14TH AUSTRALASIAN LYMPHOLOGY ASSOCIATION CONFERENCE
SPEECH BY
HER EXCELLENCY THE HONOURABLE BARBARA BAKER AC
GOVERNOR OF TASMANIA
HOTEL GRAND CHANCELLOR, HOBART, THURSDAY 26 MAY 2022

Good morning and thank you for inviting me to officially open the 14th Conference of the Australasian Lymphology Association (ALA), here in Hobart.

I begin by paying my respects to the traditional and original owners of this land: the palawa people. I acknowledge the contemporary Tasmanian Aboriginal community. I recognise a history of truth, which acknowledges the impacts of colonisation upon our First People. I stand for a future that respects and acknowledges Aboriginal stories, culture, language and history. And on this National Sorry Day, I remember and acknowledge the mistreatment of Aboriginal and Torres Strait Islander people.

We are always delighted to host national and international events of this nature in Tasmania. Your 14th ALA Conference – entitled "Advances in a New Era" – is the first major in-person conference I have had the privilege of opening, because of the severe disruptions caused by Covid. Therefore, I am especially delighted to welcome delegates both here in Hobart and attending virtually, as we all begin to return to more normal business.

I don't know the extent to which Covid may have had an impact on developments in your specialist fields; what is clear is that Covid required a dramatic alteration to traditional conferences and related information exchange, with a significant move to virtual-only gatherings. Fortunately, we are now able to return to attendance in person. However, merging the best of both formats, with physical attendance and the flexibility of virtual attendance, is the likely future.

May I thank Michelle Kern and Kate Rogers, Conference Convenors, and all your ALA colleagues for choosing Hobart. I also extend a very warm welcome to the keynote speakers attending from Belgium, Germany, the United States and, of course, Australia.

May I also thank and welcome the many sponsors and exhibitors associated with this ALA Conference in Hobart.

I did notice that your website enthusiastically describes Hobart as "one of the most charming places in the world" and with a list of Tasmania's top ten attractions. I make a habit of never disagreeing with complimentary remarks about our Island State.

I also noticed from your program, with your nearly 70 sessions over the three days, that time for touring may be somewhat limited and, of course, not possible for virtual delegates. So here is snapshot of Tasmania for you all.

Tasmania is the world's 26th largest island, around the size of Sri Lanka. Where Sri Lanka has a population of 22 million, Tasmania has about 550,000 — a figure I'll come back to later on, in a medical context.

Tasmania has 40,000 years of continuous Aboriginal heritage and culture. The Aboriginal people of lutruwita are the traditional owners and custodians of the land. Colonisation of the island started when it was permanently settled by the British in 1803 as a penal settlement. The Aboriginal population diminished over a period of 30 years during a period of conflicts, especially during the Black War in the 1820s to 30s and the spread of infectious diseases.

Today, there are around 23,580 people identified as Aboriginal or Torres Strait Islander living in Tasmania.[1]. The Tasmanian Government has stated that it is committed to continuing on a pathway to achieve reconciliation with our First Nations people.[2]

Our island of Tasmania is the last remnant of the ancient continent of Gondwanaland, with a legacy of complex geology – we have our planet's largest exposure of dolerite. For delegates here in Hobart, there is a stunning example of the Organ Pipes rocks on the face of our kunanyi/Mount Wellington, which dominates Hobart.

We have eleven major lakes and – wait for it – about 3000 smaller ones, many of which are in our central highlands and are called tarns.

Our Wilderness World Heritage Areas cover almost 20 percent of the island, including many Aboriginal sites.[3]

[1] https:/www.abs.gov.au/census/find-census-data/quickstats/2016/IQS6 accessed25/05/2022.
[2] https://www.premier.tas.gov.au/site_resources_2015/additional_release accessed 10/03/2022.
[3] The Tasmanian Wilderness World Heritage Areas | Discover Tasmania, accessed 19 May 2022.

Tasmania has long been recognised as the principal gateway to Antarctica, and the Commission for the Conservation of Antarctic and Marine Living Resources Secretariat is headquartered here.

Our cultural and intellectual heritage is rich.

- Australia's first novel was written by a Van Diemen's Land convict, Henry Savery, in 1830 and printed in Hobart.[4] He began writing the novel in his prison cell in Hobart, where he was doing time for forgery. The book, called *Quintus Servinton*, was largely autobiographical, about what happens to a well-educated man from a well to do family who makes poor choices, passing forged cheques while in business.
- The movement for our Australian Federation was started in Tasmania in the 1850s and the primary architect of our Australian Constitution was Tasmanian lawyer and politician Andrew Inglis Clark.
- Tasmanians have also been responsible for many inventions, no doubt encouraged by the need for self-sufficiency on our remote island. Inventions include such things as the portable sheepyard; the portable sheep handler, which fits a sheep snugly into a kind of wheelbarrow; a mudbrick making machine; a forestry logging grab vehicle; an iron ore-dressing machine; an automatic potato digger; the Igloo Satellite Cabin, the portable fibreglass cabin for Antarctic Living; the world's first composite beam strengthener for bridges and houses; the world's first laminated tennis racket; the wave-piercing catamaran and the Dynasphere Lightening Protection.[5]

You may be interested to know that, in your medical field Tasmanians have also been innovative. A Launceston obstetrician, Dr William McIntyre, in 1944, in our northern city of Launceston, invented the infant respirator, a humidicrib prototype providing a safe environment for sick or premature babies.[6]

Later, in 1977, Dr Jim Frost designed a cot monitor to check on the breathing patterns of infants thought to be susceptible to Sudden Infant Death Syndrome (SIDS).

In 1995, our University of Tasmania's Menzies Institute for Medical Research – which is not far away from here – identified for the first time a baby's sleeping position as a major contributing cause of SIDS.[7]

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[4] https://www.nma.gov.au/defining-moments/resources/quintus-servinton#:~:text=Quintus%20Servinton%3A%20A, accessed 19 May 2022.

[5] *Tasmanian Inventions & Innovations*, Launceston, Queen Victoria Museum and Art Gallery, 1987, various pagings.

[6] Sir Guy Green op. cit. page 43.

[7] Ibid.

Our Menzies Institute has other significant medical breakthroughs to its credit including that:

- genetic markers are linked to men's risk of developing prostate cancer;
- higher vitamin D levels are associated with a lower relapse risk in multiple sclerosis;
- nerve cells in undamaged parts of the brain can remodel themselves in response to acquired brain injury;
- platelets found in the blood kill the malaria parasite during the early stages of a malarial infection; and
- risk algorithms for prediction of heart failure, and risk assessment for hospital re-admission in patients with heart failure.

Our Menzies Institute came into being precisely because Tasmania is an island. Nearly forty years ago in 1985, Professor Terry Dwyer was appointed Chair of Community Health at our University. He focused on epidemiological research into preventable causes of disease. He recognised that our Island State "provided a perfect source population for unbiased selection of cases and comparison samples or controls. Further, the land area and population size (then about 500, 000 people) made follow-up of cohorts relatively easy. Thus, Tasmania had important advantages for the two major strategies used to search for environmental and lifestyle causes of disease: case-control and cohort studies."[8] This work built on epidemiological research already conducted on iodine deficiency, hydatid disease and asthma in Tasmania.

So, ALA delegates, your conference may be in Australia's smallest capital city but one that has a significant and rich track record in medical science and research.

It is now my honour, with Tasmanian hospitality and on behalf of all Tasmanians, to warmly welcome you all. I wish you all the very best in your important discussions and contributions to the field of lymphology over the next three days.

Oh, may I not forget to wish you to have a fabulous Conference Dinner tomorrow evening at Wrest Point … Australia's first casino, by the way!

Thank you.

[8] The Menzies Centre for Population Health Research | The Medical Journal of Australia (mja.com.au), accessed 19 May 2022.