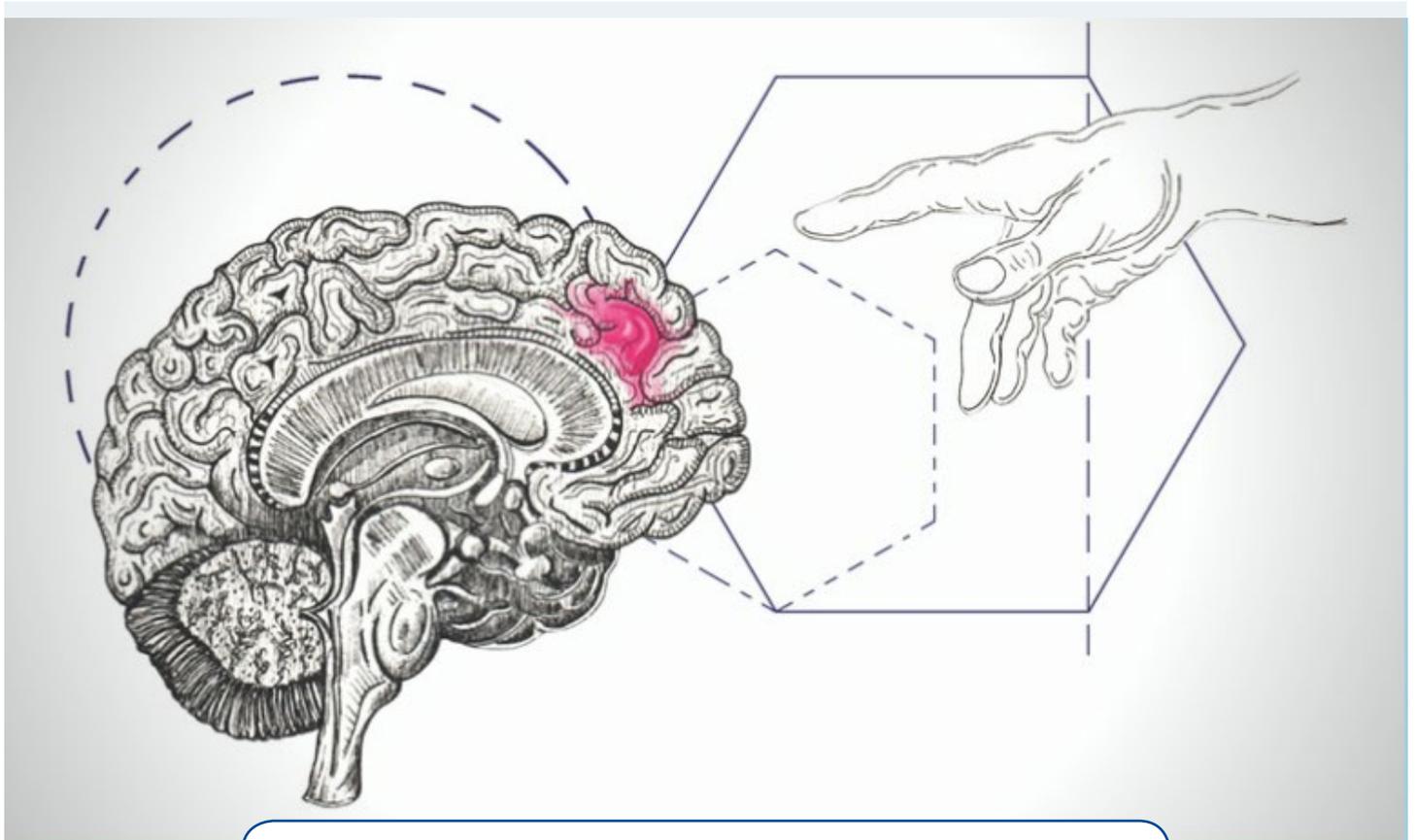


Sunday June 16, 2019



First Australian 5-ALA* (Gliolan®) Guided Resection Training Course



Course Director:

Prof. Dr. med. Walter Stummer

Chair of Neurosurgery, University of Münster, Director Program of Neurosurgery,
University Hospital of Münster, Director Brain Tumor Center, Münster

Hosted by:

Specialised Therapeutics
and
Faculty of Medicine and Health
Sciences Macquarie University Hospital

In collaboration with:



Aesculap-Academy - a B. Braun company

2nd Brain Anatomy and White Matter
Dissection Workshop



photonamic

* 5-ALA: aminolevulinic acid HCl



Macquarie
Neurosurgery



Specialised
Therapeutics®

Overview

Despite surgery, radiotherapy and chemotherapy, the median survival time of patients suffering glioblastoma multiforme (WHO Grade IV) still does not exceed 15 months. Patients with anaplastic astrocytoma (WHO Grade III) have a slightly better prognosis. Due to the infiltrative nature of these tumours, a discussion has been revolving around the usefulness of gross total resection. Nevertheless, in the view of most neurosurgeons, surgical cytoreduction of tumour and adjacent tissue containing infiltrating cells of high-density is an accepted treatment modality for these tumours.

The main aim of surgery is the safe removal of all contrast-enhancing tumour areas. In the past, this has been viewed to be a major factor determining progression and ultimately, survival. Furthermore, emerging novel adjuvant therapies, such as immune therapy, gene therapy or strategies for chemotherapy, will most likely rely on maximal cytoreduction to be as effective as possible. In this context it was observed that concomitant radiochemotherapy followed by adjuvant chemotherapy was most efficacious in patients treated by complete resections as compared to incomplete resections or biopsy.

First introduced by Prof. Dr. med. Walter Stummer in 1998, Gliolan (5-ALA) has become a safe, effective and inexpensive method to visualize and improve the extent of resection, and therefore improve the clinical course of patients with glioblastoma. Gliolan is indicated in adult patients for visualisation of malignant tissue during surgery for malignant gliomas that are glioblastoma multiforme (GBM) on preoperative imaging, and who are intended for resection of the tumour.¹

Objectives

The workshop offers Neurosurgeons and Neurosurgery Accredited Trainees the opportunity to learn how to best use Gliolan in resection of high-grade gliomas.

The workshop will cover:

- The use of 5-ALA fluorescence-guided surgery (FGS) for gliomas to practising neurosurgeons
- The use of Gliolan for different tumour types
- Tips, Tricks and Pitfalls of using Gliolan
- Photodynamic diagnosis in neurosurgery
- Practical demonstrations with video and simulator
- Obtain official Gliolan TGA/MEDSAFE Accreditation

The workshop will include three hours of lectures, followed by two hours of practical demonstrations with video and simulator hands-on training. The workshop will be limited to 30 attendees, with an additional 10 observers able to attend the lectures and observe the practical workshop.

Who Should Attend

Neurosurgeons currently using Gliolan in Australia and New Zealand.

Neurosurgeons and Neurosurgery Accredited Trainees interested in gaining Gliolan accreditation in Australia and New Zealand.

Course Director - Prof. Dr. med. Walter Stummer

The 5-ALA (GLIOLAN®) GUIDED RESECTION TRAINING COURSE is led by a world recognised expert, Professor Walter Stummer MD PhD. He is presently serving as Chairman of the Department of Neurosurgery at the University of Münster and Director of the University of Münster Brain Tumor Center.

After serving 2 terms as Speaker of the Neuro-oncology section of the German Society of Neurosurgery and two terms as Speaker of the Neuro-Oncological Working Group (NOA) of the German Cancer Society, he has recently been elected as Vice-President of the German Society of Neurosurgery. He was instrumental in organising structured neuro-oncological care in Germany in a commission appointed by the German Cancer Society.

His main scientific interests are in the field of neuro-oncology and he is the pioneer of fluorescence-guided resections with 5-ALA. He developed the now widely used 5-ALA method in collaboration with Zeiss, a leading manufacturer of operation microscopes.

Of his 205 articles, 61 focus directly on the 5-ALA method, from applied laboratory research to the operation room. A phase III multicenter trial under his leadership verified the clinical value of 5-ALA guided resection of malignant gliomas, demonstrating improved resection and progression-free survival rates. His first publication of this method in clinical practice was in 1998 and led to the EMA approval of this method in 2007.

He has received a number of prizes for this work, including the AANS/CNS Young Investigators Award and the AANS/CNS Joint Tumor Section's Young Clinical Investigators Award. Other scientific interests are in vascular and skull base surgery.

Symposium Program - Sunday 16 June 2019

9:00 Introduction to the course

9:05 Gliolan - Australian and New Zealand Perspective

9:15 Introduction and Technical Principles
- What does fluorescence signify?

10:30 Tea break

11:00 Practical Demonstrations*

13:15 Lunch

14:00 Tips, Tricks and Pitfalls using Gliolan
Use of Gliolan in Low Grade Glioma
Photodynamic Diagnosis

15:00 Wrap up

Accreditation

Application for Accreditation has been submitted to the Royal Australasian College of Surgeons for inclusion in their CPD programme. The outcome of this application and specific allocation of points will be announced in due course.

Faculty

A/Prof. Antonio Di Ieva
MD, PhD, FRACS

A/Prof. Kate Drummond
MBBS, MD, FRACS

* Practical demonstrations with video and/or simulator

Registration

REGISTRATIONS CLOSE 31 MAY 2019

Please complete this form for each individual participant. Upon receipt of enrolment, a confirmation email will be forwarded to you.

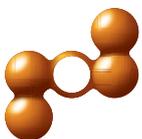
There are two ways of registering:

1. Email this registration form to rsvp@stbiopharma.com or
2. Online at www.surveymonkey.com/r/PY2ND8L or [click here](#).

Name & Surname (Prof/Dr/Mr/Ms)	<input type="text"/>
Specialty	<input type="text"/>
Hospital/Practice	<input type="text"/>
Business Address	<input type="text"/>
E-mail	<input type="text"/>
Daytime phone	<input type="text"/>
Dietary requirements	<input type="text"/>

To register for the 2 Day Brain Anatomy and White Matter Dissection Workshop hosted by AESCULAP ACADEMY contact: vanessa.vladovich-relia@bbraun.com

Supported by



photonic



Specialised
Therapeutics®



MACQUARIE
University



Aesculap Academy - a B. Braun company



Macquarie
Neurosurgery

stryker



synaptive

For New Zealand Neurosurgeons

GLIOLAN is a funded medicine available via the Pharmaceutical Schedule for patients who have newly diagnosed, untreated, glioblastoma multiforme, and treatment is to be used as adjuvant to fluorescence-guided resection, and the patient's tumour is amenable to complete resection.

For Australian Neurosurgeons

PBS Information: This product is not listed on the PBS.

Minimum Product Information

GLIOLAN (aminolevulinic acid HCl)

Indications: Visualisation of malignant tissue in adult patients during surgery for malignant gliomas that are glioblastoma multiforme (GBM) on preoperative imaging, and who are intended for resection of the tumour.

Contra-indications: Hypersensitivity to ALA or porphyrins; Acute or chronic types of porphyria; Pregnancy.

Precautions: Use restricted to neurosurgeons conversant with surgery of malignant gliomas who have completed a training course in fluorescence guided surgery. Due to risk of critical neurological deficit, take special care when resecting fluorescent tissue in the immediate vicinity of an important neurological function and in patients with preexisting focal deficits that do not improve on corticosteroid treatment. Keep a 1 cm safe distance to eloquent cortical areas and subcortical structures. Phototoxicity: Avoid exposure of eyes and skin to strong light sources for 24 hours. Avoid co-administration of other phototoxic substances. Hepatotoxicity: Avoid concomitant hepatotoxic substances for 24 hours. Special populations: Use with caution in patients with pre-existing cardiovascular disease, renal impairment, hepatic impairment. Avoid in pregnancy (Category C) and lactation.

Interactions with Other Medicines: Avoid all photosensitizing agents for two weeks after GLIOLAN. Do not mix with other medicinal products.

Adverse Effects (AEs): AEs following GLIOLAN administration, but occurring before surgery, were uncommon (hypotension, nausea, photosensitivity and photodermatitis). AEs following surgery were a combined effect of ALA, anaesthesia and tumour resection. Please refer to the full PI for more information on procedure-related AEs.

Dosage and Administration: 20 mg ALA HCl/kg body weight, 2-4 hours before anaesthesia. Oral solution is prepared by dissolving the amount of powder of one vial in 50 mL of water.

For further information or before prescribing, please consult the full GLIOLAN Product Information, available at www.ebs.tga.gov.au & www.medsafe.govt.nz

References:

1. Gliolan (5-aminolevulinic acid hydrochloride) Training Manual V1.2, Prof. Dr. med. W. Stummer



GLIOLAN® is a registered trademark of photonamic GmbH & Co. KG, Germany. GLIOLAN® is under license from photonamic GmbH & Co. KG.

190319_GLN 008



Specialised
Therapeutics®

PO BOX 2299 Kew
Victoria 3101 Australia
Telephone 1300 798 820
NZ +64 9801 0299
www.stbiopharma.com