

Sir Charles  
Gairdner Hospital

Mr Paul White  
Manager Informatics Systems Development  
Centre for Genetic Epidemiology & Biostatistics  
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AUSTRALIA

14<sup>th</sup> May 2009

Dear Paul,

**Re: WAGER NHMRC Enabling Grant renewal letter of support**

I am pleased to provide a letter of support for WAGER as Director of the WA Sleep Health study (WASHS). This study is a prospective, sleep clinic cohort study which has been designed to investigate the aetiology and consequences of obstructive sleep apnoea. Thus far since 2005 we have collected questionnaire data, sleep study data, anthropometric data and blood samples for genetic and biochemical analyses from all consenting new sleep clinic patients at the Sir Charles Gairdner Hospital Sleep Clinic. We currently have over 3000 patients enrolled in this study which is already approaching the largest single database of obstructive sleep apnoea patient data in the world. Furthermore we established the capacity to link the health information from these patients to other key databases, including core WA Department of Health data sets and therefore obtain longitudinal health information on these subjects. This resource is an invaluable tool for investigating the causes, complications, and survival of OSA patients and may contribute to improved management of patients with OSA.

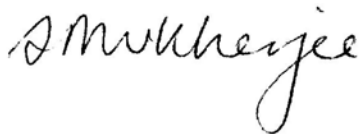
Our decision to utilize the services of WAGER was a relatively easy one. We planned to collect large amounts of clinical information from over 5000 participants; it was clear that we needed highly sophisticated, time efficient informatics support to allow careful storage of data but also the ability to utilize, access and analyse these data as needed. WAGER meets all our requirements and has been a major factor in the success of our project. It would be financially impossible to manually enter the data contained in WAGER; several data entry staff would be necessary and our study has been funded thus far with a few small grants. We currently have 4 Doctoral students, 11 medical students and 2 Honours students working on analyzing the data and will have several important publications in press by end 2009. Another important advantage to the WAGER system has been the ability to add in various components as new clinical information is added, e.g. DEXA scanning and carotid intimal media thickness scanning.

We have also been able to foster collaboration with interstate and international groups because of the state of the art informatics system that underpins our research. There has been fruitful exchange of questionnaire and other data collection instruments between institutions and we hope that the WASHS data collection tools will be adopted in various sites in Melbourne and Brisbane in 2009 and WAGER will provide the informatics support to allow this to happen. It is clear from long discussions with my colleagues internationally and interstate that no such informatics support is available to these colleagues and they are particularly interested and envious of the resource that exists here in Australia.

It is essential for our study that a resource such as WAGER continues to be funded since after 4 years we are finally in a good position to apply and receive hard funding to continue and extend our research further and to develop interstate and international collaborations which will require high-level informatics input, such as WAGER.

I strongly support the continued funding of this invaluable research tool and commend the WAGER team on their professionalism and ability to provide high level expert support to varied clinical research groups in WA and interstate.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'S Mukherjee', written in a cursive style.

Dr Sutapa Mukherjee MBBS, FRACP, PhD  
Sleep Physician, WASDRI