

DEATH OF CHRIS O'BRIEN

The Chair of the patient advocacy group Brain Tumour Alliance Australia Inc. (BTAA Inc www.btaa.org.au), Matthew Pitt of Canberra, said that sadness at the death of Chris O'Brien was felt by many people and especially all those whose life had been touched by a brain tumour.

"The diagnosis of a malignant primary brain tumour, which Chris O'Brien had, can cause devastation to the patient and their family. Around 1400 Australians each year receive this terrible news. There are also those who have so-called "benign" brain tumours, which can cause disabilities and can also be lethal.

"We urgently need a massive injection of Government funding targeted at trying to find a cure for this dreadful disease", Mr Pitt said.

His comments were echoed by Mr Denis Strangman, Secretary of BTAA Inc, and Chair of the International Brain Tumour Alliance (www.theibta.org), whose wife died in 2001 from the same type of tumour as Chris O'Brien had.

"Chris was very generous with his support and kind words to all of us involved in this fight," Mr Strangman said.

"I have just returned from two important international meetings, one attended by the world's leading brain tumour specialists in Yokohama, and another of cancer specialists in Orlando, and at both there was disappointment at the absence of any new therapies for brain tumours."

"There is a lot of research taking place and several promising new therapies but there is no sign of a breakthrough."

"The Australian Government has given some funding for specific research projects and for clinical trial research into brain tumours but it should be increased ten fold if there is any progress to be made," Mr Strangman said.

Canberra
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BRAIN TUMOURS – SOME QUICK FACTS (Brain Tumour Alliance Australia Inc.)

- There are more than 120 different types.
- Three main categories: primary, "benign", brain metastases (arising from a cancer elsewhere in the body).

- Malignant brain tumours have a very poor prognosis.
- Benign brain tumours are not published in Australian cancer registry statistics but can be lethal.
- They are a "less common cancer" but high in terms of impact and person years of life lost.
- The only cancer to affect both mind and body, they strike at the very essence of a person.
- Causes generally unknown; cannot be prevented by lifestyle changes or anything else; no early detection or general community screening possible.
- 1422 people in Australia were diagnosed with a malignant primary brain tumour in 2005 (latest available figure) (Page 14, Cancer in Australia: an overview, 2008 AIHW).
- 1050 people in Australia with a malignant primary brain tumour died in 2005 (latest available figure). (Page 39, Cancer in Australia: an overview, 2008 AIHW). This figure is expected to increase to 1277 people by 2010 (Page 51, Cancer in Australia: an overview, 2008 AIHW).
- During 1998-2004 brain tumours had the fourth-lowest five-year relative survival (19%) of all cancers (Page 83, Cancer in Australia: an overview, 2008 AIHW).
- There was no significant change in five-year survival for brain tumour patients between 1982-86 (20%) and 1998-2004 (19%) (Page x, Page 19, Cancer Survival and Prevalence in Australia, July 2008, AIHW, CA, AACR, and Page 83, Cancer in Australia: an overview, 2008 AIHW).
- People with brain tumours have the second highest (after leukaemia) estimated lifetime treatment cost of \$40,732 (Page 19, Cost of Cancer in NSW, CC NSW, April 2007)
- Although ranked only 19th in terms of incidence (Pages-14, Cancer in Australia: an overview, 2008 AIHW), brain tumours ranked 4th in terms of person years of life (PYLL) lost to age 75 (Pages 38-39, Cancer in Australia: an overview, 2008 AIHW).
- In 2006-2007 brain tumour patients had the highest average length of hospital stay (11.4 days) of all cancer patients (Page 107, Cancer in Australia: an overview, 2008 AIHW).
- Brain tumours are the second most common cause of death in children after leukaemia (Page 42, Cost of Cancer in NSW, CC NSW, April 2007)
- There are only a handful of experienced brain tumour-specific patient care coordinators in Australia.

The future

- The development of the chemotherapy temozolomide during 2000-2007 has slightly improved survival for those who benefit from it but only by several months.
- Brain tumours were one of the three most intransigent cancers (lung and ovarian being the others) selected for detailed analysis under the international Cancer Genome Atlas project. Early results have identified some promising new genetic markers which might lead to more effective targeted therapies but these developments will take time.