



Call for Applications - Postgraduate Clinical Research and Training Positions

Closing date: Monday 13th February, 2017

Applications are invited for Postdoctoral Research Fellowships (part-time and full-time) and Postgraduate Research Scholarships (full-time) commencing in 2017 at NeuroSleep, the Centre for Translational Sleep and Circadian Neurobiology

NeuroSleep, a NHMRC Centre of Research Excellence (CRE), integrates research from neurology, psychiatry, neuropsychology, respiratory neurobiology, chronobiology, imaging, and biophysics. The goal of the centre is to better understand how disrupted sleep leads to impaired brain function and how these problems can be prevented or managed to improve health. NeuroSleep undertakes clinical sleep research in four main research themes:

- 1. Improving alertness and cognition in patients with sleep apnea;
- 2. Neurobehavioural and neurometabolic effects of sleep loss and circadian misalignment;
- 3. Translational neurobiological strategies for insomnia; and,
- 4. Neurodegenerative and neuropsychiatric disorders in later life sleep and circadian dysfunction.

NeuroSleep brings together a collaborative team of chief investigators with a breadth of research expertise from the Woolcock Institute of Medical Research; Monash University; Neuroscience Research Australia; Royal Prince Alfred Hospital; Royal North Shore Hospital, University of Sydney's Brain & Mind Research Institute (BMRI), Sydney Nursing School and School of Physics.

Postdoctoral Research Fellowships are available for outstanding researchers with expertise in core methodologies relevant to NeuroSleep's research themes such as neuroimaging, circadian investigation, clinical phenotyping or neurophysiology. Successful candidates would work across research themes and coordinate projects prioritised by the chief investigators. The duration of the fellowship is one to two years depending on the applicant. Salary will be dependent on experience and track record and commensurate with NHMRC personnel support packages. Part-time and fulltime positions are available, but preference may be given to applicants requesting a part-time support package to supplement other part-time funding

Postgraduate Research Scholarships are available for research towards a higher degree commencing 2015 supervised or co-supervised by a NeuroSleep investigator/s (listed below) at the participating institutions. Preference may be given to exceptional candidates enrolled, or intending to enrol, in a PhD. The award will be issued on the terms and conditions of the current NHMRC postgraduate scholarship and the stipend will be equivalent. It is expected that scholarship holders will apply for other scholarships for which they are eligible (e.g. NHMRC postgraduate scholarships, Australian Postgraduate Awards) during the tenure of the CRE scholarship. Successful applicants who are subsequently awarded an NHMRC or other postgraduate scholarship will relinquish their CRE scholarship and be eligible to receive a CRE topup scholarship. Scholarships are only available to Australian or New Zealand Citizens or Permanent Residents.





Application process:

Preference may be given to applicants who are co-supervised by two or more NeuroSleep Investigators across multiple NeuroSleep sites to foster cross-collaboration between the sites.

Preference may also be given to applicants who can demonstrate that part of their project aims to analyse and publish data that has already been collected by NeuroSleep Investigator teams.

Applicants are required to submit:

- a covering letter including your expected start date in 2017, and for the postdoctoral fellowships, please specify if you are requesting part-time or full-time (expressed as proportion of FTE) and specify if you are requesting one or two years of funding
- Current Curriculum Vitae
- 2-3 page research proposal which addresses the following points:
 - The proposed research project/s you will undertake during the fellowship/scholarship.
 Outline how your proposed research aligns with the research theme/s and outcome/s of the CRE (refer to page 3 for further information about the research themes);
 - o Your skills and expertise relevant to the research themes of the CRE;
 - Your proposed supervisor/s (you must be supervised or co-supervised by a NeuroSleep CRE chief investigator, see below) and location/s;
 - o Names and contact details of two academic / professional referees.

For further information contact Julia Chapman at neurosleep@woolcock.org.au (02)9114 0449.

Please submit your fellowship application in a single pdf document to the CRE Coordinator at neurosleep@woolcock.org.au by the end of Monday 13th February 2017. Late applications will not be considered.

NeuroSleep CRE Chief Investigators:

Name	Research Field	Institution	
Professor Ronald	Sleep medicine,	Woolcock Institute of Medical Research; Royal Prince Alfred	
<u>Grunstein</u>	neurobiology	Hospital; University of Sydney	
Professor Shanthakumar	Chronobiology	School of Psychology and Psychiatry, Monash University	
Wilson Rajaratnam			
<u>Professor Sharon</u>	Neuropsychology,	Brain and Mind Research Institute; University of Sydney	
<u>Naismith</u>	imaging		
Associate Professor Danny	Respiratory physiology	Neuroscience Research Australia; UNSW	
<u>Eckert</u>			
<u>Professor Simon Lewis</u>	Neurology	Brain and Mind Research Institute, University of Sydney	
<u>Professor Nicholas Glozier</u>	Psychiatry	Brain and Mind Research Institute, University of Sydney	
Professor Peter Cistulli	Sleep and respiratory	Royal North Shore Hospital; University of Sydney	
	medicine		
Associate Professor Keith	Sleep and respiratory	Woolcock Institute of Medical Research; Royal Prince Alfred	
Wong	medicine	Hospital; University of Sydney	
Associate Professor	Clinical trials	Sydney Nursing School; Woolcock Institute of Medical Research	
Nathaniel Marshall			
<u>Professor Peter Robinson</u>	Biophysics	School of Physics, University of Sydney	

NeuroSleep, the Centre for Translational Sleep and Circadian Neurobiology: Research Themes

	THEME 1	THEME 2	THEME 3	THEME 4
	Improving alertness and cognition in patients with sleep apnea	Neurobehavioural and neurometabolic effects of sleep loss and circadian misalignment - the unhealthy shift worker	Translational neurobiological strategies for insomnia management	Neurodegenerative and neuropsychiatric disorders in later life – sleep and circadian dysfunction
Outcome 1	Characterise the respiratory neurobiological phenotypes we have identified (e.g. respiratory arousal threshold and respiratory control stability; loop gain) and assess how these predict treatment effectiveness.	Apply novel biomathematical and biomarker approaches to predict neurocognitive and cardio-metabolic vulnerability to sleep loss and circadian misalignment in experimental and field settings.	Determine neurobiological correlates of insomnia phenotypes using neuroimaging, neurocognition, neurophysiology, circadian physiology and autonomic markers.	Evaluate the efficacy of targeted sleep-wake interventions (e.g. CPAP, pharmacotherapy, bright light and behavioural programs) in at-risk patients and those with neurodegenerative disease.
Outcome 2	Utilise novel neuroimaging and neurophysiology techniques to identify patients vulnerable to poor neurobiological outcomes (e.g. motor vehicle crashes, dementia and depression).	Investigate the interactive effects of sleep loss, circadian misalignment and sleep disorders on neurocognitive and cardio-metabolic outcomes.	Investigate the interactive effects of sleep loss and circadian misalignment on neurocognitive performance and mood in patients with insomnia.	Examine the ability of sleep-wake interventions to ameliorate the longitudinal course of neurodegenerative disease and LLD.
Outcome 3	Optimise treatment adherence via targeted behavioural interventions and conduct comparative effectiveness randomised controlled trials (RCTs) to inform novel combination therapies.	Evaluate effectiveness of single and combined interventions such as light, melatonin and dietary manipulation to reduce neurocognitive and metabolic dysfunction in shift workers at both individual and organisational levels.	Evaluate effectiveness of novel treatments for insomnia in at-risk populations.	Determine clinically useful biomarkers for the robust prediction of disease development in at-risk populations to enable early intervention.