Pym and Christine Veljanoski have also launched their own website this year; Clinical Trials Connect (CTC). The concept of the site is aimed at providing exposure of clinical centres and informing interested members of the public. I would like to take this opportunity in thanking all staff for the wonderful support and quality of service provided to patients and colleagues over the year.

Jane English

Nurse Unit Manager

ODREC Report



2008/09 has marked another successful year for ODREC. The momentum from the period when we were funded by the federal Department of Health and Aged Care still continues, with a number of research projects in various stages of publication. Recent funding sources have included Epiderm, formerly known as the ADREF (Australasian Dermatology Research and Education Foundation) and fees from corporate consultancies. These included investigating skin rashes in an aluminium smelter, and several cases of rashes to clothing.

This year we welcomed Dr Yi Shi Wang, a dermatologist from Singapore, who was keen to further her interest and studies in contact dermatitis with a 6 month traineeship at the Skin and Cancer Foundation. ODREC continues to collaborate with previous colleagues, including Dr Danny Slowdownik who returned to Israel in July 2007 and continues to co-author a number of publications. Danny also manages to represent Israel in international bowls!

We were thrilled that Dr Jenny Cahill, ODREC research fellow in 2004 who passed her FACD exams in 2008, was awarded a Florence Bequest from the Australasian College of Dermatologists and spent several months overseas furthering her interest in contact and occupational dermatology at a number of overseas centres, including Toronto, Heidelberg, Malmo and Manchester. She was also awarded the Paul Eddington scholarship from the Skin and Cancer Foundation, enabling her to attend a meeting on botanical dermatology in Denmark. Jenny returned to participate in her first Occupational Dermatology Clinic in October 2009. She was also awarded a traineeship from Epiderm enabling her to perform a day a week of research at ODREC for several months while we explore further sources of continuing funding for her. Dr Rosemary Nixon was part of a successful NHMRC public health capacity building grant, based at the Monash Centre for Occupational and Environmental Health. In 2010, Drs Jenny Cahill and Helen Saunders will assist Rosemary by alternating Occupational Dermatology clinics. It is truly wonderful to have these former research fellows on board as part of the team!

Jenny and Rosemary caught up with former ODREC colleague Dr Jason Williams

at the Occupational and **Environmental Exposures** of the Skin meeting in June 2009 in Edinburgh. Jason now heads the Contact Dermatitis Investigation Unit at the Royal Salford Hospital, Manchester. Rosemary was on the organising committee of this meeting and presented two 90 minute workshops on occupational contact dermatitis. Other presentations included at the American Contact Dermatitis Society and the Australasian College of Dermatologists' Annual Scientific Meeting. Remaining presentations this year include a Victorian WorkSafe symposium on occupational disease and as an invited speaker to the 17th International Contact Dermatitis Society meeting/ 10th Asia-Pacific Environmental and Occupational Dermatology Symposium in Kyoto in November 2009, with three lectures planned.

Dr Tessa Keegel, an
epidemiologist who previously
worked at ODREC, was
recently awarded her PhD by
the University of Melbourne.
Her studies were co-supervised
by Dr Rosemary Nixon, together
with Associate Professors
Shyamali Dharmage, Tony
LaMontagne and Dr Bircan

Erbas. Tessa's work was based on worker participation in occupational health and safety and her interest in this area started at ODREC when performing a study on the adequacy of material safety data sheets in the workplace. She retains an interest in occupational dermatitis while has started post-doctoral studies at the Baker Institute.

Dr Rosemary Nixon was recently honoured with membership of the International Contact Dermatitis Society, formerly known as the ICDRG. This is the premier international body for patch testing which meets regularly at conferences. Other members of this illustrious group include Professors Howard Maibach (USA), Jean-Marie Lachapelle (Belgium), An Goosens (Belgium), Magnus Bruze (Sweden), Klaus Andersen (Denmark), Thomas Diepgen (Germany), Iris Ale (Uruguay), Hee Chul Eun (Korea), Kayoko Matsunaga (Japan), Denis Sasseville (Canada) and Peter Elsner (Germany).

ODREC has started our Contact Allergen Bank Service. This involves preparation of patch tests, prepared to order, to facilitate patch testing throughout Australia. If you would like further details, contact Allison Muis on 9623 9402. We are still undertaking an update of our patient information sheets; however our website has been updated and will shortly go live. Check it out at www.occderm.asn.au soon!

The members of the patch testing fraternity, including Drs Adriene Lee, Helen Saunders, Bruce Tate, Mei Tam and now Jenny Cahill, meet regularly at journal clubs and we welcome Dr Shueh-Wei Lim to our group. Wei passed his FACD exams this year and will complete his physician training next year at the Immunology Department, RMH. We look forward to further collaborations.

Once more we acknowledge the support of the Skin and Cancer Foundation and especially the achievement of moving to our new premises. We have enjoyed our new home.

Finally researcher, health promotion expert and Occupational Dermatology Clinic nurse, Mandy Palmer and her husband Damien welcomed their second child, Archie in August! Mother,

father, big sister Lucy are all extremely well. Mandy has vast experience and enthusiasm for what we do and manages to commute from Bendigo twice a week. I would like to acknowledge her huge commitment and look forward to her return from maternity leave in February.

Dr Rosemary Nixon

Clinical Trials Report



2009 has been another busy year for the Clinical Trials Department. Dr Stefanie Marcella has joined our long term clinical trials nurses/ nurse coordinators Christine Veljanoski and Mary Pym. Stefanie takes over from Nathan Curr who has opted to move from Dermatology to Anaesthesia. The Skin and Cancer Foundation remains a centre that is approached by industry to act as a centre for a number of clinical trials. With the move in to new premises at 80 Drummond Street, we now have a dedicated area for clinical trials with office space, a blood taking (pathology)/ examination room and designated secure storage for case files and investigational products.

Over the last year, we have participated in trials looking at oral, subcutaneous and intravenously administered agents for psoriasis. This condition is the focus of a lot of new developments globally. Post-marketing studies looking at effectiveness, safety and modification of treatment regimens, along with trials for new novel agents has allowed us to provide additional services for our patients.

At the time of going to press, the Foundation is actively recruiting for a trial researching a new oral and a new topical treatment for acne in Australia. There has not been a lot of change in the treatment of this disorder of recent times but hopefully we will see additional therapies prove to be effective and safe in this condition which occurs at a crucial time in an individual's development.

Following on from a short term study for a new topical therapy in rosacea, the Foundation was one of a number of international sites involved with a 12 month study examining the safety, as well as effectiveness, of a new topical therapy for rosacea. It will be interesting to see the outcome of this novel approach to another common condition.

Looking toward the future, the prospects for clinical trials are very bright. We hope to expand the service we currently offer and hopefully we will be involved in an ever increasing number of trials for new therapeutic agents, as well as new indications for established treatment options. This allows us to be at the forefront of therapeutic

intervention, providing potential treatments to our patients in advance to these agents coming on to the market.

This year has also seen the publication of a number of the trials that the Foundation has been involved with over the last few years. This has helped to raise the profile of the Foundation as a centre of excellence and quality research.

I would like to thank Christine, Mary and Stefanie for their dedication and hard work over the last year. If things go to plan, they will only become busier in the years ahead.

Associate Professor Peter Foley

Melbourne Skin Pathology Report



Operations

Melbourne Skin Pathology experienced another year of steady growth in 2008/09, processing more than 33,500 biopsies. This increase in referrals is testimony to the quality of our dermatopathology services and reflects the continued hard work and dedication of our Dermatopathologists.

This solid financial performance continues to underpin the ability of the Skin and Cancer Foundation to fund its treatment, teaching and research activities.

Pathologists

Reporting pathologists of skin and cancer cases continue to be guided by Dr Graham Mason of Melbourne Pathology. Over the past year he was well supported by Drs Sant Khan, Sandy Darling, Vanessa Fahey and Andrew Ryan. We also welcomed Drs Jill Magee and Saurabh Prakash to the team of reporting pathologists. However, it is with regret that Dr Andrew Ryan will be leaving us.

Teaching

Our specialist team continues to provide expert training to Victorian Dermatology Registrars at the Skin and Cancer Foundation. In the coming year, this will be led by Drs Sandy Darling and Jill Magee and supported by Drs Vanessa Fahey and Saurabh Prakash.

Sue Coloe – Senior Scientist in Mycology also provides all Dermatology Registrars with Mycology and Arthropod identification teaching.

As in previous years,
Dermatopathologists from
Melbourne Skin Pathology
continue to be involved in
presenting histopathology
cases at the College of
Dermatologist Clinical
meetings.

Value Added Service

In addition to dermatopathology reporting, Melbourne Pathology also provides a broad range of tests for the reporting of skin conditions and management of patients' conditions. These reports include Chemical, Haematological and Microbiological investigations.

Melbourne Skin Pathology remains focussed on providing patients in Victoria and Southern New South Wales with exceptional dermatopathology reporting. The joint venture between Melbourne Skin Pathology and The Skin and Cancer Foundation ensures continual quality care to patients with skin disease.

Clinical Statistics

Services provided by The Skin and Cancer Foundation

Description	Number 2008/09	Number 2007/08	Increase (Decrease)	% Movement
Initial Consultation	2,829	3,004	-175	-6%
Review Consultation	4.216	4,392	-176	-4%
Total Patient Consultations	7,045	7,396	-351	-5%
Biopsies of the Skin	989	978	11	1%
Micrographic Surgery (MOH's)	254	207	47	23%
Surgical Excisions (Tumour Removal)	1,341	1,301	40	3%
Plastic Surgery	523	407	116	29%
Total Surgical Procedures	3,107	2,893	214	7%
Cooled Down I'll Delet Teel's	501	5.40	17	0.07
Contact Dermatitis Patch Testing	531	548	-17	-3%
Phototherapy (PUVA)	10,002	11,231	-1,229	-11%
Radiotherapy	3,151	3,244	-93	-3%
Diphenylcyclopropenone (DCP)	127	116	11	9%
Iontophoresis	2,061	1,836	225	12%
Photodynamic Therapy (PDT)	145	191	-46	-24%
Other Clinical Treatments	230	273	-43	-16%
Total Clinical Treatments	16,247	17,439	-1,192	-7%
Medical Photography & Body Mapping	1,125	1,238	-113	-9%
Other Minor Services Provided	150	113	37	33%
Sundry Items	150	155	-5	-3%
·				
Total Other Services Provided	2,474	1,506	968	64%
Total Annual Services Provided	28,873	29234	-361	-1%

80 Drummond Street

The Skin and Cancer
Foundation of Victoria has
now been housed in its new
facility at 80 Drummond Street
Carlton for just over a year. The
move took place over the first
weekend in September 2008.

The development of the new state of the art facility was the culmination of a three year project and it was with a great sense of achievement that all members and staff at the Foundation witnessed its completion; although it was with a heavy heart that we said goodbye to 95 Rathdowne Street, which had been our home for over 10 years.

All at the Foundation have now been enjoying working in the new facility with its new clinical resources, the increase in floor space, and the improved functionality it offers patients and staff.

The Grand Opening

The Skin and Cancer
Foundation's Committee of
Management had for many
years been looking for a
suitable location for the Skin
and Cancer Foundation to
take the next step to assist with
growing demand.

80 Drummond St was formally opened by Professor David de Kretser, AC, Governor of Victoria at 12.30pm Wednesday 12th November 2008. The Skin and Cancer
Foundation gratefully
acknowledges the patronage
of Professor David de
Kretser AC, Governor of
Victoria. Governor de Kretser
maintains regular updates
on the important work of
the Foundation and its
significance to the Victorian
community.

We thank all friends and supporters who have contributed their time, effort and financial support to make this centre of excellence a reality. The new facility heralds an important time in the future work and growth of the Foundation. It will allow us to continue the important work we do in the treatment, research and education of skin disease and skin cancer in Australia.





Dermatology Conference

The Dermatology Conference for General Practitioners 2009 was jointly presented by the RACGP Victorian Faculty and the Skin and Cancer Foundation Victoria

Friday 17th July 2009

The Royal College of Surgeons, Melbourne

18th and 19th July 2009

CQ Functions

113 Queen St, Melbourne City

Conference Director

Dr Douglas Gin Dermatologist

Conference Coordinators

Fiona Gillen
Promotion and Communication
Manager

Skin and Cancer Foundation

Emma Stonham Marketing and Events Coordinator Victoria Faculty

Personnel and Committees

Visiting Consultants

Advanced Surgery

Mr Anthony Penington

Dr Peter Sinclair

Mr Nigel Mann

Mr Terry Wu

Mr Miklos Pohl

Dr Angela Webb

Mr Dean White

Contact Dermalitis Clinic

Dr Bruce Tate

Dr Mei Mui Tam

Dermatology Genital

Dr Anthony Hall

Hair Clinic

Dr Jill Cargnello

Dr Annette Callan

Dr Jack Green

Hyperhidrosis Clinic

Dr Greg Goodman

Dr Vanessa Morgan

Dr Cate Scarff

Dr Lee-Mei Yap

Laser Clinic

Dr Michael Rich

Liaison Clinic

(Psychodermatology)

Dr Josie Yeatman

Dr Melissa Thomas

Melanoma Review Clinic

Dr Michael Rich

Dr Diana Tran

Mohs Surgery

Dr Tim Rutherford

Dr Ed Upjohn

Dr Greg Goodman

Dr Philip Bekhor

Dr Vanessa Morgan

Nail Clinic

Dr Anne Howard

Dr Con Dolianitis

Occupational Dermatology

Dr Rosemary Nixon

Dr Helen Saunders

Dr Jenny Cahilll

Oral Mucous Membrane Clinic

Dr Jonathan Tversky

Dr Eric Poon

Dr Carol Burford

Organ Transplant Clinic

Dr Alvin Chong

Dr Michelle Goh

Phototherapy & PDT

Dr Philip Lane & Chris Baker

Assoc Prof Peter Foley

Dr Ana Catona

Dr Katherine Armour

Radiotherapy

Dr James Butler

Dr Michael Webster

Dr Mignon Moyle

Skin Cancer

Management Clinic

Prof Robin Marks

Assoc Prof Peter Foley

Research Division

Clinical Research & Trials

Assoc Prof Peter Foley

Mary Pym

Christine Veljanoski

Stefanie Marcella

ODREC

Dr Rosemary Nixon

Amanda Palmer

Biologics

Assoc Prof Peter Foley Barbara Radulski

Sue Anderson

Data Management

Assoc Prof Peter Foley

Jan Campbell

Marlene Rennie

Simon Cumming

Foundation Staff

Management

Joe Mercuri (CEO)

Jane English (Nurse Manager)

Sue Edwards

Fiona Gillen (Communications

Manager)

Nursing Staff

Barbara Ashton

Margaret Pardon

Christine Veljanoski

Mary Pym

Noelene Gresswell

Sue Byers

Kerry Nicol

Melissa Angus Patricia Coleman Julie Dwyer Leanne Smith Cathy Kenny Suzette Foster Janine Mullen Kerrie Scoble

Administration Staff

Allison Muis
Elena Theocharides
Nicole Rowley
Jan O'Shannasy
Dimity Pettifer
Jasmine Richmond
Carol Springall
Jessica Benaim

Paramedical/Technical Staff

Robin Smale Kathy Teagno Amy Khong Clyde Riley

Sub-Committees

Medical Advisory Board

Dr Philip Lane (Chairperson)
Dr Philip Bekhor
Dr Anne Howard
Dr John Bemelen
Mr Anthony Penington
Dr Vanessa Morgan
Ms Jane English
Mr Joe Mercuri

Finance

Dr Michael Rich Assoc Prof Christopher Baker Mr Joe Mercuri

Melbourne Skin Pathology

Assoc Prof Chris Baker Dr Michael Rich Mr David Pinkus Dr Andrew Ryan Mr Joe Mercuri

Infection Control

Dr Greg Goodman Dr Philip Bekhor Ms Jane English

Library

Dr Bruce Tate (Chairperson) Prof Rod Sinclair Dr Martin Haskett

Property

Assoc Prof Chris Baker Dr Michael Rich Mr David Payes Mr Joe Mercuri

Research Grants

Dr Philip Lane (Chairperson) Assoc Prof John Kelly Dr Rosemary Nixon Dr George Varigos



Publications and Presentations

Publications and Research Activity Professor Rodney Sinclair 2008/09

Prizes:

First prize 2008 BMA book awards, primary health care category. Fast Facts: Minor Surgery

Conference Convener

Co-convener World Congress of Cosmetic Dermatology, Melbourne 2006 (with Associate Professor Greg Goodman)

Convener, World Congress of Hair Research Cairns, 2010

Publications last 2 years

In 2008/09 Professor Sinclair co-authored eight original research papers with a combined impact factor of 50, five review articles with a combined impact factor of 25, a Medical Textbook awarded the British Medical Association Prize for the Best Medical Textbook of 2008 and a number of book chapters including revised editions of Rooks Textbook of Dermatology and Oxford Textbook of Medicine.

Original articles

(IF = impact factor):

Wilanowski T, Caddy J,
 Ting SB, Hislop NR, Cerruti L,
 Auden A, Zhao LL, Asquith S,

Ellis S, Sinclair R, Cunningham JM, Jane SM.Perturbed desmosomal cadherin expression in grainy head-like 1-null mice. EMBO J. 2008 Mar 19;27(6):886-97. Epub 2008 Feb 21. EMBO. IF 10.08

- 2. Reich K, Sinclair R, Roberts G, Griffiths CE, Tabberer M, Barker J. Comparative effects of biological therapies on the severity of skin symptoms and health-related quality of life in patients with plaque-type psoriasis: a meta-analysis. Curr Med Res Opin. 2008 May;24(5):1237-54. IF=2.92
- 3. Yip L, Horev L, Sinclair R, Zlotogorski A. Atrichia with papular lesions: a report of three novel human hairless gene mutations and a revision of diagnostic criteria. Acta Derm Venereol. 2008;88(4): 346-9. IF= 1.927
- 4. Yazdabadi A, Magee
 J, Harrison S, Sinclair R.
 The Ludwig pattern of
 androgenetic alopecia is due
 to a hierarchy of androgen
 sensitivity within follicular
 units that leads to selective
 miniaturization and a reduction
 in the number of terminal hairs
 per follicular unit.
 Br J Dermatol. 2008 Sep 15.
 IF= 3.503
- 5. Meyer KC, Klatte JE, Dinh HV, Harries MJ, Reithmayer K, Sinclair R, Paus R. Evidence that the bulge region is a site

of relative immune privilege in human hair follicles. Br J Dermatol. 2008 Sep 15. IF= 3.503

- 6. Yaran Wen, Yang Liu, Yiming Xu, Yiwei Zhao, Rui Hua, Kaibo Wana, Miao Sun, Yuanhong Li, Sen Yang, Xue-Jun Zhang, Roland Kruse, Sven Cichon, Regina C. Betz, Markus M. Nöthen, Maurice A. M. van Steensel, Peter M. Steijlen, Daniel Hohl, Marcel Huber, Giles S. Dunnill, Cameron Kennedy, Andrew Messenger, Colin S. Munro, Alessandro Terrinoni, Alain Hovnanian, Amy S Paller, Alan D. Irvine, Rod Sinclair, Jack Green, Leona Yip, Dandan Shang, Qing Liu, Yang Luo, Li Jiang, Hong-Duo Chen, Wilson H-Y. Lo.W. H. Irwin McLean. Chun-Di He, Xue Zhang. Lossof-function mutations of an inhibitory upstream open reading frame in the human hairless transcript lead to a dominant form of genetic hair loss. Nature Genetics 2009; 41 (2):228-33 IF 26.496
- 7. L. Yip, S. Zaloumis, D. Irwin, G. Severi, J. Hopper, G. Giles, S. Harrap, R. Sinclair, J. Ellis. Genewide association study of the aromatase gene (CYP19A1) with female pattern hair loss BJD-2009;161(2):289-94. IF=3.503
- 8. Wen Y, Liu Y, Xu Y, Zhao Y, Hua R, Wang K, Sun M, Li Y, Yang S, Zhang XJ, Kruse R,

- Cichon S. Betz RC. Nöthen MM, van Steensel MA, van Geel M, Steijlen PM, Hohl D, Huber M, Dunnill GS, Kennedy C, Messenger A, Munro CS. Terrinoni A. Hovnanian A, Bodemer C, de Prost Y, Paller AS, Irvine AD, Sinclair R, Green J, Shang D, Liu Q, Luo Y, Jiang L, Chen HD, Lo WH, McLean WH, He CD, Zhang X. Corrigendum: Loss-of-function mutations of an inhibitory upstream ORF in the human hairless transcript cause Marie Unna hereditary hypotrichosis. Nat Genet. 2009 Jun;41(6):762.
- 9. Sinclair RD, Schwartz JR, Rocchetta HL, Dawson TL Jr, Fisher BK, Meinert K, Wilder EA. Dandruff and seborrheic dermatitis adversely affect hair quality. Eur J Dermatol. 2009 Jul-Aug;19(4):410-1. IF=1.294

Reviews (IF = impact factor,):

- 1. Ellis JA, Sinclair RD. Male pattern baldness: current treatments, future prospects. Drug Discov Today. 2008 Sep;13(17-18):791-7. Epub 2008 Jul 24. IF =6.761
- 2. Harries MJ, Sinclair RD, Macdonald-Hull S, Whiting DA, Griffiths CE, Paus R. Management of primary cicatricial alopecias: options for treatment. Br J Dermatol. 2008 Jul;159(1):1-22. IF= 3.503
- 3. McElwee KJ, Sinclair R. hair physiology and its disorders. Drug Discov Today Dis Mech (2008), doi:10.1016/ j.ddmec.2008.04.001. IF= 6.761

- 4. Harries MJ, Trueb RM, Tosti A, Messenger AG, Chaudhry I, Whiting DA, Sinclair R, Griffiths CE, Paus R. How not to get scar(r)ed: pointers to the correct diagnosis in patients with suspected primary cicatricial alopecia. Br J Dermatol. 2009;160(3):482-501 IF=3.503
- 5. Barnetson R, Halliday GM, Sinclair R. The Australasian society for dermatology research: a new player on the team.J Invest Dermatol. 2009 Aug;129(8):1843-4. IF=4.89

Research Books

1. Price C, Sinclair R. Fast Facts-Minor Surgery. 2nd . Health Press Limited. Oxford 2008. (50% personal contribution)

Book Chapters

- 1. Dihn H, Sinclair R, Green J. Structural hair Shaft Disorders. In Hair Diseases: Treatment and Therapy, edited by Amy J. McMichael and Maria K. Hordinsky/CH-11. In Press. (50% personal contribution)
- 2. Tai YJ, Sinclair R. Disorders of the Scalp. In hair Growth and Hair Disorders. Blume-Paytavi, U, Tosti A, Whiting D, Trueb R. Eds. Springer-Verlag. Berlin 2008
- 3. Ogg G, Sinclair RD. Section 23. Diseases of the Skin. In Warrell DA, Cox TM, Firth JD, Benz EJ. Oxford Textbook of Medicine, Fifth Edition. Oxford University Press. In Press. (20% personal contribution)

- 4. Messenger A, Sinclair R, De Berker D. Hair disorders. In: Champion, Burton, Burns, Breachtnach. Rook/ Wilkinson/Eblings. Textbook of Dermatology. Blackwell Science. Oxford. In Press (33% personal contribution)
- 5. Sinclair R. Hair Disorders.Therapeutic guidelines:Dermatology. 3rd Edition.Therapeutic guidelines Limited.2009. (Multi-authored booklet).(80% personal contribution)
- 6. Sinclair R. Nail Disorders.
 Therapeutic guidelines:
 Dermatology. 3rd Edition.
 Therapeutic guidelines
 Limited. 2009. (Multi-authored booklet) (80% personal contribution)
- 7. Sinclair R. Skin Biopsies.
 Therapeutic guidelines:
 Dermatology. 3rd Edition.
 Therapeutic guidelines Limited.
 In press. (Multi-authored booklet). (50% personal contribution)

Case Reports (personal contribution)

- 1. Yip L, Mason G, Pohl M, Sinclair R. Successful surgical management of lipoedematous alopecia. Australas J Dermatol. 2008 Feb;49(1):52-4.
- 2. Dinh HV, Sinclair RD, Martinick J. Donor site dominance in action: transplanted hairs retain their original pigmentation long term. Dermatol Surg. 2008 Aug;34(8):1108-11. Epub 2008 May 28

Publications and Presentations

- 3. Yip L, Ryan A, Sinclair R. Squamous cell carcinoma arising within folliculitis decalvans. Br J Dermatol. 2008 Aug;159(2):481-2. Epub 2008 May 28. No abstract available.
- 4. Yazdabadi A, Green J, Sinclair R. Successful treatment of female-pattern hair loss with spironolactone in a 9-year-old girl.

Establishment of a Research Laboratory

The unit completed a transition in early 2009 with the Dermatology epidemiology and clinical research group led by Peter Foley moving across to the Skin and Cancer Foundation. All existing projects of the unit were completed.

The Department has subsequently recruited 3 post-doc scientists engaged in fundamental laboratory research.

Current staff in the research unit include:

- A/Prof Leslie Jones PhD.
 DEFT Biochemist and structural biologist. Prof Jones undertakes hair research.
- 2. Dr Nick Rufaut PhD, Senior Research Fellow. 1.0EFT. Dr Rufaut undertakes adult stem cell research, including homing

- Dr Allan Nixon PhD, Senior Research Fellow. 1.0 EFT.
 Dr Nixon undertakes adult stem cell biology research
- 4. Dr Alvin Chong, Consultant Dermatologist and Senior Lecturer. 0.2 EFT.Dr Chong undertakes clinical research in skin cancer education and prevention.
- 5. Dr Jack Green, Consultant Dermatologist. 0.2 EFT.Dr Green undertakes gene discovery work in single gene disorders of Hair Growth.
- 6. Dr Azar Asgari. PhD candidate. Dr Asgari is undertaking research on stem cell plasticity
- 7. Dr Anousha Yazdabadi. PhD candidate. Dr Yazdabadi is undertaking research on hair follicle biology and treatment of female pattern hair loss
- 8. Dr Leona Yip.
 PhD candidate. Dr Yip is
 undertaking gene discovery
 research in Female balding
 and investigating epigenetic
 modification
- Dr Hope Dinh.
 MD candidate. Dr Dinh is undertaking research on hair follicle immunobiology
- 10. Mr Martin Lee, Science Honors Candidate undertaking research on stem cell homing

- 11. Mr Ryan De Cruz, B Med Sci student undertaking research on gene discovery in monilethrix
- 12. Ms Stephanie Tizi, B Med Sci student undertaking clinical research in infantile eczema.
- 13. PhD students commencing in 2010 within the Department of Dermatology: Dr Sherine Fernando, Dr Farshad Abedi.

Research Staff based outside of the Research Unit

14. Associate Professor Peter Foley. (0.3 EFT). A/Prof Foley undertakes sponsored clinical trials, community education programs, biologic research and pharmaceutical advisory board activity. Professor Foley is based at the Skin and Cancer Foundation.

Honorary Appointments

- 15. Dr Rosemary Nixon
 Honorary Senior Lecturer and
 Consultant Dermatologist
 (0.4 EFT). Dr Nixon undertakes
 occupational dermatology
 and contact allergy testing
 and is based at the Skin and
 Cancer Foundation of Victoria
- 16. A/Prof Damian Jolley. Honorary Fellow. Prof Jolley is an epidemiologists and biostatistician. He is based at Deakin University.

Other Research Activity

Postgraduate Teaching: Over the past 2 years, Professor Sinclair co-supervised 3 PhD, 1 MD and 1 Masters (H1 awarded) and 2 Bachelor of Medical Science students (1 awarded H1) for the University of Melbourne. This has involved conceptualization of the project, providing salary support to the students (including top up salary for PhD scholarships), obtaining research funds, assistance with ethics applications, grant applications, supervision of research, establishing collaborations with external laboratories assistance with publications and preparation of thesis.

In 2010 2 new PhD students will commence in the Department of Dermatology and Professor Sinclair will co-supervise 1 additional PhD student through the Faculty of Engineering at the University of Melbourne and 1 through RMIT University.

In addition to his involvement as principle researcher and lead clinician in a number of phase I, phase II and phase III clinical research trials conducted at the Nucleus network on the Alfred hospital campus, and a number of investigator initiated projects, a list of research grants obtained in the past 4 years is below.

1. Dr Anousha Yazdabadi (Funded by St Vincent's hospital Research Endowment Fund).

- Dr Anousha Yazdabadi (Funded by University of Melbourne)
- 3. Potential of cultured human dermal papilla cells to differentiate in vitro into cardiomyocytes (Funded by Cass Foundation)
- 4. Markers of androgen action, genetic variations and cancer risk 2006 (Fnded by NHMRC)
- 5. CD39 null mice: a new mouse model of alopecia areata 2006 (Funded by National Alopecia Areata Foundation US)
- 6. An intervention to reduce the prevalence and impact of asthma occurring in association with atopic dermatitis through improved skin care in infants and young children A pilot study.2007 (Funded by F Bauer Research Fund)
- 7. Gene discovery in Monilethrix in Tasmania. 2007 (Funded by Scientific Research Fund Australasian College of dermatologists)
- 8. HLA G expression in hair follicles affected by alopecia areata. (Funded by National Alopecia Areata Foundation. 2008)
- 9. Investigation of androgen receptor polymorphisms in female hair loss (Funded by St Vincent's hospital Research Endowment Fund 2008)

10. St Vincent's Hospital Tissue Bank (Funded by St Vincent's hospital Research Endowment Fund 2008).

In March 2009, three applications were submitted to the NHMRC seeking project funding. While initial feedback has been positive, a decision is not expected until November. Over time it is anticipated that the principle source of research funding for laboratory based dermatology research will be the NHMRC. This is a competitive process, and a series of strategies are being implemented to achieve this goal.

ODREC: 2008/09

Research papers

- 1. Slodownik D, Lee A, Nixon R. Irritant contact dermatitis: a review including illustrative cases from our clinic. Australas J Dermatol 2008; 49: 1-11.
- 2. Williams JDL, Lee AYL, Matheson M, Frowen KE, Noonan A and Nixon RL. Occupational contact urticaria: Australian data. Br J Dermatol 2008; 159: 125-131.
- 3. Slodownik D, Williams J, Frowen K, Palmer A, Matheson M, Nixon R. The additive value of patch testing with patients' own products at an occupational dermatology clinic. Contact Dermatitis 2009; 61: 231-5.

Publications and Presentations

- 4. Moyle M, Keegel T,
 Dharmage S, Frowen K,
 Nixon RL. Epidemiology
 of occupational contact
 dermatitis: a systematic review.
 International J Dermatol 2009;
 48: 571-578.
- 5. Nixon R. An Australian dermatologist's perspective on latex allergy and an update on latex use in the operating room. Japanese J Latex Allergy 2008; 12: 1-14.
- 6. Curr N, Keegel T, Dharmage S, Saunders H, Nixon R. The validity and reliability of the occupational contact dermatitis disease severity index. Contact Dermatitis 2008; 59: 157-164.
- 7. Borchard K, Nixon R.
 Hyaluronidase allergy: a
 rare cause of periorbital
 inflammation after ophthalmic
 surgery. Accepted for
 publication, Australas J
 Dermatol.
- 8. Keegel T, Erbas B, Dharmage S, Fletcher AS, Cahill J, Sakata S, Nixon RL, LaMontagne AD. Are material safety data sheets (MSDS) sensitizer warnings protective against sensitization? Submitted to Contact Dermatitis.

9. Curr N, Matheson MC, Dharmage S, Nixon R. Does the Occupational Contact Dermatitis Disease Severity index correlate with quality of life in patients with occupational contact dermatitis of the hands? Submitted to Contact Dermatitis

Presentations at National/ International Meetings – Dr Rosemary Nixon

- 1. Latex allergy: a clinician's perspective and update on latex use in the operating room. Japanese Latex Allergy Association, Nagano, Japan, July 2008
- Prevention of occupational dermatitis. WorkSafe Victoria, November 2008
- 3. Multiple factors contribute to occupational dermatitis. American Contact Dermatitis Society, San Francisco, March 2009.
- 4. Contact allergen bank
 Australia: Introducing a new
 patch testing service to
 Australian dermatologists.
 Annual Scientific Meeting,
 Australasian College of
 Dermatologists, Gold Coast,
 May 2009

- Contact dermatitis pot pourri, Annual Scientific Meeting, Australasian College of Dermatologists, Gold Coast, May 2009
- 6. Clinical cases from Australia and Canada. Workshop at the 4th Occupational and Environmental Exposure of the Skin to Chemicals conference, Edinburgh, June 2009.
- 7. Preventing contact dermatitis. Workshop at the 4th Occupational and Environmental Exposure of the Skin to Chemicals conference, Edinburgh, June 2009.

Skin and Cancer Foundation Inc.

Financial Statements

Committee's Report

Your committee members submit the financial report of the Skin and Cancer Foundation Inc. for the financial year ended 30 June 2009.

Committee Members

The names of committee members throughout the financial year and at the date of this report are:

Associate Professor Peter Foley – President (appointed November 2008)

Associate Professor Christopher Baker

Dr Gregory Goodman (resigned November 2008)

Dr Christopher McCormack

Dr Michael Rich - Treasurer

Dr Mei Tam – Vice President

Ms Kathryn Watt

Dr Vanessa Morgan (resigned November 2008)

Mr David Payes (resigned November 2008)

Dr Alvin Chong

Dr Mignon Moyle (appointed November 2008)

Dr Michelle Goh (appointed November 2008)

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

Principal Activities

The principal activity of the association during the financial year was medical treatment, research and training.

No significant change in the nature of these activities occurred during the year.

Significant Changes

No significant changes in the state of affairs of the association occurred during the financial year.

Operating Result

The loss after providing for income tax amounted to \$486,134. (2008: Profit \$2,895,362).

Likely Developments

The operations of the association and the expected results of those operations in future financial years are not foreseen to change significantly.

Environmental Regulation

The association's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a state or territory.

Dividends

No dividends were paid or declared during the financial year.

Legal proceedings

No person has applied for leave of Court to bring proceedings on behalf of the association or intervene in any proceedings to which the association is a party for the purpose of taking responsibility on behalf of the association for all or any part of those proceedings.

The association was not a party to any such proceedings during the year.

Signed in accordance with a resolution of the Members of the Committee:

Associate Professor Peter Foley

Dr Michael Rich

Dated this 21st day of October 2009

Income Statement

	Economic Entity		Parent Entity	
	2009	2008	2009	2008
	\$	\$	\$	\$
Revenue	2,775,122	2,547,258	3,761,920	3,550,313
Other Income	-	2,885,291	-	2,885,291
Employee benefits expense	(2,338,104)	(1,858,068)	(2,338,104)	(1,858,068)
Depreciation expenses	(297,526)	(67,939)	(297,526)	(67,939)
Impairment of property, plant and equipment	-	(210,562)	-	(210,562)
Transport costs	(7,973)	(6,902)	(7,973)	(6,902)
Advertising	(4,911)	(2,323)	(4,911)	(2,323)
Other expenses	(1,599,539)	(1,394,448)	(1,599,539)	(1,394,448)
Share of net profits of associates				
and joint ventures	986,797	1,003,055	-	-
Profit/(loss) before income tax expense	(486,134)	2,895,362	(486,134)	2,895,362
Income tax expense	-	-	-	-
Profit/(loss) attributable to the members				
of the parent entity	(486,134)	2,895,362	(486,134)	2,895,362

Balance Sheet

	Ecor	Economic Entity		Parent Entity	
	2009	2008	2009	2008	
	\$	\$	\$	\$	
CURRENT ASSETS					
Cash and cash equivalents	1,046,974	5,847,539	645,376	5,161,043	
Trade and other receivables	320,334	380,214	4,103,557	4,142,286	
Financial assets	-	-	10	10	
Other current assets	25,293	4,349	25,293	4,349	
TOTAL CURRENT ASSETS	1,392,601	6,232,102	4,774,236	9,307,688	
NON CURRENT ASSETS					
Property, plant and equipment	11,386,832	7,945,302	11,386,832	7,945,302	
TOTAL NON CURRENT ASSETS	11,386,832	7,945,302	11,386,832	7,945,302	
	11,000,002	7,7 10,002	11,000,002	7,7 10,002	
TOTAL ASSETS	12,779,433	14,177,404	16,161,068	17,252,990	
CURRENT LIABILITIES					
Trade and other payables	552,323	1,282,767	552,323	1,271,228	
Short term provisions	94,658	62,127	94,658	62,127	
TOTAL CURRENT LIABILITIES	646,981	1,344,894	646,981	1,333,355	
NON CURRENT LIABILITIES					
Trade and other payables	1,157,915	1,388,615	4,539,550	4,475,740	
Financial liabilities	4,500,000	4,500,000	4,500,000	4,500,000	
Long term provisions	79,851	63,075	79,851	63,075	
TOTAL NON CURRENT LIABILITIES	5,737,766	5,951,690	9,119,401	9,038,815	
TOTAL LIABILITIES	6,384,747	7,296,584	9,766,382	10,372,170	
			.,,		
NET ASSETS	6,394,686	6,880,820	6,394,686	6,880,820	
EQUITY					
Retained Earnings	6,394,686	6,880,820	6,394,686	6,880,820	
TOTAL EQUITY	6,394,686	6,880,820	6,394,686	6,880,820	

Statement of Changes in Equity

	Retained	Asset	
	Earnings	Revaluation	
		reserve	Total
	\$	\$	\$
Economic Entity			
Balance at 1 July 2007	3,291,168	694,289	3,985,457
Transfer of asset revaluation reserve to retained earnings			
on sale of asset	694,289	(694,289)	-
Profit attributable to members of the parent entity	2,895,363		2,895,363
Balance at 30 June 2008	6,880,820	-	6,880,820
Profit attributable to members of the parent entity	(486,134)		(486,134)
Balance at 30 June 2009	6,394,686	-	6,394,686
Parent entity			
Balance at 1 July 2007	3,291,168	694,289	3,985,457
Transfer of asset revaluation reserve to retained earnings			
on sale of asset	694,289	(694,289)	-
Profit attributable to members of the parent entity	2,895,363	-	2,895,363
Balance at 30 June 2008	6,880,820	-	6,880,820
Profit attributable to members of the parent entity	(486,134)	-	(486,134)
Balance at 30 June 2009	6,394,686	-	6,394,686

Cash Flow Statement

	Economic Entity		Parent Entity	
	2009	2008	2009	2008
	\$	\$	\$	\$
CASH FLOW FROM OPERATING ACTIVITIES				
Receipts from customers	3,974,628	6,837,361	3,621,289	5,293,028
Payments to suppliers and employees	(5,129,323)	(3,083,234)	(4,461,945)	(2,461,656)
Interest received	93,188	75,642	64,045	18,733
Net cash provided by/(used in)				
operating activities	(1,061,507)	3,829,769	(776,611)	2,850,105
CASH FLOW FROM INVESTING ACTIVITIES				
Proceeds from sale of property, plant				
and equipment	-	2,000,000	-	2,000,000
Payment for property, plant and equipment	(3,739,058)	(6,117,081)	(3,739,056)	(6,117,081)
Net cash used in investing activities	(3,739,058)	(4,117,081)	(3,739,056)	(4,117,081)
CASH FLOW FROM FINANCING ACTIVITIES				
Proceeds from borrowings	-	6,268,231	-	7,866,440
Repayment of borrowings	-	(2,000,000)	-	(2,000,000)
Net cash used in financing activities	-	4,268,231	-	5,866,440
Net increase/(decrease) in cash held	(4,800,565)	3,980,919	(4,515,667)	4,599,464
Cash at beginning of financial year	5,847,539	1,866,620	5,161,043	561,579
Cash at end of financial year	1,046,974	5,847,539	645,376	5,161,043

Notes to the Financial Statements

for the year ended 30 June 2009

The financial report covers Skin and Cancer Foundation Inc. as an individual entity and Skin and Cancer Foundation Inc. and controlled entities as an economic entity. Skin and Cancer Foundation Inc. is an association incorporated in Victoria under the Associations Incorporations Act 1981.

Basis of preparation

The financial report is a general purpose financial report that has been prepared in accordance with Australian Accounting Standards, Australian Accounting Interpretations and other authoritative pronouncements of the Australian Accounting Standards Board and Associations Incorporations Act of Victoria.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in the financial report containing relevant and reliable information about transactions, events and conditions to which they apply. Compliance with Australian Accounting Standards ensures that the financial statements and notes also comply with International Financial Reporting Standards. Material accounting policies adopted in the preparation of this financial report are presented below. They have been consistently applied unless otherwise stated.

The financial report has been prepared on an accruals basis and is based on historical costs, modified, where applicable, by the measurement at fair value of selected noncurrent assets, financial assets and financial.

(a) Principles of Consolidation

A controlled entity is any entity controlled by Skin and Cancer Foundation Inc. Control exists where Skin and Cancer Foundation Inc. has the capacity to dominate the decision making in relation to the financial and operating policies of another entity so that the other entity operates with Skin and Cancer Foundation Inc. to achieve the objectives of Skin and Cancer Foundation Inc.

All inter company balances and transactions between entities in the economic entity, including any unrealised profits or losses, have been eliminated on consolidation.

Where a controlled entity has entered or left the economic entity during the year its operating results have been included from the date control was obtained or until the date control ceased.

(b) Land, Buildings, Plant and Equipment

Each class of asset and equipment is carried at cost or fair value as indicated less, where applicable, any accumulated depreciation and impairment losses.

Land, Buildings, Plant and Equipment

Land, buildings, plant and equipment is measured on the cost basis less depreciation and impairment losses.

The carrying amount of land, buildings, plant and equipment is reviewed annually by the association to ensure it is not in excess of the recoverable amount of those assets. The recoverable amount is assessed on the basis of the expected net cash flows which will be received from the assets' employment and subsequent disposal. The expected net cash flows have not been discounted to their present values in determining recoverable amounts.

Subsequent costs are included in the asset's carrying value amount or recognised as a separate asset, as appropriate, only when it

is probable that future economic benefits associated with the item will flow to the association and the cost of the item can be measured reliably. All other repairs and maintenance are charged to the income statement during the financial period in which they are incurred.

Depreciation

The depreciable amount of all fixed assets are depreciated over the useful lives of the assets to the association commencing from the time the asset was held ready for use. Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

The depreciation rates used for each class of depreciable assets are:

Class of fixed asset Depreciation Rate
Leasehold improvements 2.5–25.0%
Plant & Equipment 7.0–40.0%

The assets' residual values and useful lives are reviewed and adjusted, if appropriate at each balance date.

An assets' carrying amount is written down immediately to its recoverable amount if the assets' carrying amount is greater than the estimated recoverable amount.

Gains or losses on disposals are determined by comparing proceeds with the carrying amount. These gains and losses are included in the income statement. When revalued assets are sold, amounts included in the revaluation reserve relating to that asset are transferred to retained earnings.

(c) Financial Instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when the entity becomes a party to the contractual provisions to the instrument. For financial assets, this is equivalent to the date that the association commits itself to either purchase or sell the asset (ie trade date accounting is adopted).

Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified 'at fair value through profit or loss' in which case transaction costs are expensed to profit or loss immediately.

Classification and subsequent measurement

Finance instruments are subsequently measured at either fair value, amortised cost using the effective interest rate method or cost. Fair value represents the amount for which an asset could be exchanged or a liability settled, between knowledgeable, willing parties. Where available quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Amortised cost is calculated as: (i) the amount at which the financial asset or financial liability is measured at initial recognition; (ii) less principal repayments; (iii) plus or minus the cumulative amortisation of the difference, if any, between the amount initially recognised and the maturity amount calculated using the effective interest method; and (iv) less any reduction for impairment.

Notes to the Financial Statements

for the year ended 30 June 2009

The effective interest method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability. Revisions to expected future net cash flows will necessitate an adjustment to the carrying value with a consequential recognition of an income or expense in profit or loss.

The group does not designate any interests in subsidiaries, associates or joint venture entities as being subject to the requirements of accounting standards specifically applicable to financial instruments.

Financial assets at fair value through profit and loss

Financial assets are classified at fair value through profit or loss when they are held for trading for the purpose of short term profit taking, where they are derivatives not held for hedging purposes, or designated as such to avoid an accounting mismatch or to enable performance evaluation where a group of financial assets is managed by key management personnel on a fair value basis in accordance with a documented risk management or investment strategy. Realised and unrealised gains and losses arising from changes in fair value are included in profit or loss in the period in which they arise.

Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are stated at amortised cost using the effective interest rate method.

Held-to-maturity investments

These investments have fixed maturities, and it is the association's intention to hold these investments to maturity. Any held-to-maturity investments held by the association are stated at amortised cost using the effective interest rate method.

Available-for-sale financial assets

Available-for-sale financial assets include any financial assets not included in the above categories. Available-for-sale financial assets are reflected at fair value. Unrealised gains and losses arising from changes in fair value are taken directly to equity.

Financial liabilities

Non-derivative financial liabilities are recognised at amortised cost, comprising original debt less principal payments and amortisation.

Impairment

At each reporting date, the association assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether impairment has arisen. Impairment losses are recognised in the income statement.

(d) Employee Benefits

Provision is made for the association's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits expected to be settled within one year together with benefits arising from wages and salaries, annual leave and sick leave which will be settled after one year, have been measured at the amounts expected to be paid when the liability is settled plus related on costs.

Contributions are made by the association to an employee superannuation fund and are charged as expenses when incurred.

(e) Impairment of Assets

At each reporting date, the association reviews the carrying values of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value-in-use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the income statement.

Where it is not possible to estimate the recoverable amount of an individual asset, the association estimates the recoverable amount of the cash-generating unit to which the asset belongs.

(f) Income Tax

Skin and Cancer Foundation Inc. is endorsed as a public benevolent institution and is entitled to Income Tax Exemption, Goods & Services Tax concessions and Fringe Benefits Tax Exemption (up to \$30,000 grossed-up per employee).

(g) Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown

within borrowings in current liabilities on the balance sheet.

(h) Revenue and Other Income

Revenue is measured at the fair value of the consideration received or receivable after taking into account any trade discounts and volume rebates allowed. Any consideration deferred is treated as the provision of finance and is discounted at a rate of interest that is generally accepted in the market for similar arrangements. The difference between the amount initially recognised and the amount ultimately received is interest revenue.

Revenue from the sale of goods is recognised at the point of delivery as this corresponds to the transfer of significant risks and rewards of ownership of the goods and the cessation of all involvement in those goods.

Interest revenue is recognised using the effective interest rate method, which, for floating rate financial assets is the rate inherent in the instrument. Dividend revenue is recognised when the right to receive a dividend has been established.

Revenue from the provision of membership subscriptions is recognised on a straight line basis over the financial year.

All revenue is stated net of the amount of goods and services tax (GST).

Dividend revenue is recognised when the right to receive a dividend has been established. Dividends received from associates and joint venture entities are accounted for in accordance with the equity method of accounting.

Notes to the Financial Statements

for the year ended 30 June 2009

(i) Investments in Joint Ventures and Associates

The association's interests in joint venture entities are brought to account using the equity method of accounting in the consolidated financial statements. The parent entity's interests in joint venture entities are brought to account using the cost method.

(j) Goods and Services Tax (GST)

Revenue, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expenses. Receivables and payables in the balance sheet are shown inclusive of GST.

Cash flows are presented in the cash flow statement on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

(k) Comparative Figures

When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

(I) Critical accounting estimates and judgments

The committee members evaluate estimates and judgments incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the association.

Key estimates – Impairment

The association assesses impairment at each reporting date by evaluating conditions

specific to the association that may lead to impairment of assets. Where an impairment trigger exists, the recoverable amount of the asset is determined. Value-in-use calculations preformed in assessing recoverable amounts incorporate a number of key estimates.

The financial report was authorised for issue on 21 October 2009.

Trade and Other Receivables

Current trade receivables are non-interest bearing loans and are generally receivable within 30 days. A provision for impairment is recognised against trade receivables where there is objective evidence that an individual trade receivable is impaired. Impairment was required at 30 June 2009 \$4,400 (2008: \$4,400).

Credit risk

The entity has no significant concentration of credit risk with respect to any single counterparty or group of counterparties other than those receivables specifically provided for and mentioned. The main source of credit risk to the entity is considered to relate to the class of assets described as trade receivables.

The following table details the entity's trade receivables exposed to credit risk with ageing analysis and impairment provided for thereon. Amounts are considered as 'past due' when the debt has not been settled within the terms and conditions agreed between the foundation and the counterparty to the transaction. Receivables that are past due are assessed for impairment by ascertaining their willingness to pay and are provided for where there are specific circumstances indicating that the debt may not be fully repaid to the entity.

The balances of receivables that remain within initial terms (as detailed in the table) are considered to be of high credit quality.

	Economic Entity		Parent Entity	
	2009	2008	2009	2008
	\$	\$	\$	\$
CASH AND CASH FOUNTALIENTS				
CASH AND CASH EQUIVALENTS				
CURRENT	40.4.101	5 000 407	27 202	4 / 11 010
Cash at bank and in hand	404,191	5,298,406	37,303	4,611,910
Cash held in trust	642,783	549,133	642,783	549,133
	1,046,974	5,847,539	680,086	5,161,043
The effective interest rate on short-term				
bank deposits was 4.00% (2008: 4.77%);				
these deposits have an average maturity				
rate of 30 days.				
Reconciliation of cash				
Cash at the end of the financial year as				
shown in the cash flow statement is				
reconciled to items in the balance sheet				
as follows:				
Cash and cash equivalents	1,046,974	5,847,539	680,086	5,161,043
Overdraft	-	-	(34,710)	-
	1,046,974	5,847,539	645,376	5,161,043
TRADE AND OTHER RECEIVABLES				
CURRENT				
Trade debtors	147,820	186,549	147,820	186,549
Less impairment	(4,400)	(4,400)	(4,400)	(4,400)
EGSS IITIPOLITICITI	143,420	182,149	143,420	182,149
Amounts receivable from:	1 10, 120	102,117	1 10, 123	102,147
controlled entities	_	-	3,960,137	3,960,137
other related bodies corporate	176,914	198,065	-	-,. 33,.37
	320,334	380,214	4,103,557	4,142,286

Property, Plant & Equipment

for the year ended 30 June 2009

	Economic Entity		Parent Entity	
	2009	2008	2009	2008
	\$	\$	\$	\$
PROPERTY, PLANT AND EQUIPMENT				
LAND AND BUILDINGS				
Freehold land at cost- Rathdowne Street	-	-	-	-
Freehold land at cost- Drummond Street	4,600,000	4,600,000	4,600,000	4,600,000
Total land	4,600,000	4,600,000	4,600,000	4,600,000
Buildings at cost- Rathdowne Street	6,049,340	-	6,049,340	-
Buildings at cost- Drummond Street	(170,762)	3,190,772	(170,762)	3,190,772
Total buildings	5,878,578	3,190,772	5,878,578	3,190,772
Total land and buildings	10,478,578	7,790,772	10,478,578	7,790,772
LEASEHOLD IMPROVEMENTS				
At cost	-	151,620	-	151,620
Less accumulated amortisation	-	(151,620)	-	(151,620)
Total leasehold improvements at cost	-	-	-	-
PLANT AND EQUIPMENT				
Surgical and office equipment				
At cost	1,113,918	273,217	1,113,918	273,217
Less accumulated depreciation	(265,992)	(154,317)	(265,992)	(154,317)
	847,926	118,900	847,926	118,900
Furniture, fixtures and fittings				
At cost	66,699	100,184	66,699	100,184
Less accumulated depreciation	(6,371)	(64,554)	(6,371)	(64,554)
	60,328	35,630	60,328	35,630
Total plant and equipment	908,254	154,530	908,254	154,530
Total property, plant and equipment	11,386,832	7,945,302	11,386,832	7,945,302

Movements in carrying amounts

Movements in carrying amounts for each class of property, plant and equipment between the beginning of the year and the end of the current financial year.

			Leasehold	Plant and	
	Land	Buildings	Improvements	Equipment	Total
	\$	\$	\$	\$	\$
Economic Entity:					
Balance at 1 July 2007	2,000,000	1,707,327	96,437	302,957	4,106,721
Additions	4,600,000	2,483,445	-	33,636	7,117,081
Disposal	(2,000,000)	(1,000,000)	-	-	(3,000,000)
Write-off	-	-	(91,910)	(118,651)	(210,561)
Deprecation expense	-	-	(4,527)	(63,412)	(67,939)
Balance at beginning of year	4,600,000	3,190,772	-	154,530	7,945,302
Additions	-	2,858,569	-	880,487	3,739,056
Deprecation expense	-	(170,762)	-	(126,764)	(297,526)
Carrying amount at the end					
of the year	4,600,000	5,878,579	-	908,253	11,386,832
Parent Entity:					
Balance at 1 July 2007	2,000,000	1,707,327	96,437	302,957	4,106,721
Additions	4,600,000	2,483,445	-	33,636	7,117,081
Disposal	(2,000,000)	(1,000,000)	-	-	(3,000,000)
Write-off	-	-	(91,910)	(118,651)	(210,561)
Deprecation expense	-	-	(4,527)	(63,412)	(67,939)
Balance at beginning of year	4,600,000	3,190,772	-	154,530	7,945,302
Additions	-	2,858,569	-	880,487	3,739,056
Deprecation expense	-	(170,762)		(126,764)	(297,526)
Carrying amount at the end					
of the year	4,600,000	5,878,579	-	908,253	11,386,832

	Economic Entity		Parent Entity	
	2009	2008	2009	2008
	\$	\$	\$	\$
TRADE AND OTHER PAYABLES				
CURRENT				
Monies Held in Trust	473,485	549,133	473,485	549,133
Trade creditors	41,314	105,405	41,314	105,405
Sundry creditors and accruals	37,524	628,229	37,524	616,690
	552,323	1,282,767	552,323	1,271,228
NON CURRENT				
Amounts payable to:				
- wholly owned entities			4,535,550	4,471,740
•	1 157 015	1 200 /15		
Sundry creditors and accruals	1,157,915	1,388,615	4,000	4,000
	1,157,915	1,388,615	4,539,550	4,475,740
Financial liabilities at amortised cost				
classified as trade and other payables				
Trade and other payables:				
- Total current	552,323	1,282,767	552,323	1,271,228
- Total non-current	1,157,915	1,388,615	4,539,550	4,475,740
Financial liabilities as trade and other				
payables	1,710,238	2,671,382	5,091,873	5,746,968
FINANCIAL HABILITIES				
FINANCIAL LIABILITIES				
NON CURRENT	4 500 000	4 500 000	4 500 000	4 500 000
Bank loan secured	4,500,000	4,500,000	4,500,000	4,500,000

The bank loan is secured by a registered mortgage over the freehold property of the entity.

Provisions

for the year ended 30 June 2009

	Employee		
	entitlement	Total	
	\$	\$	
PROVISIONS			
Economic Entity	\$ \$		
Employee entitlements opening balance at 1 July 2008	125,202	125,202	
Additional provision raised during the year	124,337	124,337	
Amounts used	(75,030)	(75,030)	
Balance at 30 June 2009	174,509	174,509	
Parent Entity	\$ \$		
Employee entitlements opening balance at 1 July 2008	125,202	125,202	
Additional provision raised during the year	124,337	124,337	
Amounts used	(75,030)	(75,030)	
Balance at 30 June 2009	174,509	174,509	

	Economic Entity		Parent Entity	
	2009	2008	2009	2008
	\$	\$	\$	\$
Analysis of Total Provision				
Current	94,658	62,127	94,658	62,127
Non-current	79,851	63,075	79,851	63,075
	174,509	125,202	174,509	125,202

CAPITAL MANAGEMENT

The committee members control the capital of the association in order to maintain a good debt-to-equity ratio and to ensure that the association can fund its operations and continue as a going concern.

The association's debt and capital includes financial liabilities, supported by financial assets.

There are no externally imposed capital requirements.

The committee members effectively manage the association's capital by assessing the association's financial risks and adjusting its capital structure in

response to changes in these risks and in the market. These responses include the management of debt levels.

There have been no changes in the strategy adopted by management to control the capital of the association since the prior year. This strategy is to ensure that there is sufficient cash to meet trade and sundry payables and borrowings.

The gearing ratios for the year ended 30 June 2009 and 30 June 2008 are as follows:

	Economic Entity		
	2009 2008 \$ \$	2008	
		\$	
Total borrowings	5,657,915	5,888,615	
Less cash and cash equivalents	(1,046,974)	(5,847,539)	
Net debt	4,610,941	41,076	
Total Equity	6,394,686	6,880,820	
Total Capital	11,005,627	6,921,896	
	51%	85%	

Statement by Member of the Committee

In the opinion of the committee the financial report as set out on pages 24 to 40:

- 1. Presents a true and fair view of the financial position of Skin and Cancer Foundation Inc. and its controlled entities as at 30 June 2009 and its performance for the financial year ended on that date in accordance with the Australian Accounting Standards and other mandatory professional reporting requirements and other authoritative pronouncements of the Australian Accounting Standards Board.
- 2. At the date of this statement, there are reasonable grounds to believe that Skin and Cancer Foundation Inc. and its controlled entities will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Committee and is signed for and on behalf of the Committee by:

Associate Professor Peter Foley

Dr Michael Rich

Dated this 21st day of October 2009

Certificate by Member of the Committee

- I, Associate Professor Peter Foley and Dr Michael Rich, certify that:
- (a) We are members of the committee of Skin and Cancer Foundation Inc.
- (b) We are authorised by the attached resolution of the committee to sign this certificate.
- (c) An annual statement was submitted to the members of the association at its annual general meeting.

Dated this 21st day of October 2009

Associate Professor Peter Foley (Committee Member)

Dr Michael Rich (Committee Member)



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INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF SKIN AND CANCER FOUNDATION INC.

audit@melb.bentleys.com.au www.melb.bentleys.com.au

We have audited the accompanying financial report of the Skin and Cancer Foundation Inc and its controlled entities, which comprises the balance sheet as at 30 June 2009, and the income statement, statement of changes in equity and cash flow statement for the year then ended, a summary of significant accounting policies and other explanatory notes and the statement by members of the committee.

Committee's Responsibility for the Financial Report

The committee of management are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations). This responsibility includes establishing and maintaining internal controls relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessment, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the committee of management, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.



Chartered Accountants and Business Advisors

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INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF SKIN AND CANCER FOUNDATION INC. (Continued)

Independence

In conducting our audit, we have complied with the independence requirements of the Australian professional accounting bodies.

Auditor's Opinion

In our opinion, the financial report gives a true and fair view of the financial position of Skin and Cancer Foundation Inc and its controlled entities as of 30 June 2009, and of its financial performance and its cash flows for the year then ended in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations).

BENTLEYS MELBOURNE PARTNERSHIP CHARTERED ACCOUNTANTS

MARTIN FENSOME PARTNER

Dated in Melbourne on this 22 day of October 2009.







Supporters

The Foundation gratefully acknowledges the generous support of many volunteers, individuals, philanthropic bodies, organisations and the corporate sector.

In particular we thank our member dermatologists, many of whom give their time, talents and resources regularly and generously.

The Skin and Cancer
Foundation is a registered
charitable organisation
endorsed as a Deductible
Gift Recipient and is an
Income Tax Exempt Charity.











































Skin and Cancer Foundation Inc.