

INVESTIGATION INTO THE DEATH OF [REDACTED]  
COURT REF: 2018 005623  
26 April 2021



MEDICAL ONCOLOGY GROUP OF AUSTRALIA INCORPORATED

A.B.N 94 601 175 669

Monday 26 April 2021

Marde Bevan  
Coroner's Registrar  
Coroners Court of Victoria  
65 Kavanagh Street  
Southbank Vic 3006  
[cpuresponses@coronerscourt.vic.gov.au](mailto:cpuresponses@coronerscourt.vic.gov.au)

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Dear Marde Bevan,

**RE: INVESTIGATION INTO THE DEATH OF [REDACTED]  
COURT REF: 2018 005623**

I am writing on behalf of the Medical Oncology Group of Australia Incorporated (Y1578748) (**MOGA**) in reply to your letter dated 19 February 2021. I am responding to the recommendation issued by Coroner Sarah Gebert's Finding without inquest into the death of [REDACTED], pursuant to section 72(2) of the *Coroners Act* 2008 (Vic) (**the Act**).

On behalf of MOGA and its members, I express our sincere condolences to [REDACTED] family for their loss.

The Coroner's recommendation to MOGA was:

*That the PMCC [Peter MacCallum Cancer Centre] and MOGA make a submission to the Medical Services Advisory Committee to consider the feasibility of funding DYPD [(sic) Dihydropyrimidine dehydrogenase (DPYD)] testing for all patients prior to commencement of fluoropyrimidines in Australia and to determine the support required to implement a DPYD testing program to remove the major barrier of cost to testing and provide oncologists and patients the choice to undertake DYPD (sic) testing when clinically indicated.*

The Coroner's recommendation pursuant to section 72(2) of the Act is unable to be implemented.

Section 72(2) of the Act provides:

*A coroner may make recommendations to any Minister, public statutory authority or entity on any matter connected with a death or fire which the coroner has investigated, including recommendations relating to public health and safety or the administration of justice.*

MOGA is a professional organisation for medical oncologists in Australia; accordingly MOGA is not a "public statutory authority or entity" within the meaning of section 72(2) of the Act for the purpose of the Coroner's statutory powers to issue recommendations.

I note that the Coroner's recommendation was also directed to Peter MacCallum Cancer Centre which, as a public hospital, appears to be a public statutory authority within the meaning of section 72(2).

Further, MOGA considers that submissions to the Medical Services Advisory Committee to assess emerging evidence and best practice in relation to DPYD screening in Australia, and issues concerning any inclusion on the Australian Medical Benefits Schedule, are most appropriately made to the Committee by the healthcare or medical diagnostic company or companies which holds the intellectual property to the DPYD diagnostic screening.

Yours Sincerely,



Associate Professor Prunella Blinman  
Chair, Medical Oncology Group of Australia  
Royal Australasian College of Physicians  
145 Macquarie Street  
Sydney NSW 2000

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Professor Danny Rischin  
Director of Medical Oncology, Peter MacCallum Cancer Centre  
[danny.rischin@petermac.org](mailto:danny.rischin@petermac.org)