

OKS Spring 2025 newsletter

President: Natalie Brown Email: natalie@oks.nz 027 454 3512
Treasurer: Karen Macleod Email: karen@oks.nz 021 280 0552
Secretary: Philippa Pringle Email: pringlephilippa@gmail.com 021 987 887
Otago Kidney Society Email: info@oks.nz

Facebook page link [Otago Kidney Whānau | Facebook](#)



Welcome to the (OKS) Spring 2025 newsletter

Message from the Committee

Great to welcome Spring, lovely time of year with the blossoms, Magnolia and Rhododendrons in flower and the weather starting to get warmer. Always great to take stock and have a bit of clean up after winter and time to get into the garden always rewarding.

We had a great turnout to our lunch at The Village Green, on Sunday 6th July with a mixture of new and existing members. We had people at all different stages of Kidney disease, those not yet on dialysis, those on dialysis (just starting out and those who are now experts), transplant recipients, donors, altruistic donor and someone in the process of becoming one, plus our wonderful family members and friends whose support we appreciate so much.

Some wonderful news Good Bitches Baking have agreed to provide some baking each fortnight for those on dialysis in the Unit. More information below if you are interested

Next function will be in Gore Sunday 21st September, please see flyer below RSVP by 17th September please, look forward to seeing you.

Again just a reminder to provide us with your email address so it is easier for us to have contact with you and saves money on postage and printing costs. Please if you have an email address, can email info@oks.nz.

Introducing Cath Logan our newest committee member

"Hi I'm Cath Logan recently joined OKS as a committee member.

I've been on haemodialysis for about 5 years and lucky enough to be able to do it at home. I totally appreciate how easy they make it for us.

I am retired but when working was an Occupational health nurse for a considerable amount of time at the University which was incredibly interesting.

I spent many years chasing a little white ball around on the golf course. However due to muscle issues can no longer do this. I do enjoy getting out to Mosgiel pool and am also a Good Bitch Baker delivering baking around the community."



Otago Kidney Society



Spring lunch

Sunday 21st of September @ 12 midday

The Thomas Green Public House & Dining Room
30 Medway Street Gore



Varied menu: OKS will subsidise each person's meal by \$10
Plenty of parking available close by

RSVP by Wednesday, 17th September to Liz at:
mob. no 0210476187 & also landline (03) 4554401
email: lb_edwards@xtra.co.nz





good bitches

BAKING

We have been very fortunate that Good Bitches Baking have agreed to provide baking to the patients on dialysis in the Dialysis Unit. OKS applied in June and our application was successful. The first baking was delivered to the Dialysis Unit on 16th July and will be delivered every fortnight on a Wednesday with enough baking for the patients to last Wednesday and Thursday. Here is a photo of the first delivery to patients.



About GBB

Good Bitches Baking is a network of volunteers all over Aotearoa who bake treats in their own kitchens, with their own ingredients, to give to organisations that work with people having a tough time.

Baking is simply a mechanism for spreading kindness, whether it's talking to their kids about why they're making treats for someone else, cooking up a family favourite recipe for someone else to enjoy, or spending a little extra time to write a thoughtful message on the enclosed flyer. Our Good Bitches don't judge or question anyone's interpretation of 'tough time' - everyone deserves a treat, no matter their circumstances.

We don't claim to fix anyone's world but our recipients tell us that knowing someone cared enough to make them a treat means a whole lot. It lets them know they're not alone, that they are a valued member of the community - that's worth something right?

If you want to know more about Good Bitches Baking or even to become a volunteer see below on how to contact them.

Got questions?

hq@gbg.org.nz for general questions



Tākihi Hauora Aotearoa

Prevention • Support • Research

Message from Kidney Health New Zealand (KHNZ)

KHNZ is proud to continue contributing to the Otago Kidney Society newsletter. Many thanks to Natalie for helping to keep this collaboration going.

Since late last year, KHNZ has been working on updating and revamping our range of educational and support resources, with the aim of making them more accessible and relevant for people at all stages of chronic kidney disease (CKD). After months of hard work, we are happy to announce that our updated resource bank will be available in the next month or so. These resources cover key topics such as living with CKD, high blood pressure, diabetes, staying hydrated, and sick day advice - all designed to be more accessible and easier to understand.

Resources will be available in English, as well as Te Reo Māori, Fijian, Niuean, Samoan, Tongan, Tokelauan, and Tuvaluan, to help ensure they are accessible to a wider range of communities. These resources will also be available online.

There's been a lot of other major projects that we have been working on that we aren't quite ready to share yet - If you'd like to keep updated, please follow us on Facebook at Kidney Health New Zealand.

Update from Dunedin Dialysis Unit - for our kidney community

We were fortunate enough to be nominated for Good Bitches Baking by the OKS and have enjoyed several deliveries of amazing home baking which our patients have enjoyed as you can see from the photos- Thank you for thinking of us and our patients, it's so nice to be able to offer them something other than hospital food every now and then!



Our new scales have finally arrived from Germany and the excitement is real! For those that have had the pleasure (not sure you'd call it that!) of using the old ones that fluctuate a few hundred grams either side of your weight we now have state of the art scales that weigh you, take your height and give you your BMI.

We have also had our central (Reverse Osmosis) RO machine approved as a new (Capital Expenditure) CAPEX purchase for the 2025/2026 financial year. This a big-ticket item for us and one we are very pleased about as the old one is definitely on its last legs.

We have been given educator (full time equivalent) FTE to ensure the clinical excellence and support of all dialysis nursing staff is available across the district. Carole has taken on this role, and we are extremely excited to have

her on board. Many of you will know her as she has been a dialysis nurse for a long time and is amazing! We are so happy to have her in this role Kath (Peritoneal Dialysis Clinical Nurse Specialist(PD CNS is attending conference in Sydney in August and we are looking forward to her bringing back new knowledge and skills to share.

Our home haemodialysis support nurse role is slowly gaining traction, this is a role based in Dunedin (Mon-Fri) and will give support to patients who independently dialyse at home with regular phone call, home visits, fistula assessments, trouble shooting, clinic support and follow ups- plus much more! This role is still in its infancy so bear with us while we embed it in our service.

The Dunedin Dialysis Unit has been busy over the past few months with several Southland patient needing to dialyse here each week due to demand for Haemodialysis exceeding capacity in Southland. This is not a long term or sustainable option for our Southland patients and we are urgently looking at ways in which to resolve this issue.

We have been able to offer several holiday patients access to dialysis in lovely Otepoti which has been wonderful.

We hope everyone is surviving winter-in just 8 weeks our sun will set at 7.30pm and won't set any earlier until April 2026! That sounds pretty good to me!

Ngā mihi
Nic

Nic Holborow
Charge Nurse Manager
Southern Dialysis Service
+64 027 665 6659 | nic.holborow@southerndhb.govt.nz
Private Bag 1921 | Dunedin 9054

Introducing our newest Renal Team Member based at Southland Hospital

Hussain

"Hello, my name is Hussain Al Lawati, and I'm excited to be joining the Southern Renal Team, based at Southland Hospital in Invercargill. I've recently relocated from Hawke's Bay to Southland after being away for 13 years. It's great to be back in this beautiful part of the country. I'm passionate about providing high-quality care and supporting patients living with kidney disease. Outside of work, I enjoy spending time with my wife and our two dogs. I'm really looking forward to connecting with the local kidney community."



Christchurch Kidney Society



Dee Moore's Kidney Warrior Story

When Dee Moore was diagnosed with [stage 4 CKD](#) she decided to share her journey online, creating a vlog before moving into podcasting in 2020. **Diary of a Kidney Warrior Podcast is now created in partnership with Kidney Care UK.**

Every **episode of the podcast explores different aspects of kidney disease.** Whether you live with kidney disease, or a family member or friend does, Diary of a Kidney Warrior Podcast will help you learn more.

Diary of a Kidney Warrior Podcast: listen now:

New episodes of Diary of a Kidney Warrior Podcast are available to download every other Monday from **Podbean**, **Apple Podcast** and **Spotify**. You can also listen to episodes on **YouTube**.

<https://kidneycareuk.org/get-support/podcast/>



A Message from Kath Eastwood – CEO, Auckland District Kidney Society

Kia ora koutou,

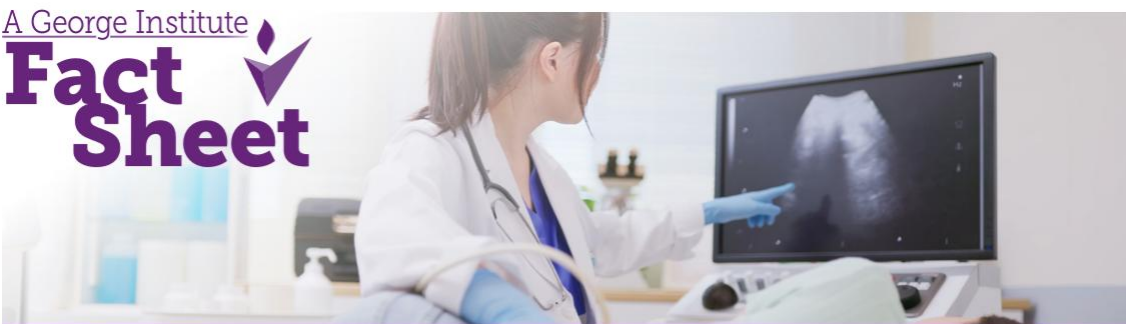
I'm excited to share that the Kidney Society will be launching our virtual education sessions in late September! These interactive sessions are designed to give you clear, practical, and empowering information to help you better understand chronic kidney disease (CKD) and make confident, informed choices about your care and treatment.

These 50-60 min online sessions are open to any adult in Aotearoa New Zealand living with CKD, whether you've just been diagnosed or have been managing your condition for some time. We also warmly welcome your whānau to join in, as we know how important support networks are on this journey.

If you haven't already, I encourage you to check out our YouTube channel, where we've uploaded lots of helpful videos focused on improving your physical health and wellbeing. We also regularly share updates, tips, and resources on our Facebook page, so come follow us there too!

At the Auckland District Kidney Society, we are all too aware of the inequities that exist in health and the post code lottery many people with kidney disease and their families face. We're on a mission to change that and even though many of our staff are based in Auckland, we are working to make more services available nationwide, particularly in the digital space. Together with the Otago Kidney Society, we are here to help you live your best life with kidney disease. If there's anything we can do to support you or your whānau, please don't hesitate to get in touch.

Ngā mihi nui, Kath Eastwood



The RENAL LIFECYCLE Trial: Assessing the effect of dapagliflozin on patients with severe chronic kidney disease – May 2024

 **The George Institute**
for Global Health

Facts:

- Chronic kidney disease (CKD) affects approximately 10% of the adult population worldwide.
- CKD patients are at least three times more likely to develop cardiovascular disease compared to those without CKD.
- The benefits and potential harms of SGLT2 inhibitors have been established in three dedicated kidney outcome trials recruiting more than 14,000 patients overall.

Project Cycle:
2022-2027

Partners:
*University Medical Centre Groningen
Netherlands
The George Institute for Global
Health, Australia*

Supporters:
*National Health and Medical
Research Council (NHMRC), Australia*

Principal Investigator:
*Dr Clare Arnott
Prof Sunil Badve*

Background:

- CKD is a leading cause of morbidity and mortality globally, contributing to millions of deaths each year.
- Patients with severe CKD have a greater risk of developing kidney failure requiring dialysis, as well as cardiovascular disease.
- SGLT2 inhibitors are available for the treatment of type 2 diabetes and CKD, but participants with severe CKD have not been widely studied.
- Available data suggest a strong rationale for studying the long-term effects of SGLT2 inhibitors on the heart and kidneys in patients with severe CKD, including those on dialysis or who have undergone a kidney transplant.

Aims:

- To determine whether dapagliflozin is superior to placebo in reducing the incidence of kidney failure, hospitalisation for heart failure, or all-cause mortality in the overall study population.

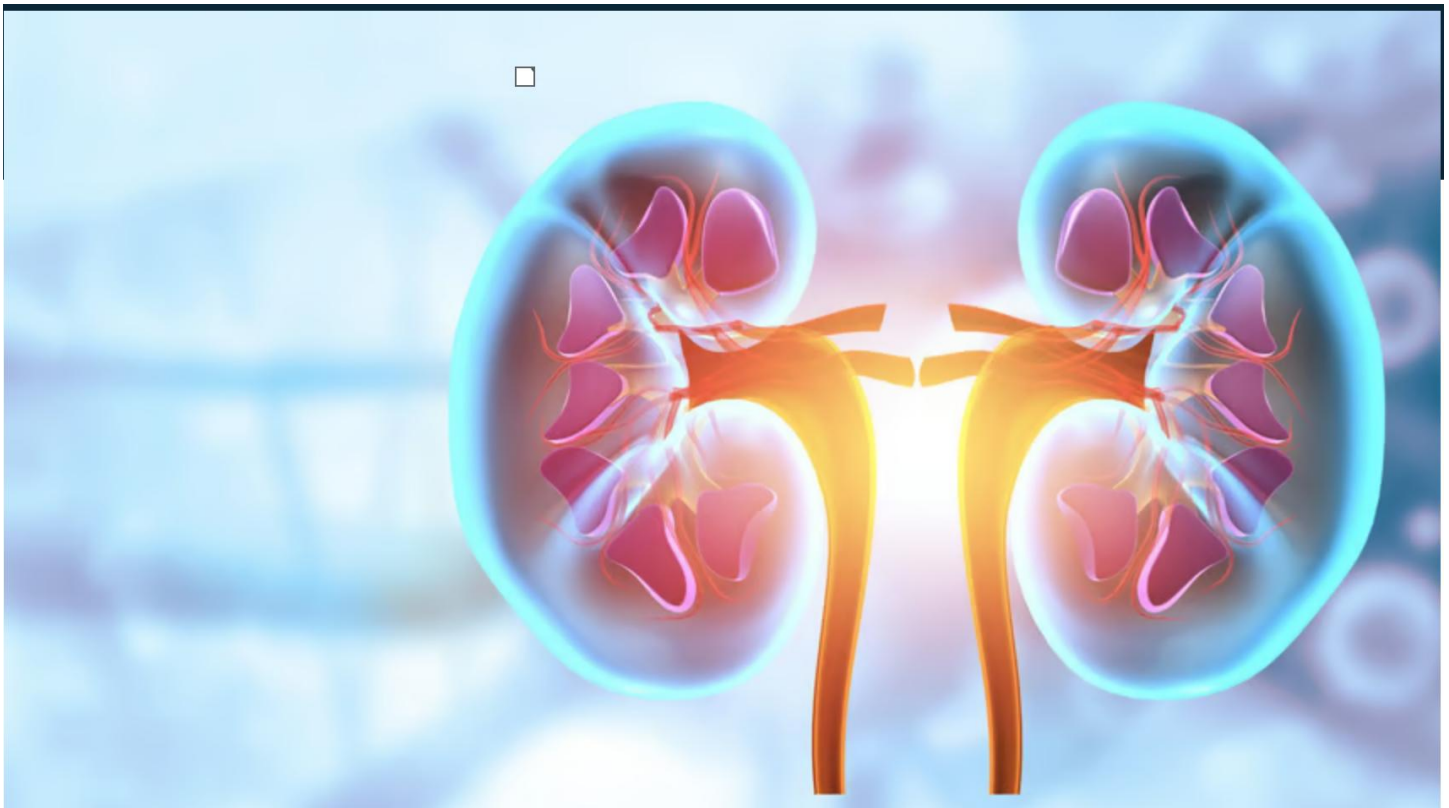
Methods:

- The RENAL LIFECYCLE Trial is a multi-centre, randomised, controlled, double-blinded trial being conducted in The Netherlands, Germany, Australia and Belgium, with a global recruitment target of 1,500.
- Participants will be given 10mg/day of dapagliflozin or matching placebo daily.
- The study's outcome will determine how long the trial lasts, which might be shorter or longer than the planned 48 months.

Impact:

- The RENAL LIFECYCLE trial may identify a new effective treatment for patients with severe CKD that could reduce the risk of kidney failure, hospitalisation for heart failure or death.

Some Research happening around the World in Kidney Disease



Empaveli (pegcetacoplan) won FDA clearance to treat both C3G and primary immune complex membranoproliferative glomerulonephritis (IC-MPGN), another rare and severe kidney disease for which Empaveli is the first approved treatment. Importantly, Empaveli's label covers adolescents as well as adults.

The FDA signed off on the drug based on a phase 3 study that tested Empaveli in a broad group of patients in both rare diseases. In the trial, dubbed VALIANT, Empaveli hit on a key “trifecta” of kidney-disease-related measures, Apellis' co-founder and CEO Cedric Francois, M.D., told Fierce Pharma in a recent interview.

The trio of endpoints comprises proteinuria reduction, stabilization of kidney function and reduction of C3c staining. Compared with placebo, Empaveli led to a 68% reduction in patients' proteinuria (protein in the urine)

at Week 26. Results were consistent across age groups and among patients with native or post-transplant kidney status in both diseases. Plus, a “substantial proportion” of Empaveli-treated patients showed a reduction in C3c staining intensity, while 71% achieved complete clearance of C3c staining over placebo, another key disease indicator.

C3G and primary IC-MPGN can cause severe outcomes, with about half of patients suffering from kidney failure within five to 10 years of diagnosis, requiring a kidney transplant or lifelong dialysis. Approximately 90% of patients who receive a kidney transplant will experience disease recurrence, according to Apellis. The diseases impact an estimated 5,000 people in the U.S. and 8,000 in Europe.