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Australasian Society for HIV, Viral Hepatitis
and Sexual Health Medicine

Leading Australasian HIV & AIDS Conference highlights cutting-edge research, community and clinical responses to HIV

Media Release

Wednesday 19 September — Sydney, Australia

Health experts will gather at the [2018 Australasian HIV & AIDS Conference](#) in Sydney from 24–26 September to share cutting-edge HIV research, innovations and community and clinical responses to key issues in the national and regional response to HIV.

The conference is hosted and organised by the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM), a peak organisation of health professionals in Australia and New Zealand who work in HIV, viral hepatitis, other blood-borne viruses and sexually transmissible infections.

Ahead of the conference, ASHM is highlighting key themes and research in this year's program, including HIV cure research, the future of HIV treatment, and HIV in Australia's migrant and CALD communities.

"This year's program demonstrates why our region is at the forefront of the global response to HIV, with amazing work coming from clinicians, researchers, community and public health advocates," said ASHM CEO Alexis Apostolellis.

"The Australasian HIV & AIDS Conference continues to be an unparalleled opportunity to bring together a multidisciplinary delegation from around the world to respond to the global and regional challenges of HIV."

The media pack included with this release contains more information, quotes and interview opportunities with experts working in the following areas:

- [The future of HIV treatment](#)
- [HIV cure research](#)
- **HIV in Australia — The gains, the gaps and next steps**
- [Issues facing migrant and CALD Communities — HIV in Australia among Asian-born and African-born gay and bisexual Men](#)
- [Human T-lymphotropic virus type 1 \(HTLV-1\) in Australia: a hidden epidemic](#)
- [The way forward on current issues related to HIV, human rights and the law](#)
- **Indigenous HIV prevention initiatives in Australia — What is happening now?**
- [Now available: Updated Australian guidance for clinicians and other health care providers discussing Undetectable = Untransmittable \(U=U\) with people living with HIV](#)
- **Is virtual HIV elimination in Australia still achievable?**
- **Current research on HIV Pre-Exposure Prophylaxis (PrEP)**

More information:

- See the full conference program: http://bit.ly/HIVAUS18_Program
- Follow and join the conversation on the conference hashtag via Twitter [@ASHMMedia](#) and [#HIVAUS18](#)

For all media enquires, please contact ASHM Media on 0403 184 339 or media@ashm.org.au

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#HIVAUS18 HOT TOPICS: Future of HIV Treatment / Guidelines

Key messages

- Currently there are 32 drugs approved for the treatment of HIV infection; they are highly potent, generally well-tolerated and convenient.
- Research confirms life expectancy for people living with HIV infection who is appropriately treated is now the same as the general population.
- New innovations in HIV drugs include long-acting formulations which could be administered monthly or less frequently.
- HIV prevention is revolutionised with the development and approval of HIV pre-exposure prophylaxis (PrEP) — antiretrovirals that are given to people without HIV to prevent infection.

Available for media interviews

- **Roy M. Gulick, MD, MPH** (Rochelle Belfer Professor in Medicine; Chief, Division of Infectious Diseases)

Further information and other links

- Future of HIV Treatment: <https://az659834.vo.msecnd.net/eventsairaueprod/production-ashm-public/922cd1734d4647c8937ab412f9d300c1>
- ARV Guidelines: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=6f39da2a-da92-4f9c-a176-f3cf5a48271f>
- HIV Self-testing / Testing: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=e1e9eb20-f989-4edd-bcf2-69ce826e4700>
- HIV Self-testing / Testing: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=6ccbb701-55c4-417d-9b8e-5169fc62970f>
- Rapid fire, testing and PrEP: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=018a45b6-150c-41fd-8645-59dd7107eafc>

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#HIVAUS18 HOT TOPICS: HIV Cure – Where are we at?

Key messages

The goals of HIV cure research are:

- **HIV eradication** — the absence of cells capable of replicating HIV, which has been achieved in one person known as the Berlin patient.
- **HIV remission** — the ability to suppress HIV to low levels without HIV medication, which is uncommon and mostly reported in people who started HIV medications during acute HIV infection.
- Early treatment of HIV will reduce the HIV reservoir, preserve immunity and prevent HIV transmission.
- There are many strategies being studied towards a cure: early ART, latency modifying agents, immune therapies (vaccines, antibodies, engineered cells) and gene therapies. Although no strategy thus far has resulted in remission, the field has gained tremendous knowledge that will help inform future trials.
- Future research should include understanding why some people can control HIV without needing antiretroviral therapy (ART) and exploring interventions that could reduce HIV in tissues and generate ongoing immunity against HIV.
- Ethics, behavioral and social science studies are an important part of cure research. At this early stage of HIV remission research, trials are experimental and may involve risks without individual benefit; we need to understand the decision-making, perceptions and attitudes of potential trial participants to conduct these trials in the best possible way.
- We have an opportunity to advance current treatment and prevention through HIV cure research that is working towards reducing viral burden and immune activation and improving immunity against HIV.

The 2018 Australasian HIV&AIDS Conference is presenting highlights from HIV cure research, including:

- Work that establishes sites where HIV persists in the body and methods to try and accurately locate where HIV is and the amount of HIV that is still present. Presenters on this area include: James McMahon, Jenny Anderson, Lucette Cysique
- How the immune system interacts with HIV including how immune exhaustion allows HIV to persist. Presenters include: Vanessa Evans | [Read the abstract](#)
- Ways in which HIV maintains a reservoir of virus in an individual despite someone being on long term antiretroviral therapy. Presenters include: James McMahon
- Understanding ways in which HIV interacts with people when HIV is first acquired. Presenters include Heeva Baharlou | [Read the abstract](#)

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- Laboratory based methods to identify drugs that can impact the HIV reservoir. Presenters include: Jenny Anderson, Katherine Ognenovska | [Read the abstract](#)
- How interruption of antiretroviral therapy is being increasingly performed in cure focused trials to understand if the study interventions work. Presenters include: Jillian Lau | [Link to the session](#)

Available for Media Interview

- **Dr James McMahon**, infectious diseases physician and HIV researcher, The Alfred hospital and Monash Medical Centre
- **Dr. Jintanat Ananworanich**, Associate Director of Therapeutics Research at the U.S. Military HIV Research Program in Maryland, USA, and co-Director of the SEARCH unit at the Thai Red Cross AIDS Research Centre in Bangkok, Thailand

For more information

- HIV Vaccine and Immunopathogenesis: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=5a6fd9a7-ccbe-4951-9b29-9e9afe5d6eee>
- HIV Persistence and Elimination: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=3c71b722-e583-4fbc-8315-8c0580a4bb8b>
- Acute HIV Infection and HIV Cure Research: Where are we now and where are we going? <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=d476ca94-10d3-4a89-89f0-6f5812e3380e>

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#HIVAUS18 HOT TOPICS: Issues facing migrant and CALD Communities — HIV in Australia among Asian-born and African-born gay and bisexual men

Key messages

- In Australia, despite the biomedical interventional successes of HIV pre-exposure prophylaxis (PrEP) and HIV treatment as prevention that have significantly prevented or suppressed HIV in those that can access Medicare services, new data shows that newly-arrived overseas/Asian-born men who have sex with men (MSM) are now more than four times likely to be infected with HIV.
- Further emerging trends in new HIV transmissions, late diagnoses and barriers to accessing ART and PrEP suggest that not enough attention has been paid to MSM from culturally diverse backgrounds, Aboriginal and Torres Strait Islander people.

Quotes attributed to Dr Rick Varma on newly-arrived overseas/Asian-born gay and bisexual men in Australia

- “There has been a significant increase in the proportion of new HIV diagnosis who are recently arrived Asian MSM, attending public sexual health clinics in NSW and Victoria. Despite reporting less risk, they are being diagnosed with much more advanced HIV than their Australian peers. We urgently need to understand factors associated with HIV acquisition in this emergent group and introduce tailored services and health promotion messaging for increased testing at an earlier stage and access to biomedical prevention.”

Quotes attributed to Dr Nick Medland on newly-arrived overseas/Asian-born Gay and Bisexual Men in Australia

- “Newly-arrived overseas/Asian-born men cannot easily access HIV testing, PrEP or treatment due to their complicated private health insurance policies which are not optimised to provide access to this type of health coverage.”
- “PrEP and HIV treatment as prevention is a major investment in public health and will be less effective when part of the community is not covered by it. This health risk endangers Australia's reputation as a safe destination for Australia's \$20 billion per year overseas education industry.”
- “To adequately control HIV in the entire population, Australia should extend the interventions known to prevent HIV transmission to the entire population.”

Quotes attributed to Dr Chris Lemoh on African-born Gay and Bisexual Men

- “Universal access to effective HIV treatment is still not a reality in Australia: this is a failure of leadership at all levels of government and in the professional sector. We still rely on cumbersome workarounds and corporate charity, while state and Commonwealth governments mutually avoid responsibility (with the exception of South Australia). Universal access to HIV treatment is still not explicitly included in our national HIV strategy: the closest we get in the 7th National HIV Strategy is: *Systemic and structural barriers to treatment uptake, such as dispensing arrangements and treatment access across all groups, need to be addressed by Commonwealth, state and territory governments.*”

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- “People labelled as *hard to reach* or *difficult to engage* are usually being dismissed, ignored or not prioritised. There is inappropriately excessive focus on the vulnerabilities of various groups of people, rather than on the structural violence that marginalises them and produces a host of health and social problems, of which HIV is only one.”
- “HIV has become a chronic illness, like diabetes mellitus, but the response to HIV has been ‘tamed’ into a consumerist biomedical model, instead of transforming the response to other chronic illnesses, all of which fundamentally concern social inequity and injustice.”

Available for Media Interview

- **Dr Nick Medland**, HIV Medicine Physician, The Alfred hospital and Monash Medical Centre
- **Dr Rick Varma**, Clinical Services Manager and Staff Specialist Sexual Health, Sydney Sexual Health Centre
- **Dr Chris Lemoh**, General and Infectious Diseases Physician, Clinical Lead, Monash Refugee Health and Wellbeing Service

For further information

- The Epidemiology of HIV among Asian born Gay and Bisexual Men:
<https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=83c3ecd3-e487-426f-95e4-b4e6b917590a>

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#HIVAUS18 HOT TOPICS: Human T-lymphotropic virus type 1 (HTLV-1) in Australia: a hidden epidemic

Key messages

- Leading experts have gathered to share their understanding of the nature of HTLV-1c virology, pathogenesis, clinical presentation, transmission, epidemiology and the concerns that this virus presents for Australian health.
- This is the third time that HTLV-1 has been highlighted as a symposium at the annual Australasian HIV&AIDS Conference.
- This also follows from the Human T-Lymphotropic Virus Type-1 Collaborative Forum held on 28 and 29 August 2018, which included representatives from Aboriginal leaders, community and patient representatives, researchers, representatives from Aboriginal community-controlled health services, clinicians, public health officials, and representatives from Commonwealth and state and territory health departments.

Available for media interview

- **Dr Lloyd Einsiedel**, Executive Director Central Australia, Baker Heart & Diabetes Institute

For further information

- View the program: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=601a1ecc-0388-48ea-8838-f2aeb4f2501e>
- Communique from the Human T-Lymphotropic Virus Type-1 Collaborative Forum – August 2018 <http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-bbvs-1>
- Report back from HTLV-1 Symposium, Tokyo Japan 11-13 July 2018 by Dr Fabiola Martin <https://ashm.org.au/international-programs/htlv-1-symposium-tokyo-2018/>
- Funding to combat Human T-cell Lymphotropic Virus-1 in remote communities – May 2018 [http://www.health.gov.au/internet/ministers/publishing.nsf/Content/B112F569BF289FE5CA258297007A7C3F/\\$File/KW070.pdf](http://www.health.gov.au/internet/ministers/publishing.nsf/Content/B112F569BF289FE5CA258297007A7C3F/$File/KW070.pdf)
- ASHM's update in HTLV-1 and advocacy for developing HTLV-1 workforce education and clinical guidelines: <http://elink.ashm.org.au/m/1/84817838/02-b18253-4d0b336a299f46e5ac6e3176bb777ccd/1/68/6272fae4-6b15-4999-8e1d-428e401d6abf>

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#HIVAUS18 HOT TOPICS: The way forward on HIV, human rights and the law

Key messages

- The Australasian HIV & AIDS Conference aims to increase understanding of the status of Australian law in relation to HIV and Intravenous Drug Use and increase understanding of the relationship between stigma and discrimination, the law and human rights.
- The conference also aims to identify strategies for challenging laws which have potential to entrench stigma/discrimination or undermine basic human rights.

Quotes attributed to Paul Kidd (HIV legal activist)

- “The science is now absolutely clear — people with undetectable HIV viral loads can’t pass on HIV. But the law hasn’t caught up with the science, and it is still uncertain what people living with HIV have to do to stay within the law. Attendees at the 2018 Australasian HIV/AIDS Conference will hear the latest scientific developments around PrEP and U=U, but we don’t know yet what the criminal law implications of these scientific discoveries are. We need governments around Australia to comprehensively adopt U=U as public policy, and prosecutorial authorities to adopt clear guidelines that ensure that people aren’t prosecuted for HIV exposure or non-intentional transmission.”
- “Despite U=U, some people with HIV can’t achieve or maintain undetectable virus, and often these are among the most vulnerable and marginalised people in the community. HIV criminalisation remains a threat for all people with HIV, and it continues to be a significant driver of HIV stigma. We have the tools now to bring an end to new HIV transmissions, but the HIV epidemic won’t end until we also bring an end to HIV stigma. Criminalising HIV does nothing to help keep the public safe; instead, it perpetuates stigmatising ideas about people with HIV and is counterproductive to HIV prevention efforts.”
- “Myths about HIV continue to persist, including the misconception that HIV can be transmitted through saliva. In recent years, several states have passed laws which allow police to test people for blood-borne viruses without their consent if they are alleged to have spat on or bitten an emergency worker. These laws are an unscientific, unjustified and unnecessary intrusion on the rights of people with HIV, hepatitis C and other transmissible diseases. No-one should be forcibly tested based on long-disproved ideas about the transmission of HIV.”

Available for media interview

- Interview: Paul Kidd, HIV Legal Activist

For further information

- View the program: <https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hiv-aids-conference/program/Agenda/AgendaItemDetail?id=62e842bf-ff84-41b8-9611-d3ebc8933e39>
- View ASHM’s Guidance for clinicians and other health care providers discussing Undetectable = Untransmittable (U=U) with people living with HIV: <https://ashm.org.au/HIV/UequalsU/>

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#HIVAUS18 HOT TOPICS: Updated Australian guidance for clinicians and other health care providers discussing Undetectable = Untransmittable (U=U) with people living with HIV — now available

Key messages

- ASHM launched the *Guide for clinicians to discuss Undetectable=Untransmittable (U=U)* in conjunction with a pre-conference dedicated to exploring the science behind U=U at the recent International AIDS Conference in Amsterdam (July 2018). The ASHM guidelines featured as an example of how supportive public health policy from the scientific evidence to support community action.
- With the release over recent years of findings from four key studies looking at how HIV therapy prevents the sexual transmission of HIV, it is now clear that for people living with HIV who are able to maintain an undetectable viral load there is effectively no risk of sexually transmitting the virus to an HIV-negative partner.
- These updated guidelines now include the results from the Partner 2 Study which lends even more evidence of the scientific fact that there is ZERO risk of the sexual transmission from someone with an undetectable viral load.
- With the overwhelming support and interest in these guidelines from the global community which was demonstrated in Amsterdam, a jointly authored foreword has been added from two of the world's leading clinicians and researchers working in HIV — Professor Sharon Lewin and Dr Kenneth Mayer have added their support to the guidelines and highlight the pressing need to support both clinicians and their patients in evidence-based decision making.
- U=U is a health equity initiative led by the Prevention Access Campaign and supported by prominent and international community, clinical and research advocates including WHO, UNAIDS, US CDC & NIH as well as ASHM. The initiative raises awareness of the evidence which makes it clear that for people who take antiretroviral therapy daily as prescribed and achieve and maintain an undetectable viral load, there is effectively no risk of sexually transmitting the virus to an HIV-negative partner.

Available for media interview

- **Dr James McMahon**, infectious diseases physician and HIV researcher, The Alfred hospital and Monash Medical Centre

Quote attributed to Alexis Apostolellis (ASHM CEO)

- “This guidance document exemplifies how important it is to ensure that we continue to invest in translating community messaging into clinical guidelines for the health workforce in a manner that is accessible and useful for everyday practice. ASHM is proud to continue to support our sector with evidence-based tools that are responsive to a rapidly evolving landscape and representing the latest best practice.”

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Quote attributed to Bruce Richman (Founder of the Prevention Access Campaign)

- “These guidelines are excellent. Australia is setting the pace for other nations to follow. This is a major advance, not only for what it means about the central role played by people with HIV in ending new HIV transmissions, but also because of the major, consequent affect it has on HIV stigma. The campaign message of U=U is helping reduce fear and prejudice that underpin HIV-related stigma.”

Quote attributed to Dr James McMahon (Infectious diseases physician and HIV researcher; ASHM Technical Lead)

- “The U=U guidance document provides important advice to assist providers in Australia when discussing HIV transmission and the impact of antiretroviral therapy in real life settings. It is critical that the U=U message continues to be supported and promoted. By providing guidance tailored to the Australian context and form a trusted organisation such as ASHM, people with HIV, and those at risk of acquiring HIV will have the best available information to maximise their own health and the message of U=U will be further advanced.”

Quote attributed to Nic Holas (Co-founder The Institute of Many – www.theinstituteofmany.org)

- “The communities of People Living with HIV can now breathe a little easier, knowing that this up-to-date, scientifically proven information is getting out there. The risk really is zero. These U=U guidelines are a testament to the decades-long partnership between People Living with HIV and out HIV clinicians, and one the clearest indications that we are finally bringing HIV into the 21st century.”

For further information

- Download the Clinical Guidance: <https://ashm.org.au/HIV/UequalsU/>
- Zero HIV transmissions in PARTNER study after gay couples had sex 77,000 times without condoms – an undetectable viral load stops HIV: <http://i-base.info/htb/34604>

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