Geoff Simmons Lecture



Geoff Simmons at the Animal Research Institute Yeerongpilly, late 1960s. With him are Des Connole (mycologist) and ABC interviewer R Logan.







Geoff Simmons

- Queensland microbiologist
- first identification of Brucella ovis
- first identification of Actinobacillus seminus



- isolated non-pathogenic Newcastle Disease virus from poultry in Australia
- honorary fellowship of Australian College of Veterinary Scientists 1974
- awarded Doctor of Veterinary Science by UQ in 1984
- founding member of the Australian Microbiology Society 1958

Picture: https://www.theland.com.au/story/6115862/spread-of-brucella-ovis-in-your-flock-explained/



Geoff Simmons

over 70 papers in the peer-reviewed literature

MY NOBI FILTERS 7 results RESULTS BY YEAR Dermatophilosis in a lizard (Amphibolurus barbatus). Simmons GC, Sullivan ND, Green PE. × 7 Aust Vet J. 1972 Aug;48(8):465-6. doi: 10.1111/j.1751-0813.1972.tb02285.x. Cite PMID: 4674383 No abstract available. Share Psittacosis lymphogranuloma polyarthritis of sheep in Queensland. 1951 2021 2 Tammemagi L, Simmons GC. Aust Vet J. 1968 Dec;44(12):585. doi: 10.1111/j.1751-0813.1968.tb04949.x. Cite TEXT AVAILABILITY PMID: 5751649 No abstract available. Share Abstract Free full text Clinical and pathological studies of Border Leicester rams naturally infected Full text 3 Actinobacillus seminis. Baynes ID, Simmons GC. Cite ARTICLE ATTRIBUTE Aust Vet J. 1968 Aug;44(8):339-43. doi: 10.1111/j.1751-0813.1968.tb14399.x. Share PMID: 5692648 No abstract available. Associated data ARTICLE TYPE Serological and chemical properties of the Dermatophilus endoplasm. Kwapinski JB, Simmons GC. Books and Documents Antonie Van Leeuwenhoek. 1967:33(1):100-6. doi: 10.1007/BF02045539. Cite Clinical Trial PMID: 4961925 No abstract available. Share Meta-Analysis Randomized Controlled Cryptococcosis in a sheep. Laws L. Simmons GC. 5 Review Cite Aust Vet J. 1966 Sep;42(9):321-3. doi: 10.1111/j.1751-0813.1966.tb04729.x. PMID: 6008188 No abstract available. Systematic Review Share PUBLICATION DATE Epidemiology of Actinobacillus seminis in a flock of Border Leicester sheep 1 year 6 Simmons GC, Baynes ID, Ludford CG. 5 years Aust Vet J. 1966 May;42(5):183-7. doi: 10.1111/j.1751-0813.1966.tb16020.x. Cite PMID: 5333604 No abstract available. 10 years Share Custom Range

Transmission of contagious ecthyma from sheep to man. PASK VM, MACKERRAS IM, SUTHERLAND AK, SIMMONS GC.

Additional filters

Reset all filters

Med J Aust. 1951 Nov 10;2(19):628-32. doi: 10.5694/j.1326-5377.1951.tb74646.x. Cite PMID: 14890218 No abstract available. Share



PMID: 1191140

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5.PMD: 126056

A study of the number and phage patterns of Staphylococc Real & Bothwell J. Simmons GC, Prost A. Aust Ver. J. 1975 Mar:51(3):126-30. doi: 10.1111/j.1751-0013.1975.te09433. PMID: 124056

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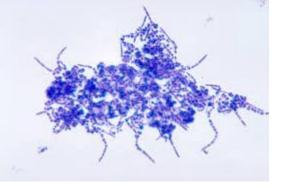
C 8. PM D: 4593693

A study of tuberculosis-like lesions in cattle slaughtered in Queensland meatworks. Tammemagi L, Simmons GC, Kalman R, Hall WT, Aust Vet J. 1973 Nev-AR(11):507-11. doi: 10.1111/j.1751-0813.1973.m02333.x. PMD: 4590690 No abstract available.

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(bTB)









Mini-bio

- Experiences have made me realise the scope of vet degree
- Private mixed practice
- Research UQ / Brisbane hospitals + national/international collaborations
- Teaching School of Medicine MBBS, School of Vet Science
- Mater Research
- Consultancy



Scope of Veterinary Science

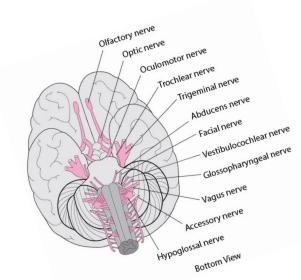
- Broad degree
- Other degrees have elements but vet brings them all in
- Science biology / maths / chemistry / genetics / molecular biology.....
- Medicine focussed on 1 species little comparative anatomy, medicine, therapeutics or pathology

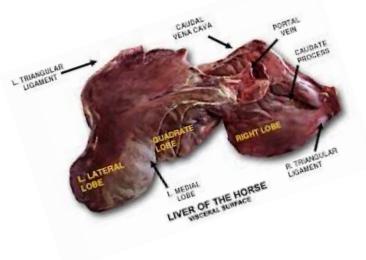


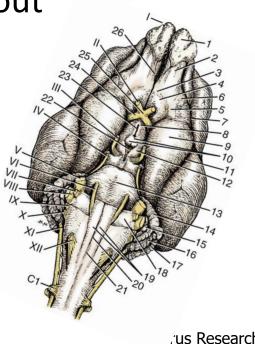
Do dogs have cranial nerves?



- Do dogs have cranial nerves?
- How do you know all this stuff about liver pathology?









Scope – clinical practice / government / industry / international (FAO etc) /research

Clinical practice

- small animal
 - \circ domestic
 - \circ pocket pet
 - \circ avian
 - \circ reptile
- large animal
 - o performance / pleasure
 - \circ production

- exotic
- zoo
- rural
- urban
- peri-urban
- regulatory
- disease control / policy



Research Highlights - themes

- Congenital Hyperinsulinism of Infancy
- Cystic Fibrosis
- Paediatric liver transplant biliary atresia
- Epidemiology of paediatric respiratory viruses
- Maternal / fetal medicine
- Bone turnover in pregnant mares
- Racehorse injury/performance
- Equine / Human opthalmology
- Many others!

Ross Walker, Andrew Cotterill Ross Shepherd, Scott Bell **Ross Shepherd** Ian Mackay Sailesh Kumar Ristan Greer, Stephen Andersen Nick Kannegeiter, Kylie Crawford Edith Hampson, Jane Camuglia



Torus Researc

Congenital Hyperinsulism of Infancy (CHI)

- Monogenic, first few days of life; unregulated release of insulin from the beta cell; severe uncontrollable hypoglycaemia; brain damage
- Some forms amenable to medical tx; otherwise surgical pancreatectomy;

What is Congenital Hyperinsulinism?



- Most common form of persistent hypoglycemia in children
 - >1 in 20,000 births
- Previously called "nesidioblastosis"
- High risk of seizures & brain damage
- Glucose infusion rates (GIR) up to 50 mg/kg/min
- Infants who fail medical therapy (diazoxide) need pancreatectomy
- More than half of surgical cases have a curable focal lesion

Scott Adzick 2020 doi.org/10.1016/j.sempedsurg.2020.150924



Congenital Hyperinsulism of Infancy (CHI)

- Pathologic basis mutations in the ABCC8 or KCNJ11 gene, encoding for the SUR1 K+ channel in the b-cell membrane
- Gene identified in 1995 Pamela Thomas
- *activating mutations cause neonatal diabetes, inactivating mutations cause hyperinsulinism

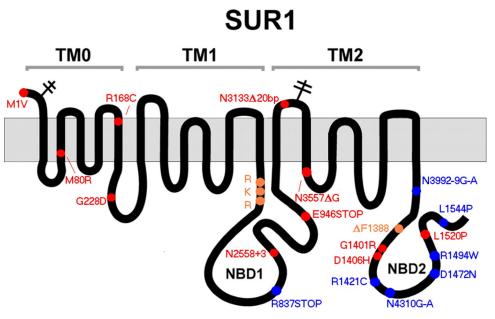


Figure: SUR1 Topology. The locations of mutations found in the Australasian HI cohort are shown. Novel mutations are in red. Previously described mutations in blue. Common F1388 mutation location is indicated. Based on Conti et al. 2001



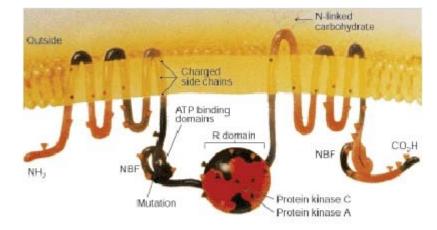
Cystic Fibrosis

- Monogenetic, manifests in first few months of life;
- Used to be dx by 'failure to thrive' & recurrent chest infection
- Now by neonatal screening (Qld ~ 1990)
- Characterised by progressive lung disease and pulmonary failure
- Reduced life expectancy females shorter life exp than males

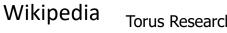


Cystic Fibrosis

- Pathologic basis: mutation in CFTR gene encoding for CFTR protein
- Cyclic AMP mediated Cl- channel in epithelial cell membrane
- Epithelium can't secrete CI- and thus H2O
- Lung thick sticky mucus eventually destroys lung tissue
- GIT, liver, repro organs (males infertile)
- used to be dx by 'sweat test' inc. NaCl in sweat



NBF = Nucleotide bindling fold





Cystic Fibrosis

- Dorothy Anderson pathologist, paediatrician
- Identified 'cystic fibrosis of the pancreas' 1938 – pm finding
- New York heatwave of 1948 heat prostration in children – connected salty sweat with cystic fibrosis
- basis of Gibson & Cooke sweat test until genetic screening ~ 1990s



ABCC8 and CFTR are both members of the ABCC sub-family of ABC ion transporters https://humgenomics.biomedcentral.com/articles/10.1186/1479-7364-3-3-281

https://litfl.com/dorothy-h-andersen/

Torus Research



Paediatric liver transplant – Biliary atresia

- Congenital malformation / absence of bile ducts
- infant onset, jaundice, portal hypertension with oesophageal varices, malnutrition, hypoproteinaemia, etc
- 'Rescue' Kasai operation
- Ultimately needs liver transplant

1998 Aug;27(2):148-54.

doi: 10.1097/00005176-199808000-00004.

Growth hormone resistance and somatomedins in children with end-stage liver disease awaiting transplantation

<u>R M Greer¹</u>, <u>P Quirk</u>, <u>G J Cleghorn</u>, <u>R W Shepherd</u> DOI: <u>10.1097/00005176-199808000-00004</u>

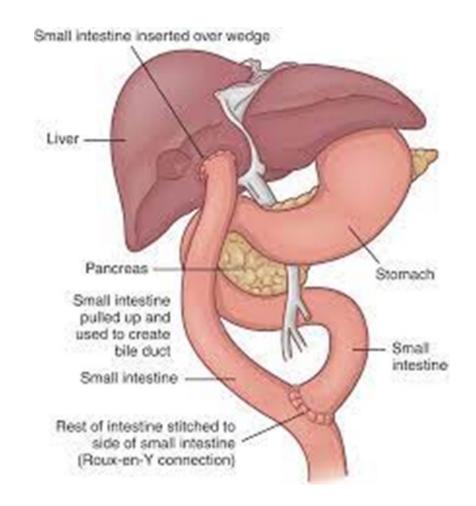


liverfoundation.org



Biliary atresia

- Hepato-portoenteostomy
- Morio Kasai
- Roux-en-Y loop of jejunum attaches to the cut-back liver
- duodenum attaches further down
- 'Brisbane technique' (splitting donated liver) – Russell Strong – now famous



liverfoundation.org



Gastrospirillum hominis – 'One Medicine'

Now - Helicobacter heilmannii

THE LANCET1994 Jun 25;343(8913):1605-7.FULL-TEXT ARTICLEdoi: 10.1016/s0140-6736(94)93060-0.

Canine-human transmission of Gastrospirillum hominis

M A Thomson¹, P Storey, R Greer, G J Cleghorn

Affiliations collapse

Affiliation

¹Gastroenterology Unit, Royal Children's Hospital, Brisbane, Australia.

PMID: 7911923

DOI: <u>10.1016/s0140-6736(94)93060-0</u>

Abstract

We report electron microscopic evidence of transmission from a pet dog to a 12-year-girl of *Gastrospirillum hominis* which caused gastric disease in both that was eradicable with treatment.

- 12 yo girl with recurrent gastritis and vomiting
- Close contact with 2 dogs, one with recurrent vomiting
- Gastric biopsy of all 3 via endoscopy
- All 3 returned +ve Gastrospirillum hominis, affected dog ++ organisms
- All 3 treated with amoxycillin bismuth
- Resolved without recurrence



Gastrospirillum hominis (Helicobacter heilmannii) – 'One Medicine'

human transmission by diagnostic endoscopy of the animal contacts.

The symptoms and the clinical course of the patient, a 12-year-old girl and her two pet dogs are presented in the table.

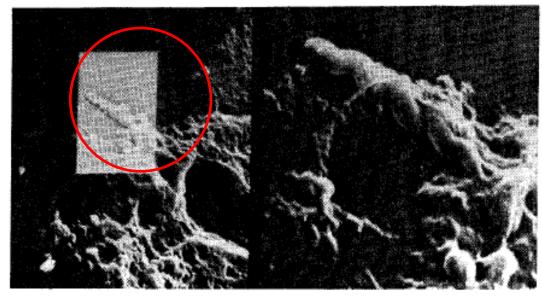


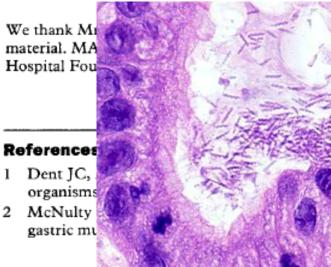
Figure: Gastric-body biopsy specimen of dog A on scanning electron microscopy

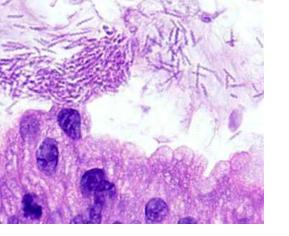
Characteristic spiral coiling of G hominis (\times 1130, glutaraldehyde fixed, resin embedded).

mucosa was clear.

Both G hominis and H pylori are urease-producing organisms, which may limit the specificity of this test in the detection of H pylori.

G hominis is an easily treated cause of gastritis, the importance of which may increase as it is more readily identified and sought with greater zeal, as occurred with *H pylori*. Recognition and treatment of a reinfection source in the form of a domestic canine contact may help to treat cases refractory to conventional anti-helicobacterials.





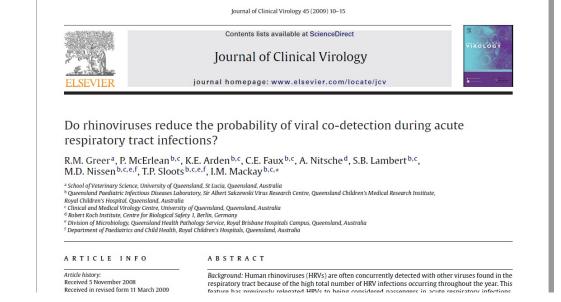
BrownMed



Epidemiology of respiratory viruses in children

Common respiratory viruses

- Human rhinovirus (HRV)
- Human adenovirus (HAdv)
- Human Corona Virus (HCoV)
- Influenza A (IFAV)
- Human parainfluenza virus (HPiV)
- Human Enterovirus (HEV)
- Human metapneumovirus (HMPV)
- Human respiratory syncytial virus (HRSV)
- Human polyoma virus (PyV)
- Normal development of immune system?



- 1247 mainly naso-pharyngeal specimens
- ~70% children 0 2 years
- HRVs frequently found as a single infection
- other viruses found as co-infection
- ? Does HRV 'protect' against other viruses?



Maternal/fetal medicine

- Overall aim: identify pregnancies 'at risk' of having an 'adverse neonatal outcome'
- premature birth, stillbirth, neonatal death, disability (hypoxic ischaemic encephalopathy)
- markers: intrauterine growth retardation, acidosis, intensive care admission
- Diagnostic tools: maternal risk factors (eg smoking, BMI, socioeconomic, ethnicity, age), investigations (ultrasound multiple derived indices, blood biomarkers)
- Series of many studies using large databases and prospective observational studies and randomised controlled trials

Original Research

ajog.org

OBSTETRICS

The risk of recurrent small-for-gestational-age infants at term is dependent on the number of previously affected births

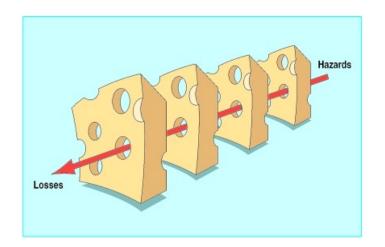
Surya Bhamidipaty-Pelosi, BS, MS, MD; Jane Fox, BSc, MNur, PhD; Ristan M. Greer, PhD, MVSc, BA (Mathematics), MANZCVSc; Sailesh Kumar, FRCS, FRCOG, FRANZCOG, DPhil (Oxon), CMFM

BACKGROUND: Small-for-gestational-age infants are at a substantially increased risk of perinatal complications, but the risk of recurrent small-for-gestational-age is not well known, particularly because there are many demographic and obstetrical factors that interact and modify this risk. We investigated the relationship between previous small-forgestational-age births and the risk of recurrence at term in a large Australian cohort. **RESULTS:** The final study comprised 24,819 women. The proportion of women who had a small-for-gestational-age infant in their first pregnancy was 9.4%, whereas the proportion of women who had a small-for-gestational-age infant in their second, third, and fourth pregnancies after the birth of a previous small-for-gestational-age infant were 20.5% (479 of 2338), 24.6% (63 of 256), and 30.4% (14 of 46), respectively. Regardless of parity, the odds of recurrence increased if the preceding



Human factors – minimizing human error

- Technology and systems have improved greatly
- Systems are designed to 'catch' the errors – James Reason's 'Swiss Cheese model'
- Errors only result in failure when all the 'holes' line up
- Human error is inevitable ties in with 'no blame' culture



BMJ. 2000 Mar 18; 320(7237): 768–770. doi: 10.1136/bmj.320.7237.768 Human error: models and management James Reason, professor of psychology



Flying – the world of Human Factors





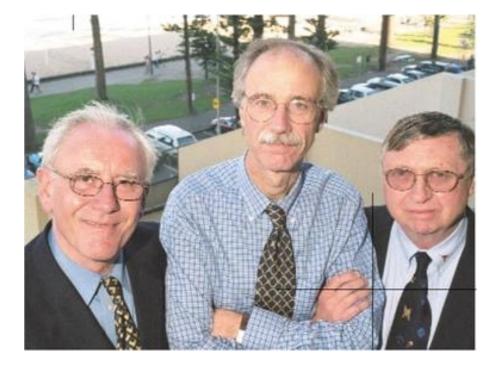
Human Factors - Just Culture

- James Reason the Swiss Cheese Model
- Bob Helmreich, Dan Maurino UTexas
- Sidney Dekker The Second Victim youtube/YeSvCEpg6ew

'Error results from physiological and psychological limitations of humans

...causes include...

fatigue, workload, cognitive overload, poor personal communication, imperfect information processing and flawed decision making'



James Reason, Dan Maurino, Bob Helmreich

Flight Safety Australia 2001



Human factors – minimizing human error

Windows into safety & quality Mater Health 2018

https://www.mater.org.au/Mater/media /page-content/publications/pdfs/2018-Mater-Clinical-Safety-Report.pdf

Mater (& other hospitals) active in auditing and minimizing medical errors

- Human error accounts for 83% of medical errors
- Fixation error fixating on one problem only - is a major contributor





The Elaine Bromiley case

- Elaine Bromiley, an otherwise well 37 year old woman, presented for routine sinus surgery in 2005 and died due to complications of an an unanticipated difficult airway.
- The case highlights how, despite the presence of skilled and diligent clinicians, human factors can adversely impact on patient care.
- The following free resources have been made available in order to increase awareness of the issues involved in cases such as these and potential strategies to address them.
- http://simpact.net.au/bromiley.html

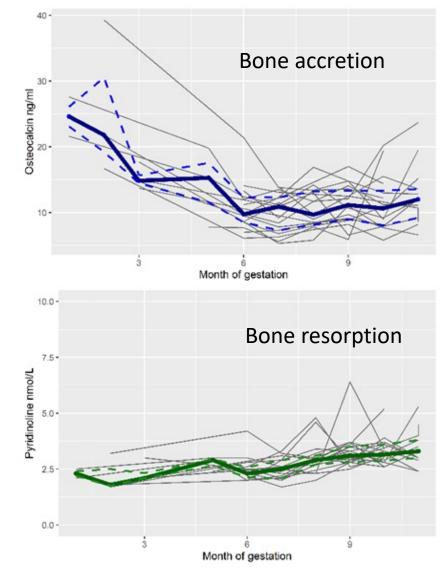




Equine – equine bone metabolism

- Markers of bone turnover in pregnant mares
- Yearly foal mare often lactating AND pregnant
- When do mares replenish their own calcium stores?
- Window seems to be between foaling and early pregnancy
- osteocalcin OC marker of bone accretion
- Pyridinoline Pyd marker of bone resorption

Serum bone biomarkers osteocalcin and pyridinoline in mares during pregnancy and lactation, and in foals during early post-natal life. Anderson ST, Kidd LJ, Barton AJ, **Greer RM.** Res Vet Sci. 2018 Jun;118:34-40. doi: 10.1016/j.rvsc.2018.01.007.





Equine – racehorse injury / return to racing

• Do racehorses return to performance after surgery?

- Medication and management factors influencing return to racing after arthroscopic surgery Kannegieter N, Schaaf K, Greer R Publication: *Australian Equine Veterinarian*, Volume 30, Issue 3, pp 58-59, **Sep 2011Publisher:** Australian Equine Veterinary Association
- Risk factors for musculoskeletal injuries



*Appraising the Welfare of Thoroughbred Racehorses in Training in Queensland, Australia: The Incidence, Risk Factors and Outcomes for Horses after Retirement from Racing.
Crawford KL, Finnane A, Greer RM, Phillips CJC, Woldeyohannes SM, Perkins NR, Ahern BJ. Animals (Basel). 2021 Jan 11;11(1):142. doi: 10.3390/ani11010142.PMID: 33440666 Free PMC article.
*Kylie awarded ANZCVSc Medal for most commendable paper in a peer reviewed international journal 2021



Equine – conjunctival flora

> Vet Ophthalmol. 2019 May;22(3):265-275. doi: 10.1111/vop.12587. Epub 2018 Jul 2.

Identification of bacteria and fungi sampled from the conjunctival surface of normal horses in South-East Queensland, Australia

Edith C G M Hampson ¹ ², Justine S Gibson ¹, Mayank Barot ¹, Frances M Shapter ¹, Ristan M Greer ¹

- 98.9% of horses had a positive bacterial culture in at least one eye
- Culture results provide a guide to therapy where necessary





Clonal Pseudomonas – 'One Medicine'

> Vet Microbiol. 2011 May 5;149(3-4):508-12. doi: 10.1016/j.vetmic.2010.11.030. Epub 2010 Dec 1.

Clonal complex Pseudomonas aeruginosa in horses

Timothy J Kidd ¹, Justine S Gibson, Susan Moss, Ristan M Greer, Rowland N Cobbold, John D Wright, Kay A Ramsay, Keith Grimwood, Scott C Bell

Affiliations - collapse

Affiliation

Department of Infectious Diseases, Royal Children's Hospital, Queensland Children's Medical Research Institute, The University of Queensland, Brisbane, Australia. Tim_Kidd@health.qld.gov.au

PMID: 21183294 DOI: 10.1016/j.vetmic.2010.11.030

Abstract

Pseudomonas aeruginosa is associated with infectious endometritis in horses. Although infectious endometritis is often considered a venereal infection, there is relatively limited genotypic-based evidence to support this mode of transmission. The study sought to determine the relatedness between genital P. aeruginosa isolates collected from a limited geographical region using molecular strain typing. Enterobacterial repetitive intergenic consensus PCR typing was performed on 93 isolates collected between 2005 and 2009 from 2058 thoroughbred borses (including 18 stallions) at 66 stude



cdc.gov



Current work

- In cancer patients undergoing palliative care, do cannabinoids improve the quality of life?
- Pain, sleeplessness, nausea, anxiety
- Series of multi-centre randomized controlled trial
- Assess various cannabinoid compounds (THC, CBD) and dose effects



Lead investigators Prof Janet Hardy Prof Phillip Good Mater Health Services, The University of Queensland, St Vincent's Hospital



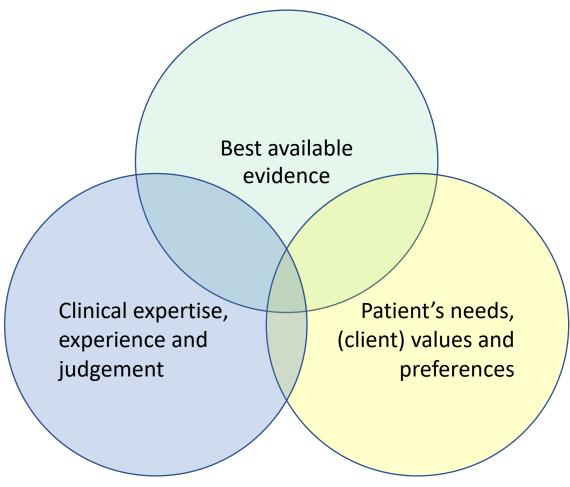
Other veterinary clinical studies

- Urinary catheterisation in dogs evaluate new technology – gadget as quick and easier to use than speculum (Abbie Tipler)
- Sesamoid disease in dogs risk factors & outcomes
- Red bellied black snake risk factors & outcomes
- Soft palate surgery in dogs risk factors and outcomes

All motivated by a clinical problem Every clinician should be a researcher! Carry on the tradition of Geoff Simmons



The evidence based medicine triad



David Sacket et al, BMJ 1996;312:71-2

Study design and analysis – write the protocol before you start

- 1. Formulate your **research** question/s
- 2. Select the best **study design** to answer your question (RCT, cohort, case-control or cross sectional; diagnostic test
- 3. Plan your **data collection** and **analysis**
- 4. Estimate the **sample size** you will need
- 5. Consider **ethics** implications/get approval

- 6. Conduct your study
- 7. Analyse and write up the results
- 8. Submit your manuscript to a suitable journal, aiming to reach your **target audience**
- 9. Address the **reviewer's** comments
- 10. Your paper is accepted! Well done! You have contributed to knowledge in your field.



www.torusresearch.com.au