

## **Welcome to the Final Edition of the New Zealand Kidney Foundation Newsletter for 2006.**

Wow, I can hardly believe Christmas is upon us already in what has been a very busy year for the Foundation.

The appointment of Dr Kelvin Lynn as Medical Director for the New Zealand Kidney Foundation being very significant as part of our ongoing commitment to raise awareness of kidney disease and promote early detection and intervention.

Our meeting with Kidney Health Australia in September enabled sharing of ideas and provided us with some valuable resources.

Already plans are well underway for next year's activities.

### **New Zealand Kidney Foundations National Drink Water Week 5 – 10<sup>th</sup> March 2007**

Already we have the poster designed for our "Water is Cool" campaign.

Following the success of this year's campaign we will again be asking all schools in New Zealand to consider selling water only in their canteens. This is in response to the alarming rise in obesity and Type 2 Diabetes in New Zealand. As Diabetes, particularly Type 2, is the largest cause of Kidney Disease in New Zealand we feel obligated to help fight this growing problem, by promoting water as the healthy alternative.

### **World Kidney Day – Thursday 8<sup>th</sup> March 2007**

The New Zealand Kidney Foundation is currently planning a media campaign to help raise awareness of Kidney disease, as well as promoting kidney donation and transplantation on this day. It is hoped the Governor General will host a function at Government House in recognition of World Kidney Day and the generosity of kidney donors.



### **0800 Information Line and Website**

The 0800 line continues to grow in demand with an average of 65 calls per month. There has been an increase in calls from people who have recently been diagnosed with Kidney Disease.

The website continues to have over 4000 hits per month, the request for information service is also being well utilized, with several enquiries from both here and overseas. We are currently having the website redesigned in an effort to make it more user friendly, with more information and ideas, so watch out for it in early 2007.

## **Renal Society of Australasia Conference – New Zealand Meeting November 2006**

I was fortunate enough to attend this annual meeting held this year in Dunedin. I must commend the Dunedin team for an excellent meeting which was well organized and full of very interesting information. I will attempt to give an overview of the proceedings, with snippets from some of the presentations.

The conference was opened by Katherine Rich, list MP for National, this was followed by an official welcome from Harvey Uiti, a dialysis patient, who talked briefly about his experience.

Dr Robyn Toomath, an Endocrinologist working at Wellington Hospital, was the guest speaker. Robyn has a very keen interest in the public health approach to life, with a particular interest in Obesity. In 2001 she set up FOE (Fight the Obesity Epidemic) with her friend and CEO of Diabetes New Zealand, Sarah Thompson. As a spokesperson for FOE, she is providing an independent and somewhat radical voice, pushing in particular, the regulation of the environment as a means of tackling the obesity epidemic.

Dr Toomath talked about her belief that there is a genetic determination that can be attributed to obesity; with some research demonstrating obese people tend to be deficient in Leptin. Of course there are other factors that play a role in obesity, these include; Societal, Political and Environmental.

Some interesting facts from Dr Toomath

- Increased energy consumption level by 200kcal/day for adults
- Trebling of obesity in children in last decade
- Sharp increase in the rate of Type 2 Diabetes in young children
- The World Health Organisation states that over nutrition is more of a problem than under nutrition internationally.

It was disturbing to learn the mean BMI in Samoa is now 35 which means that 75% of the population are now obese. The diet has changed, with such things as turkey tails and mutton flaps exported from the US and New Zealand.

The rate of obesity is growing in China at twice the rate of the US, with 16.4% of 5-6 year old boys are overweight and 23.7% of 11-14 year old boys being overweight.

In New Zealand approximately 30% of children aged between 5-14 years of age are overweight – worrying statistics.

Obesity causes heart disease, respiratory disease, orthopaedic disease and cancer. It's biggest effect is on the prevalence of Type 2 Diabetes. In a country of 4 million people obesity related health issues costs \$1 billion per year!

Dr Toomath talked about some of the contributing factors of obesity.

Factors leading to reduced energy expenditure;

- Less walking, cycling, more cars
- Mechanisation and automation of the workplace and home
- Television, computers and video games
- Lifts and escalators instead of stairs.
- Urbanisation leading to an inability to walk to work, more children being driven to school, concerns about safety for playing.

Factors leading to increased energy expenditure

- Dietary shift to energy dense foods
- Larger portion sizes
- Increased consumption of soft drinks
- Reduced consumption of home prepared food
- Changes in availability of food
- Promotion and marketing of foods

Societal Changes responsible for Obesity

- More families with working parents
- Perceived safety of parks and playgrounds
- Longer working hours.

Dr Toomath then discussed some of the strategies necessary to help the fight against obesity. She identified the following ideas she felt needed to be legislated and regulated;

- Restricting advertising on television
- Banning the sales of soft drinks in schools
- Limit the range of food sold in school canteens and vending machines so that it complies with nutrition guidelines
- Differential taxes on calorie dense, nutrition poor foods
- GST taken off fresh fruit and vegetables
- Restrictions on the placement of fast food outlets (not within a kilometre of a school, no more than a certain number in residential zones)
- Reintroduction of cooking and food training in schools
- Limiting portion size
- Labeling of energy dense foods as unhealthy (reverse of “Pick the Tick”)
- Segregated cycling tracks
- Restrictions of car usage in the inner city
- Etc. etc

Some very interesting food for thought! Look out for more from FOE

Dr Leo Celi an intensive care and infectious disease specialist at Dunedin Hospital was an entertaining speaker who gave a very interesting presentation on the benefits of Erythropoietin not only in the management of kidney failure, but also in other medical interventions.

Dr Rob McGinley a Nephrologist at Dunedin Hospital spoke about Chronic Kidney Disease in New Zealand. He gave statistics relating to the number of the population with a significant degree of renal disease, it is estimated approximately 1 in 7 people in Australia are affected, New Zealand statistics are estimated to be similar. Proteinuria is the most potent predictor for chronic renal failure; Dr McGinley talked about the recommended treatment for early intervention.

Professor Rob Walker, Consultant Nephrologist and Head of Nephrology at Dunedin Hospital talked about Anaemia and Cardiac Disease. Research has shown more than 50%

of patients have significant impaired cardiac function. Prof Walker talked about the effects anaemia has on cardiac function. He also discussed current treatment options , with Erythropoietin showing some benefits in the management of cardiac disease and anaemia.

This conference had a very high standard of Abstracts covering a wide range of topics. The panel discussion with Dr Mike Hunter, an intensivist, Dr Jock Allison, a transplant recipient and Professor Evans, an ethicist. Each member of the panel gave their opinions on Organ Donation in particular their thoughts on the Human Organ and Tissue Act. It was a very thought provoking session with a wide range of views expressed.



**From our Medical Director**

Since I took up my position as Medical Director there have been a number of changes in the Kidney Foundation.

The Foundation has reviewed its aims over the past few months. Promotion of kidney transplantation as the most effective and cost-efficient treatment for kidney failure remains a major focus. As with similar organisations in countries such as Australia and USA, the Foundation recognises the importance of early detection of kidney disease because of the potential for preventing, or at least slowing, the development of kidney failure. For the Foundation to play a constructive role in educating the community about the benefits of screening for kidney disease we will need to work more closely with GPs, other patient support groups and the National Renal Advisory Board.

Funding of research into kidney disease has been a major aim of the Foundation from its inception. The Foundation has decided to change the focus of its spending on health research to preferentially fund research relevant to the goals of the Foundation and the needs of New Zealand kidney patients.

I was fortunate enough to attend the American Society of Nephrology meeting in San Diego earlier this month. This is the premier nephrology meeting internationally. A number of the sessions addressed the issues of early detection of kidney disease and the increased risk of blood vessel complications (such as heart disease and stroke) in people with chronic kidney disease. I presented a poster on behalf of the National Renal Advisory Board on the establishment and audit of dialysis standards by the ten New Zealand renal units. Similar work is being done in other of countries of similar size, such as Scotland and Norway. New Zealand units compare well with overseas units in many aspects of dialysis care.

There are now a number of national guidelines for the care of people with kidney disease. The local version is called the CARI guidelines (*Caring for Australasians with Renal Impairment* [www.cari.org.au](http://www.cari.org.au)). National guideline working groups, most importantly including the National Kidney Foundation in the US, have agreed to work together to develop international guidelines. This should be particularly helpful for small countries like New Zealand although some local modification will probably be needed. The body responsible for this activity is *Kidney Disease: Improving Global Outcomes* (KDIGO [www.kdigo.org](http://www.kdigo.org)) whose mission statement is “To improve the care and outcomes of kidney disease patients worldwide through promoting coordination, collaboration and integration of initiatives to develop and implement clinical practice guidelines.” One outcome of this international co-operation is the World Kidney Day next celebrated on Thursday 8<sup>th</sup> March 2007.

I look forward to bringing you more news of the work of the Kidney Foundation in newsletters in 2007. Happy Christmas and best wishes for 2007.

Kelvin Lynn

## **Of Interest**

- **Pat Bain**, the coordinator and driving force of the South Canterbury Kidney Support Group is stepping down from her role which she has held for nearly six years, although her involvement with the group has been longer. During this time Pat has built the group up to be one of the strongest kidney patient support groups in the country, her commitment and dedication has been tremendous. On behalf of the New Zealand Kidney Foundation we would like to acknowledge Pats work and wish her all the best in her future ventures.
- **Disclaimer –**  
Over the past few days the New Zealand Kidney Foundation has received many complaints (including Police), from members of the public questioning a telemarketing campaign asking for money to be donated for a Kidney Kids camp. Many have been asked to leave money in their letter boxes. Apparently this is under the auspices of Kidney Kids. The New Zealand Kidney Foundation is in no way involved in this campaign.

## ÿ **NZKF Activities to look out for in 2007**

- **New Zealand Kidney Foundation National Drink Water Week  
5<sup>th</sup> – 10<sup>th</sup> March**
- **World Kidney Day – March 8<sup>th</sup>**
- **Kidney Patient Support Group Annual Conference – May**
- **Senior Renal Nurses Conference – September**
- **Plus many more to come**