



# Official Opening

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Minister assisting the Minister for Health (Cancer)**

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Re:connections Forum  
Sydney Convention and Exhibition Centre, Darling Harbour, Sydney**

Ladies and gentlemen, it's a pleasure to be here and I want to start by acknowledging our two keynote speakers, David Prast and Dr James Fawcett, who have already been formally introduced but I think I should acknowledge them, and of course the heads of SpinalCure Australia, Bob Turner, David Bowen, the General Manager of the Motor Accident Authority, and David Issa, the Chief Executive of the NRMA.

This forum, Re:connections, is really an opportunity to, I guess, reflect on where we've come in the last three years. I think late January, the long weekend of January 2003, Premier Carr hosted the first forum. 1,000 people came to hear Christopher Reeve speak. Bob Carr was a person, a former Premier, who became quite passionate about this issue. He was passionate about a lot of things, but it wasn't just National Parks. He was passionate about medical research and he was inspired by Christopher Reeve and by the plight of people with spinal injuries, the situation that people find themselves, in a split second, that has such a serious impact on their lives, and sought to do something about it. As a result of that, of course, that forum, it became obvious that words weren't enough, that you needed to have resources. So Premier Carr saw to it that there was some 35 to 36 million allocated, including a 10.9 million research program which was over a number of years, which basically led to the establishment of the Spinal Cord Injury Neurological Conditions Fund, funded from the proceeds of speed cameras. So when you listen to frothing disc jockeys and they talk about speed cameras just being a revenue raiser, in this particular sense it's not a bad thing.

That money, of course, has been addressed and applied. It led to a significant number of funding programs, including fellowships and so on, and whilst I don't want to go through the exhaustive list, it's worth mentioning a number of them.

The four programs I think I might mention, and they include the program involving Associate Professor Janet Keast of Sydney University's Pain Management Research Institute, which was funded, Professor Phil Wake, head of the Neural Injury Research Unit at the University of New South Wales, Dr James Middleton, Medical Director of Moorong Spinal Unit and a Senior Lecturer of Rehabilitation Studies here in Sydney, and professor John Pollard, Director of the Brain and Mind Research Institute at the University of Sydney. So with this assistance, I think we're able to encourage and assist, and practically assist, but also encourage some of our top researchers to gear up to increase the volume and the amount of research in this critical area.

We also allocated two project grants of \$200,000 each to post-doctoral researchers at the Prince of Wales Medical Research Institute, including Dr Penny McNulty and Dr Marcus Stutty. There were also a range of travel grants and other things funded. We also had a number of experts out from the United Kingdom, who were here to visit under the inaugural fellowships, and they spent four weeks in New South Wales in August and October, respectively, on the program. They were Dr Paul Kennedy of the Stoke Mandeville Hospital and Professor Paul Ellaway of Imperial College. Professor Kennedy's work focuses on the psychology of patients with spinal cord injuries, how to support them, plan appropriate rehabilitation and manage their therapy. Professor Ellaway was involved in stem cell research relating to bone marrow, which is led, of course, by Professor Phil Wake, who received one of our research grants. These programs, of course, are part of a range of programs that have been funded out of our research fund, which we're very pleased to support. Can I say that whilst I'm not at liberty to reveal the contents of the next state budget, which is due out next week, because that's the purview of the Treasurer, I can, however, say that I'm very confident that the program will be continued.

I've had a passion for medical research, not just cancer, but I think this is another really important area, it's a critical area. One of the things I suppose I want to say is that medical research is usually a long-term thing. Occasionally you can achieve quick transitional gains, quick clinical gains, but usually we talk here about gains in decades, not years. We usually talk about decades, not years: All the more reason for getting started, all the more reason for working collaboratively together, all the more reason for being connected internationally, so that any gains made inform our thinking. Even though it might be a new avenue of research that we're involved with, it's always important to see, and I know that those of you who are in the room who are researchers would be thinking, of course, "Thank goodness for the internet," and because of all the conferences you attend, you would be well aware of international research. But it's important that we do our own fair share of research, and therefore make our contribution to this really important area of research, but at the same time stay closely connected to any gains that happen overseas, any new clinical methodologies that are developed, and ensure then, in a practical sense, they're applied throughout our own system, throughout our own system. Because our hospital system is quite a big one, it's a state of nearly 7 million people, and of course we have to ensure that these therapies and the work we do is accessible in a fair and reasonable fashion to people, patients, throughout the state.

So I want to say that the work I hear and the feedback I have received has been that the collaboration has been fantastic. It's fair to say that the amounts of money we've allocated are not on the scale you'd expect from an NIH, the US National Institute for Health in the US, but it's really important that we keep that support going. As I said, I'm very confident it will continue, and even find ways of enhancing that, and any NHMRC grants and so on that might support that as well.

I can't overstate the importance of your work. It is critical work. It is work that has a huge social and health benefit, and, let's not forget, a huge economic benefit as well. That's a message that has to keep being driven home to allocators of resources, about the economic benefits of work in this field. Hopefully some of the holy grails of research, like stem cell research, can deliver some big gains. It would be good to see the work of [...] in relation to spinal injuries leap ahead like we've seen the cochlea program leap ahead, the second generation cochlea implants, we see the wonderful work that's being done in that area.

But the other important thing, I guess, is that I should really finish with a quote from Christopher Reeve, who, I think, was very inspirational. He came and he told us about his passion and his vision, and unfortunately he passed away, but there are a lot of people that now want to make sure that that vision becomes a reality. He actually said that when it comes to research in this area, when it comes to effort in this area, he said: "You either decide to stay in the shallow end of the pool or you go into the ocean. There is no in between." It's certainly a long swim, as I've mentioned, but I think it's very important that we continue this program and that you can all continue searching. But it seems that you've got to be searching out in the ocean, out in the ocean that contains that critical knowledge that, over time, will mean that this spinal disability is a temporary disability and people can return to their normal lives.

So more power to your arm, I wish you every success for your conference. This is a very, very important forum and the government stands behind you and wishes you every success and hopes that each such forum that we have can talk of great new innovations. So congratulations and keep up the good work. Thank you very much.