MAY 2025

ABNA EXCHANGE

OFFICIAL NEWSLETTER OF THE AUSTRALASIAN BIOSPECIMEN NETWORK ASSOCIATION

ABNA's Noticeboard

Awards and Scholarships

- Inaugural Asia-Pacific Engagement Travel Grant
- Achievement in Australasian Biobanking Award
- Emerging Biobanking Leader Scholarship

APPLICATIONS & NOMINATIONS NOW OPEN!!

Seminar 2 - ABNA Seminar Series

- From Biobank to Breakthrough: Downstream Applications. June 17th 12:00pm AEST

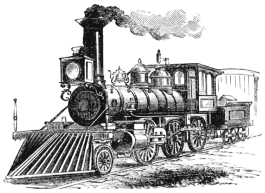
REGISTER NOW

ABNA Annual Conference

- Registrations are now open for ABNA 2025: Biobanking Evolving Through Time!

REGISTER NOW to enjoy early bird rates and we hope to see you in beautiful Newcastle!

All aboard the ABNA express!



May marks the start of a big season for ABNA - with a full calendar of upcoming events, initiatives, and milestones there's a lot to get excited about!

We reveal the speaker lineup for Seminar 2 of the 2025 series. This seminar will focus on Downstream Applications, a topic that's sure to resonate with many of us. You'll find all the details in the pages ahead.

A reminder that registrations to our annual conference, ABNA 2025: Biobanking Evolving Through Time, are now open and the website is live. Be sure to keep in mind the key dates for early bird registration and abstract submissions. You'll also get a sneak peek at some of our featured speakers and things to do around Newcastle on the May edition of the Conference Corner blog.

We are thrilled to announce the opening of nominations for three exciting ABNA initiatives: the biennial Achievement in Australasian Biobanking Award, the Emerging Leader Scholarship, and an exciting new opportunity - the ABNA Asia-Pacific Engagement Travel Grant. For full details, keep reading - please share this news widely, particularly with colleagues in the Asia-Pacific, as we strive to expand our regional partnerships.

This month's featured article, Clinical Trials Through Time: A Historical and Ethical Perspective, is written by yours truly in celebration of Clinical Trials Awareness Day (20 May). Plus, don't miss an engaging conference wrap-up by Jennie Hui, who shares insights from her first-ever ISBER meeting.

With all that and more, I'll let you get reading. Enjoy!

Georget

5 Minutes with a Biobanker

We approach a different professional in the biobanking arena with the same five questions each month.

This month Dr Sophie Holland, Research Fellow from Securing Antarctica's Environmental Future (SAEF), Monash University answers our questions.

Sophie is also one of the invited speakers for ABNA's upcoming Seminar series part 2

THE QUICK QUESTIONS

Are you left or right handed?

Left

Would you rather play it safe or risk it all?

Risk it all

Should pineapple go on pizza?

Yes

Do you prefer to type or hand-write meeting notes?

Type

Dark vs milk chocolate, which one would you chose?

Milk chocolate

1. **What was your first job in biobanking?**
   This one! I wouldn't necessarily call myself a biobanker, but this research position has allowed me to collect a remarkable range of samples from across Antarctica which we are using to better understand how microbial life functions on the world's coldest, driest, highest, and windiest continent.
2. **How long has your biobank been operating and what is your 'elevator pitch' for your biobank/job?**
   The ARC SRIEAS Securing Antarctica's Environmental Future has been running for 4 years now and our mission is in the name. While we are not a biobank, we have collected an impressive array of samples from across Antarctica and the sub-Antarctic in order to better understand the region's life and biodiversity through lab work and experiments. What happens in Antarctica doesn't stay in Antarctica - despite its remoteness, the continent is intimately connected to Australia and the rest of the world through the oceans and the atmosphere. In the face of climate change, Securing Antarctica's future is vital for securing our own futures.
3. **What is the craziest thing you have done to save a sample/s?**
   On our last expedition to Antarctica, our time at one of the remote camps was cut short due to a big incoming storm. I was collecting samples literally until 30 min before the Twin Otter plane came to collect us, while the rest of the team packed down the camp (including my tent and all my sleeping gear - bless them). I knew it was very unlikely that I'd ever get out to that location again so while our safety came first, the science was a close second!
4. **What has been your favourite moment (so far) in your biobanking career?**
   I feel incredibly lucky that I have been on two Antarctic expeditions. My favourite part is the deep field camps, where there's just been a small group of us setting up camp out on a glacier, with incredible mountains surrounding us on one side and endless ice stretching to the horizon on another. Being in such remote places makes me feel so vibrantly alive, connected to the natural world, and in awe at the power and magic of nature.

ABNA Travel Grant, Award & Scholarship news

Asia-Pacific Engagement Travel Grant

ABNA is proud to continue its longstanding commitment to advancing collaboration in biobanking and biospecimen Science. As part of the next step in our vision, we are excited to broaden our reach by engaging more colleagues from across the Asia-Pacific region. To support this goal, ABNA is launching a new initiative: The Asia-Pacific Engagement Travel Grant, which is designed to support researchers and delegates in Biobanking and Biospecimen Science from across Australasia, Southeast Asia, and the Pacific. This initiative aims to assist individuals who may otherwise be unable to attend ABNA's Annual Conference due to financial constraints. The grant will provide recipients with the opportunity to present their work, foster regional collaboration, and elevate underrepresented voices from across the Asia-Pacific region.

Applications are now open and will close by Sunday 27th July 11.59pm AEST

THE FINE PRINT: The Asia-Pacific Engagement Travel Grant is open to applicants residing in Australasia, Southeast Asia, or the Pacific who are engaged in biobanking and biospecimen science across human, non-human, or environmental domains. Eligible applicants must be professionally affiliated with academic, research, government, or non-governmental institutions. Scholarships are merit-based, with preference given to those demonstrating significant contributions or potential relative to their opportunities and are awarded by the ABNA Management Committee. Up to three scholarships will be awarded annually. Recipients must register for the ABNA Annual Conference within four weeks of notification. The grant includes free conference registration, a one-year ABNA membership, a complimentary Gala dinner ticket, and up to AUD $2,000 reimbursement for travel expenses. To apply, contact the ABNA Secretary (carmel.quinn@unsw.edu.au) to request the application form, and submit it along with a letter of support and other required documents.

Achievement in Australasian Biobanking Award

Back for the second time, this is ABNA's biennial award designed for current members to recognise another member, past or present, who has contributed and/or continues to contribute to the Australasian biobanking community. Nominations must be submitted using the official form by Sunday 27th July 11.59pm AEST.

Nominees can include biobankers, clinicians, pathologists, zoologists, herbarium managers and/or researchers who have demonstrated ABNA's aims to support of Australasian biobanking, promote ethically sound high quality specimens for research, promote the benefits of biobanking and enhance knowledge amongst the biobanking community.

Nominations are now open and can be submitted HERE

Emerging Biobanking Leader Scholarship

Applications to our yearly emerging biobanking leader scholarship is also now open and applications must also be submitted by Sunday 27th July 11.59pm AEST. To apply, please contact the ABNA Secretary (carmel.quinn@unsw.edu.au) to request the application form

Please note: ABNA defines an emerging leader as a biobanking professional who has recently moved into a position of leadership or who can demonstrate leadership qualities in their own biobanking community or who is working in an emerging field of biobanking. Review of eligibility will involve a panel of both ABNA committee and external ABNA partners.

Newcastle Conference Corner

Only five months to go until ABNA's Annual Conference – but who's counting? The May edition of our Newcastle Conference Corner blog series is up on the website! Dive in to discover all the exciting things to see and do around the main conference venue, plus a sneak peek at the various Newcastle locations ABNA will be using this year. There's plenty to explore, experience, and enjoy – don't miss it!

ABNA's website is now live and conference registrations have opened.

Last month the blog gave a summary of the speakers in the Roaring Twenties Session (see banner below). This month the blog gives the inside scoop on the speakers from the University of Newcastle. These speakers will be showcasing local research and innovation over multiple sessions in this years program.

Read the May blog on our conference website

CLICK HERE

Clinical Trials Through Time: A Historical and Ethical Perspective

In celebration of clinical trials awareness day - 20 May

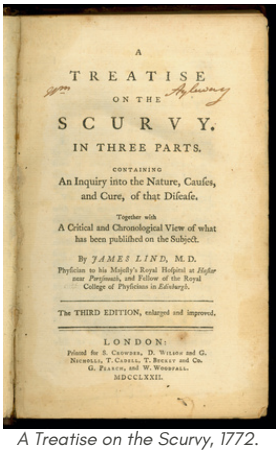
By Dr Georget Reaiche-Miller

As we are becoming more familiar with days of significance, one day in May that stands out in biobanking and biospecimen science is "Clinical Trial Awareness Day" which is celebrated internationally on the 20th of May. We have all heard of clinical trials, ethics and consent but this article will take you back in history to showcase how clinical trials originated, what ethical and unethical practices were carried out, and how we are lucky to experience the trials we do today.

Clinical Trials (CTs) are research studies involving people, designed to evaluate medical (medicines, vaccines, etc), surgical and surgical procedures, or behavioural interventions. Biobanking, both of the specimens and the data associated with the study is paramount for all clinical trials. CTs are essential for advancing healthcare and are the primary process for determining whether new treatments are safe and effective. Ethical CTs undergo different stages before a treatment can be safely distributed to the population. There are four phases of CTs, Phases I-IV, moving from safety testing through to post-market monitoring. The study has to be controlled and randomised, including placebo groups. Informed consent is required for participants who volunteer, and each trial must be ethically reviewed, using strict global and national governance standards. However, this has not always been the case. Did you know that the first "clinical trial" ever recorded dates back to 1700's? Let's dive into some history.

James Lind and the 1747 Scurvy Clinical Trial: A Landmark in Medical History

In the 18th century, scurvy was a devastating disease, particularly among sailors who embarked on long sea voyages. Symptoms included fatigue, swollen and bleeding gums, joint pain, and eventually death. At one stage it was estimated that more British sailors died from scurvy than from combat, making it one of the most pressing medical issues of the Royal Navy. Although scurvy had been known since ancient times, and some empirical knowledge suggested a dietary connection, the precise cause and effective treatments remained elusive. This was the context in which James Lind, a Scottish naval surgeon, undertook his famous experiment aboard HMS Salisbury in 1747.


A
TREATISE
ON THE
SCURVY.
IN THREE PARTS.
CONTAINING
An Inquiry into the Nature, Causes,
and Cure, of that Diſeaſe.
Together with
A Critical and Chronological View of what
has been published on the Subject.
By JAMES LIND, M. D.
Phyſician to his Majeſty's Royal Hoſpital at Haſlar
near Portſmouth, and Fellow of the Royal
College of Phyſicians in Edinburgh.
The THIRD EDITION, enlarged and improved.
LONDON:
Printed for S. CROWDER, D. WILSON and G.
NICHOLLS, T. CADELL, T. PEARCH and Co.
G. PEARCH, and W. WOODFALL.
MDCCLXXII.

A Treatise on the Scurvy, 1772.

Image courtesy of the University of Virginia, Historical Collection
https://exhibits.hsl.virginia.edu/treasures/james-lind-1716-1794/index.html

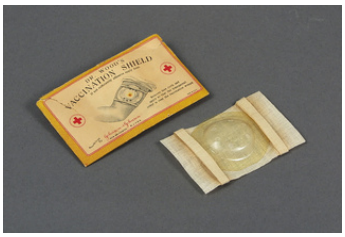
James Lind (1716-1794) had a keen interest in the diseases affecting the men at sea and sought rational, empirical solutions rather than speculative theories. Lind believed that direct evidence from controlled experiments was the most reliable basis for medical practice. While serving on HMS Salisbury, Lind decided to test the prevailing theories of scurvy treatment. On May 20, 1747, he selected 12 sailors who were suffering from similar stages of scurvy and divided them into 6 pairs, ensuring their conditions were comparable. Each pair received a different treatment: Cider approx. 1L per daily, Elixir of vitriol (dilute sulfuric acid) taken three times a day, Vinegar six spoonfuls three times a day, Seawater approx. 250ml daily, Oranges and lemons two oranges and one lemon daily and a concoction of Barley water and a paste of garlic, mustard seed, dried radish root, and gum myrrh. The trial only lasted 6 days, as the citrus fruits quickly ran out. However, the results were dramatic. The pair who consumed oranges and lemons showed remarkable recovery. One was fit for duty after the 6 days and the other was well enough to assist in caring for the other patients. Lind published his findings in 1753 in A Treatise of the Scurvy. Despite the clarity of his results, his work initially had little impact with The Royal Navy was slow to adopt the recommendations, partly due to logistical issues and scepticism. There was also no understanding of vitamin C, the true cause of scurvy.

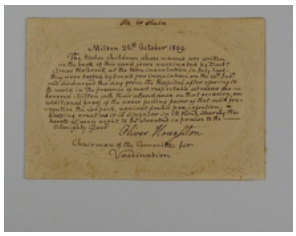
It wasn't until the 1790s, under the leadership of naval surgeon Gilbert Blane, that the British Navy mandated the inclusion of lemon juice in sailors' rations. The result was a dramatic decline in scurvy cases and a significant improvement in naval health. James Lind's 1747 scurvy trial was a pioneering moment in medical science. Though it took decades for its lessons to be fully implemented, his work ultimately saved thousands of lives and cemented his legacy as a founder of CT methodology. Lind's experiment is now celebrated as one of the first recorded controlled CTs by using control groups, showing an effort to standardise conditions among participants and comparing multiple treatments in a systematic fashion.

Edward Jenner and the Smallpox Vaccine (1796)

This is a study I have written about before as one of the very first vaccines and use of "biobanks" in history. In brief, in the late 18th century, smallpox was one of the deadliest diseases in the world, responsible for countless deaths and disfigurements. Efforts to prevent it included variolation—the deliberate infection with smallpox to induce immunity—which was risky and sometimes fatal. Enter Edward Jenner (1749–1823), an English physician with a keen interest in natural science and medicine. Jenner observed that milkmaids who had contracted cowpox—a much milder disease—seemed immune to smallpox. On 14th, May 1796, Jenner conducted a groundbreaking experiment. He took pus from cowpox sores on the hand of a milkmaid named Sarah Nelmes and inoculated an eight-year-old boy, James Phipps. The boy developed mild symptoms but recovered quickly. A few weeks later, Jenner exposed Phipps to smallpox. The boy did not develop the disease—confirming Jenner's hypothesis that cowpox conferred immunity to smallpox. Jenner published his findings in 1798. Though initially met with skepticism, his method quickly gained acceptance across Europe and beyond. The term "vaccine"—from vacca, Latin for cow—was coined from his work. Jenner's innovation laid the foundation for immunology and eventually led to the eradication of smallpox by the World Health Organization in 1980—the only human disease ever eliminated globally.

a) 

b) 

c) 

a) One Vaccination - Vaccine Virus, Smallpox Vaccine (V-1)
b) Dr. Wood's Vaccination Shield
c) Card Commemorating a Test of the Effectiveness of Vaccination on Twelve Children in Milton, Massachusetts

Images courtesy of the Smithsonian National Museum of American History

Unethical trials and ethical frameworks that emerged.

Unfortunately, history has shown that the ethical treatment and conduct of patients in CTs have not always been upheld, including in the case of Edward Jenner's experiment described above. While there have been several other examples, below are three of the most significant cases that contributed to the development of the ethical frameworks we follow today.

Nazi Experiments (World War II, 1939–1945)

During World War II, Nazi physicians and scientists conducted inhumane medical experiments on thousands of prisoners. These experiments were conducted without consent and resulted in extreme suffering, permanent injury, or death. One class of experiments explored the effects of freezing: prisoners were immersed in ice water or exposed to freezing temperatures to study hypothermia and methods of rewarming. Many died during or after the procedures. In other experiments, victims were placed in low-pressure chambers to simulate high altitudes, often leading to severe trauma or death. Sterilization and reproductive experiments were also performed, in attempts to find efficient means of mass sterilization, whilst in surgical experiments, removal of organs, limbs, or performing vivisection were done without anaesthesia. Twin studies by Dr. Josef Mengele sought to explore heredity, often resulting in mutilation or death. After the war, the Nuremberg Trials (1946–1947) exposed these atrocities and several of these doctors were convicted of war crimes and crimes against humanity. The Nuremberg Code (1947) was developed in response, establishing foundational principles for ethical research, including voluntary informed consent, the necessity of scientific validity, and the avoidance of unnecessary suffering.

Tuskegee Syphilis Study (1932–1972)

The Tuskegee Syphilis Study was conducted by the U.S. Public Health Service in Macon County, Alabama, to observe the natural progression of untreated syphilis in African American men; this study went on for 40 years. A total of 600 Black men were enrolled—399 with syphilis and 201 without—under the pretence of receiving free medical care. The study aimed to monitor the progression of the disease without intervention. However, by the time the study concluded, effective treatments were available. The participants were not made aware of the true purpose of the research, and over 100 individuals lost their lives as a consequence. The disease was also passed to spouses and children. There were a number of major ethical violations in this study. A key one is the lack of informed consent as participants were never informed of their diagnosis or the true purpose of the study. These included the deception of participants as they were told they were being treated for "bad blood," a vague term, but were not actually treated for syphilis. Treatment was withheld from patients even after penicillin became the standard and effective treatment for syphilis in the 1940s. Finally the study was publicly exposed in 1972 by a whistleblower and press coverage, causing national outrage and it was immediately halted. The Tuskegee Study profoundly influenced ethical standards and led to the creation of the National Research Act (1974) and the Belmont Report (1979), which emphasized respect for persons, beneficence, and justice in research.

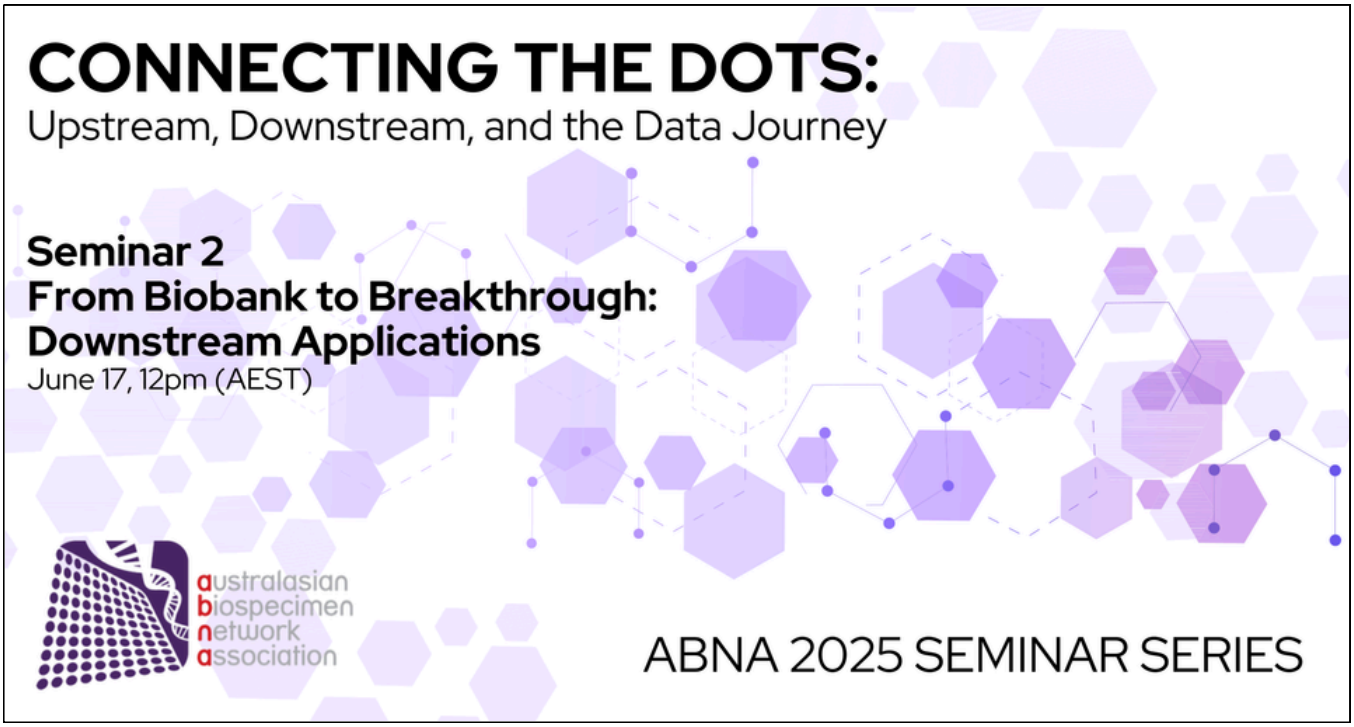
Willowbrook Hepatitis Study (1956–1970)

The Willowbrook State School in Staten Island, New York, was an institution for children with intellectual disabilities. Researchers, including Dr. Saul Krugman, conducted studies to understand hepatitis transmission and immunity. Intellectually disabled children at Willowbrook were intentionally infected with hepatitis. Researchers justified this by claiming hepatitis was already prevalent in the institution and that the research could lead to preventive measures. Participation was often presented as a condition for admission to the overcrowded facility, raising serious concerns about coercion. In this study there was clear lack of true informed consent as parents signed consent forms, but were often misled or felt compelled due to limited alternatives for care. The children were part of a doubly vulnerable population; minors and with disabilities and infecting children with a potentially serious disease for research purposes was a profound ethical violation by causing deliberate harm. Thankfully, the study came under intense scrutiny in the late 1960s and was discontinued by 1970. The Willowbrook scandal contributed to growing awareness of the need for ethical protections for research subjects, especially those unable to give consent.

Ethical frameworks that emerged from unethical trials

DOCUMENT	YEAR	IN RESPONSE TO	MAIN CONTRIBUTION
Nuremberg Code	1947	Nazi experiments (WWII)	Informed consent and protection from harm
Declaration of Helsinki	1964	Willowbrook study and global ethical guidance for physicians	Research ethics for human medical research
Belmont Report	1979	US response to the Tuskegee study	Principles of respect, beneficence, justice

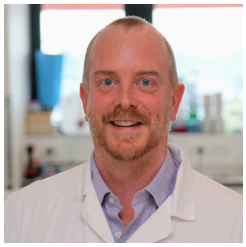
In summary, these three studies, despite differing contexts, share ethical failures: lack of informed consent, harm justified by scientific aims, and exploitation of vulnerable groups. Their exposure led to major reforms - foundational guidelines and documents that continue to shape ethical human research today.



Seminar 2 is ready to roll! as part of the 2025 Seminar Series. June 17th 12:00pm AEST

This seminar explores the downstream applications of sample collection for future research and innovation — 'From Biobank to Breakthrough'. Featuring three speakers with diverse expertise, this event offers a unique opportunity to gain valuable insights into the complexities of sample collection and processing across a range of disciplines.

Dr Sophie Holland is a Research Fellow working with the ARC SRI Securing Antarctica's Environmental Future (SAEF) at Monash University. Sophie will discuss how they collect and store precious samples for future work, as well as the downstream processing and experiments that are currently being undertaken in their lab. These include meta'omics, biogeochemical assays, and microcosm experiments to simulate future climates.



A/Prof Daniel Gough is a biochemist and cancer biologist. Daniel leads the Signal Transduction in Cancer laboratory in the Centre for Cancer Research at the Hudson Institute of Medical Research, Victoria, and will introduce the Predictive and Prognostic Biomarkers in Lung Cancer study. This collection includes diagnostic biopsy, sequential plasma and viable haematopoietic cell storage from throughout the patient journey for thoracic cancer patients at Monash Health. He will discuss the collection goals for multiomic analysis of patient materials and the use of spatial transcriptomic analysis to identify biomarkers of immune checkpoint therapy response in mesothelioma patients.

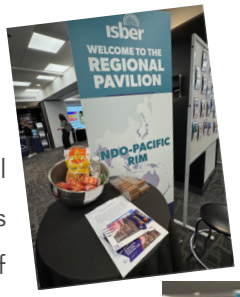
Prof Wojtek Goscinski is the Chief Executive Officer of the National Imaging Facility (NIF). Wojtek will provide an overview of the NIF, Australia's advanced imaging network—its strategy, programs, and key initiatives that support Australian scientists and clinician researchers in capturing nationally significant imaging data collections. NIF is a partnership of university, medical research institute, and government science agency partners, that operates under the Commonwealth Government's National Collaborative Research Infrastructure Strategy.

Click HERE to register for this virtual seminar series

Reflections from ISBER 2025: Biobanks, Banter & Yellow Gin

By Jennie Hui

Montreal provided a stunning backdrop for ISBER 2025, held from 12 to 16 May 2025. The city was alive with spring energy, sunny skies, vibrant streets, and just warm enough to make us forget about the -80°C freezers we obsess over. From the cobblestone charm of Old Montreal to rooftop bars that doubled as strategy hubs, the atmosphere was perfect for both scientific exchange and spontaneous connection.



Regional Pride: The Indo Pacific Rim Pavilion

One of the highlights of the conference was the Indo Pacific Rim Regional Pavilion, proudly representing Australia and its regional neighbours. This vibrant space showcased the strength, diversity, and innovation of biobanking communities across the Indo Pacific region. It became a hub for meaningful conversations, cross-border collaboration, and cultural exchange. And yes, Tim Tams, Indian savory treats and Cadbury chocolates were all instant crowd-pleasers. Thank you Wayne for coordinating!

Behind the Scenes: Site Visit to C-BIG

The site visit to C-BIG Repository (The Neuro's Clinical Biological Imaging and Genetic Repository) offered a rare and insightful look into the operations of a modern, research-integrated biobank. From its seamless integration with patient care to its commitment to open science and data sharing, C-BIG exemplifies the future of biobanking. A personal highlight? Holding a tube of mini-brains. These tiny and intricate organoids made science feel tangible and awe-inspiring, a true miniature showcase of intelligence and miracle of life!

The Great Water Quest of ISBER 2025

This one deserves its own chapter in my opinion. Picture this: sixteen biobankers walked into a fancy restaurant, thirsty, hungry and clearly not dressed for fine dining. We sat down, admired the menu (or tried to anyway, it was so dark!), and hydrated (with water) like champions. However, it quickly became clear that this wasn't the place for a relaxed group chat. So, in true biobanker fashion, we adapted! We thanked the staff, sincerely, because the water was exceptional. We left, declaring to the staff "We really love your water!". What followed was a joyful, laughter-filled stroll through the streets of Montreal China-town, in search of food and a place where we could actually see each other. Eventually, we found a cozy dumpling spot, shared some great dumplings and continued our conversations.

The Gin Revelation

Somewhere between sessions on participant engagement and value of biobanking, we also discovered Ungava Gin, a Quebec craft spirit made with rare Arctic botanicals. What truly set it apart was its colour: a vivid, fluorescent highlighter yellow. The kind of yellow that streaks across a spreadsheet and demands attention. Ungava shifted the conversation in many different directions. Who knew a biobanking conference would also spark a debate over the official colour of gin?

Celebrating ABNA Legends.

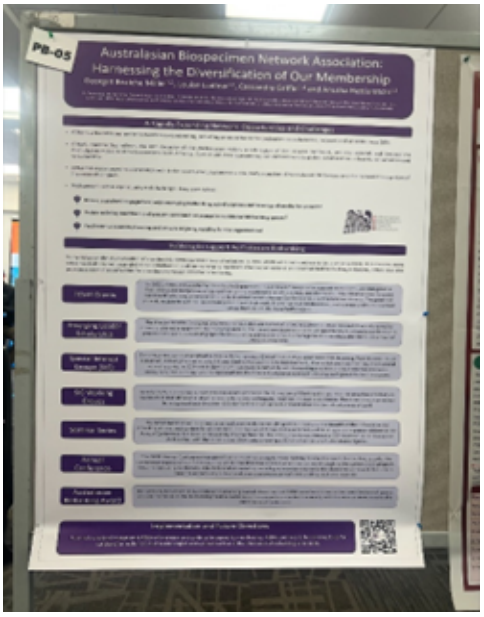
A big shoutout to Cass and Anusha, who were absolute powerhouses throughout the conference. Whether facilitating roundtables, mentoring newcomers, or navigating the delightful chaos of speed networking, their presence was felt everywhere. Cass and Wayne were honoured with well-deserved ISBER Special Service Awards, and Anusha is now officially appointed as ISBER's new Treasurer, a huge congratulations to both! Their leadership, energy, and dedication were a proud moment for ABNA and together with Dan Catchpoole who along with Anusha made up two thirds of the meeting co-chairs, a testament to the strength of Australian representation on the global stage.

Final Reflections: The Unsung Heroes of Science

One of the most powerful reminders from ISBER 2025 for me was that biobanks are not just support systems, they are the foundation of modern research. Often operating behind the scenes, biobanks enable rapid response, accelerate discoveries and support evidence-based policy and many areas of research. While other systems can be built as needs arise, biobanking requires foresight.

This is where I personally think that ABNA's work is especially important, by fostering collaboration, setting high standards and driving innovation across Australasia. ABNA ensures that biobanks are not only prepared for the future but are also actively shaping and leading the way, making sure we remain at the forefront of innovation.

As we look to the future, let's continue to advocate for investment in robust, ethical, and high-quality biobanks. I can't wait to see everyone at ABNA 2025 this October and hopefully, finally meeting our legendary conference blog corgi Ruby in person. And who knows, maybe another gin revelation awaits!



Review of Human Tissue Laws

The Australian Law Reform Commission (ALRC) has been tasked with conducting a comprehensive review of the laws governing human tissue in Australia. As part of this inquiry, the ALRC will examine a range of issues, including the processes involved in the donation, retrieval, and transplantation of human cells, tissues, and organs. The inquiry will also consider the current consent frameworks in place, the regulation of anatomy schools, and the legal structures that govern donations from both living and deceased individuals across different Australian jurisdictions.

Additionally, the review will address financial aspects, such as cost recovery and other factors related to the production and distribution of human tissue. Beyond these legal and procedural elements, the ALRC has also been asked to explore broader themes. These include ensuring ethical and equitable access to transplantation services, keeping pace with new and developing technologies and practices in the field, and learning from international models and experiences. The final report from this inquiry is due to be submitted to the Attorney-General by 16 August 2026.

The Review of Human Tissue Laws: Issues Paper (2025) is now available, and submissions are open until **4 July**.

Biobanking in the News

Top tips for managing your biospecimen burden

In a recent publication from biobanking heavyweights, Amanda Rush, Jennifer Byrne and Peter Watson, they discuss the problem of decision making when managing biobank cohorts, by assessing their value. Many biobanks globally are underutilized and with competition for financial resources, decisions around whether to collect further biospecimens, to hang on to specimens, and which ones to choose in either scenario, remains a perennial issue.

The paper published in Biopreservation and Biobanking last month, puts forward a guideline for valuation of specimens, in order to better manage collections as well as to decide whether to take on legacy collections looking for a new home. The guideline proposes a set of initial valuation questions, with further, more detailed follow-up questions if the initial valuation does not provide a clear answer. The authors remind us that the need for improved efficiency of biobanking also has environmental consequences, in reducing unnecessary cold storage demands for retention of specimens with little utility.

A workshop (also involving Peter Watson) at the recent ISBER meeting in Montreal also explored this area from the point view of 'future-proofing' biobanks. Sustainability, whether financial, environmental or other, continues to be an area both of concern and opportunity in biobanking, with this publication adding some practical guidance for how some aspects of this can be addressed.

Biopreserv Biobank https://doi.org/10.1089/bio.2024.0159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Open camera or QR reader and scan code to access this article and other resources online.

Guideline on Valuation of Research Biospecimen Collections

Amanda Rush,[1,2] Jennifer A. Byrne,[3,4] and Peter H. Watson[5,6]

Prosecuting the case for seaweed biobanking in Europe

In a substantial opinion piece recently published in the European Journal of Phycology from a multinational array of authors, a strong case is made for the importance of preserving the genetic diversity of macroalgae (or seaweed). Despite well-established endeavours to preserve terrestrial plants (think of the famous Svalbard Global Seed Vault), and of microscopic unicellular algae, macroalgae is under-represented, despite the promise it holds as e.g. a future food source. In addition, the public and private collections that do exist are largely in the hands of individual researchers with little standardisation or coordination.

In this comprehensive discussion, the authors propose the development of a three pillared system involving a network of macroalgal biobanks (existing and new), an interoperable databank, and an overarching board to co-ordinate and support these initiatives.

We will keep an eye on any developments in this area and keep ABNA members up to date.

Eur J Phycol https://doi.org/10.1080/09670262.2025.2480569

If you have any suggestions for a short article for ABNA Exchange, please contact: info@abna.org.au

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