The Christchurch Kidney Society (Inc.)
Patient Support Group
SERVING THE LOCAL RENAL COMMUNITY FOR OVER 35 YEARS

The Renal Messenger

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MERRY CHRISTMAS

Christmas 2014
This issue has been funded by The Community Organisations Grants Scheme
From the Editors Desk...

I have mixed feelings as I write my Renal Messenger introduction. On one hand I am so sad that Kate has left us, as over the past 10 years she has made so many positive changes and has grown the Society to the strong position it is in today (see pages 5 & 6 for Kate’s last word). On the other hand, I am so excited to be in the role of Field Officer/Manager and see it as a huge privilege to be here. After many years volunteering for the CKS (as a Committee member and Vice President), and previously for Kidney Kids, moving into the role feels a little like “coming home”. Since the earthquakes, I have been working for CETAS (Canterbury Earthquake Temporary Accommodation Service) and now as I settle into this role, it feels appropriate, somewhat like settling into my newly built home — very familiar, but also exciting and new. Due to my new position, I have stepped down as Vice President, this role is currently vacant, so if you feel like you could support us in this role, please contact me. The CKS office space has changed around, we have relocated to the other side of the office and now have a lovely window seat. I would like to thank everyone at the Canterbury Medical Research Foundation for making me feel so welcome, and for the volunteers who have continued to support me and the CKS by being in the office when needed and doing all the odd jobs passed their way.

It was wonderful to see so many at the annual Christmas Party, there were lots of smiles, a fabulous produce table, plenty to win on the Chocolate Wheel and the 17 prize Monster Raffle was a huge hit! Thank you to all who contributed and made this day possible. Thanks also to Courtanay from Kidney Kids, it was lovely having you attend the party.

I wish everyone a safe and happy Christmas and really look forward to 2015 as Field Officer/Manager of the Society.  

Jo Houghton

Dates to Remember:

CKS Office: Closes 1pm Friday 19th December 2014 and reopens Monday 12th January 2015 at 10am.
Christmas is a time to thank all of the wonderful people associated with the Society. Firstly to our volunteers: Judy Giles, Chris Sparks, Anne Chambers, Jeanette Jones and Adrian Buttimore. This group of amazing people give their time so the Society office can be open each day from 10am to 1pm and they do whatever is asked of them whilst there.

We are reminded daily of how fortunate we are to have a wonderful extended renal community network of medical professionals who go above and beyond the norm. So special thanks also to staff of Christchurch Hospital Home Dialysis Training Centre and Nephrology Department, including ward 14;

Not to be forgotten also our dedicated, hardworking CKS committee, who are always in the background making the decisions, cooking up ideas (literally this year) and arranging the functions throughout the year.

ALSO THANKS TO:
The Christchurch Kidney Society acknowledges support from

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The Canterbury Community Trust

Kidney Health New Zealand

C.G.S.
Community Organisations Grants Scheme
CHRISTMAS PARTY SPONSORS

The Christchurch Kidney Society gratefully acknowledges support from the following sponsors:

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The CKS Committee and their families, Members and Supporters of the Christchurch Kidney Society
CKS OVER THE LAST TEN YEARS...

Time is of the essence they say! As we yet again approach the joyful 'Ho Ho Ho' time of year we realise that time seems to race even more quickly than normal. Five minutes ago it was January 2014. Now we are looking at Christmas wish lists, New Year resolutions and lists of people we always try to catch up with! It is also, for most of us, a time to recover from the mental and physical exertions of the past year. So after ten years at the helm and looking at yet another list: that of what constitutes fatigue, I find that I tick six out of seven signs, with the conclusion that I had definitely made the right decision to retire. For the immediate future bring on the garden, the vegetable growing, the laughs and frustrations trying to play the Cello, and the seasonal 'live to eat philosophy' involving lots of wine and yummy food!

Having said that, as one who enjoys developing lists of 'joyful opportunities to be completed at home' there is one more list to make, though brief, it is quite surprising and gratifying. What have we done at the CKS in the last decade, from the time I began as Field Officer in October 2004 to the present?

2004 - The CKS/KIC office was in Worcester St, Linwood as part of the Disability Information Services Complex.

2005 - We negotiated an arrangement with the New Zealand Kidney Foundation, later to become Kidney Health New Zealand, and moved in to share facilities nearer to the hospital, at Van der Veer Institute, 16 St Asaph Street.

Spring 2006 - A short move up the road with KHNZ to 24 St Asaph Street, where we watched the completion of the new HDTC building. This was also the year we completed fundraising for a new MDU and purchased the current Mobile Dialysis Unit. We also established a number of new programmes in patient support.

Spring 2008 - The need for our services had grown and with the introduction of additional programmes we expanded to employ Janine
Kenworthy, part-time, in the newly created position of Field Worker. Janine's job was to conduct hospital visiting and manage membership.

**August 2010** - it had become clear that there was a gap in support for younger renal patients who had experienced restrictions in their education due to CKD. In response we established the CKS Graeme Cox Youth Education Trust which proceeded to give small grants to help our younger members achieve their goals.

**Summer 2011** - and those earthquakes were upon us forcing a brief move to run the CKS from my home. By this time Janine had resigned and we were fortunate to have Jo Houghton as a temporary volunteer gap filler, to ensure hospital visiting continued.

**Winter 2011** - Viv Smith became our new Field Worker (a position she fortunately remains in, after a brief sojourn to the other side of the world, when Linda Paterson filled in on a short term contract).

**Spring 2011** - another move with KHNZ, this time to 230 Antigua Street opposite the Canterbury Brewery (now, like so much of Christchurch, a carpark).

**Spring 2014** - and the last move for a while, we hope, this one just to the other side of the room, (now with a view of that carpark). Sadly KHNZ did not renew their lease, they too need room to expand and we have taken over their space for another 3 years. It is very handy to the hospital and HDTC.

**October 2014** - 10 years on. We have fundraised thousands of dollars, upgraded computers and systems, given out hundreds of care packs, made countless hospital visits to members of our community, benefited from hundreds of committee and volunteer hours, gained and lost many friends and remain part of a close knit network supported by our excellent medical professionals.

With my very best wishes, for a safe, happy Christmas and beyond, to all CKS members and to Jo Houghton, who takes up the redefined position of CKS Field Officer/Manager.

**Kate**

**Last word:**

*Women will never be equal to men until they can walk down the street with a bald head and a beer gut, and still think they are sexy.*
After eight years of service Kelvin is retiring as Medical Director for Kidney Health New Zealand. Many of you will remember Kelvin in his capacity as a kidney specialist for 29 years at Christchurch Hospital. He also has extensive experience in clinical research and home dialysis. Kelvin also spent time as Chief of Medicine at Christchurch Hospital from 2001 until 2008, he also chaired the National Renal Advisory Board’s Standards and Audit Subcommittee that developed audit standards for New Zealand dialysis practice and produced its first report in late 2005, to name but a few of his achievements. Kelvin had been a Board Member of Kidney Health New Zealand (previously New Zealand Kidney Foundation) and involved for many years with the Christchurch Kidney Society. Kelvin’s main role as Medical Director included ensuring that those people responsible for health system planning and funding are aware of the magnitude of the chronic kidney disease burden and its close relationships with diabetes and heart disease; promoting research into kidney disease; and providing a source of responsible, informed comment on matters of public interest related to kidney disease. He also was the spokesperson on medical matters and supervised the Kidney Health NZ’s research grants program. Kelvin worked with other members of the KHNZ team to enhance awareness that kidney disease is a major chronic health issue in New Zealand.

Kelvin’s contribution to the work of Kidney Health New Zealand has been significant, the recent KHNZ Political manifesto, and many of the resources we have available on our website have been as a result of Kelvins commitment to ensuring people affected by kidney disease are supported and advocated for.

From a personal perspective I have enjoyed working with Kelvin throughout his time at KHNZ and have valued his wealth of knowledge, professionalism and dedication to our organisation and the work we do. He will be missed and I’d like to take this opportunity to wish him all the very best for the future and I know he will enjoy being able to spend more time with his grandchildren.

**Carmel Gregan-Ford**

*National Education Manager*
Farewell and a look back

I retire as Medical Director for KHNZ at the end of the year. This will be my last newsletter for the CKS Messenger. A lot has happened at KHNZ since I wrote my first newsletter in 2007. At the moment I am helping to write a history of dialysis treatment in New Zealand and I thought that members of the CKS might be interested in some of the local history about the treatment of kidney failure. Of course, some readers will know more than me about some of the events but I am sure there are others who are not aware of the many changes that have taken place since the early days.

In the early 1960s, people with kidney disease were looked after in Ward 11 at Christchurch Hospital by two urology surgeons, Messrs Norman Greenslade and William (Bill) Utley and Dr Errol Hannah, a general physician and cardiologist, provided medical advice.

In 1966, Dr Peter Little was appointed as Canterbury’s first kidney specialist to set up a kidney unit at Christchurch Hospital to treat people with kidney failure. Dr Little trained in London in the 1960s when long term treatment of kidney failure was becoming a reality following the establishment of the feasibility of maintenance dialysis in Seattle in 1960.

Dr Little recognised that the hospital service would never have the resources to meet the demands for dialysis treatment. He decided that he would offer only home dialysis and return patients to the care of their general practitioner. Dr Little persuaded the North Canterbury Hospital Board and its Medical Superintendent in Chief, Dr Lyn Berry, to fund this new programme by arguing that the purchase and operating costs for a dialysis machine (in the late 1960s) were the same as for a motor car. In a report to the North Canterbury Hospital Board, Peter Little estimated that the cost of equipment for a dialysis unit would be $36,000 It was planned to start with six dialysis stations with a capacity to treat 18 patients. The cost of consumable per dialysis was estimated at $14 or $27,000 annually for 18 patients. It now costs the health service between $35,000 and $65,000 annually for a dialysis patient, depending on type and location of treatment.
At a national meeting in 1967 it was agreed that the Auckland, Hamilton and Wellington Hospitals would provide facilities for hospital haemodialysis and that Christchurch Hospital would provide facilities for home haemodialysis training.

The first Christchurch dialysis unit was established in August 1969 in what had been the Visitors Waiting Hall at Christchurch Hospital, using a dialysis machine and dialyser purchased by a Timaru farmer, Mr AK Gould. Mr Gould was the first patient to begin home dialysis training. The first hospital funded equipment arrived shortly thereafter and a further two patients began training in October 1969. In the early days only relatively young patients without other health problems were treated and in most cases dialysis was planned as bridging treatment while the patient waited for a transplant.

Until the establishment of home dialysis training programmes in other New Zealand dialysis services (notably Auckland, Wellington and Dunedin) home dialysis training and support was undertaken for patients from throughout the country e.g. Tauranga, Palmerston North, Hastings, Wairoa, Nelson. By the end of 1973, 63 patients had commenced training. Training time for home haemodialysis averaged 15 weeks (range 7 to 28 weeks). In 1970, Dr Little reported that the cost for equipment for a home dialysis patient was $3,455 and the monthly cost per home dialysis patient for consumables was $154.23. Patients were encouraged to dialyse in their bedrooms overnight and the cost of home modifications was on average $100. Home haemodialysis now costs the health system around $35,000 annually for one patient.

The Christchurch unit was staffed initially by a nursing sister, Ms Jamieson, and a dialysis technician, Christine Walker, who was recruited from Auckland. In early 1970, a second nursing sister, Anna Stokes, was appointed and a second technician, Adrian Buttimore, also recruited from Auckland. Adrian Buttimore was appointed Chief Technician in 1971, Officer in Charge, Dialysis Services in 1976 and Clinical Manager, Dialysis Services in 1991, a position he held until his retirement in 2012.

The first kidney transplant was carried out by Mr William (Bill) Utley in 1972. Mr Utley had learnt the transplant operation by practising on animals. Dr Ross Bailey returned to Christchurch in 1972 and became responsible for post-surgery care of transplant recipients. The transplant team was completed when Professor John Morton, who had trained in transplant surgery in Edinburgh, was appointed in 1974. The transplant programme proved very successful with the second and third patients from the transplant programme living for nearly 40 years with their transplants. The first live donor transplantation was done in December 1974. The first live donor transplant from a non-directed or altruistic donor in Australia
and New Zealand was done in 1998. When Professor Morton retired from surgical practice, Professor Justin Roake, one of his students, took over surgical leadership of the transplant programme. By October 2014, a total of 787 transplants – 505 from deceased donors and 282 from living donors – had been carried out.

Dr Little left Christchurch in 1979 to establish and head a renal unit in Saudi Arabia and subsequently worked in Baghdad where he developed a large, successful living donor kidney transplant programme. Dr Little died in Christchurch in May 2011. Ross Bailey succeeded him as Head of Department. In the 1980s Richard Robson, Charles Swainson and I were appointed as kidney specialists. Charles Swainson returned to Scotland after working for five years in New Zealand. Dr Bailey died in a swimming accident in Sri Lanka in April 1997. Over the past 47 years many other people have been involved with caring for kidney patients.

**Professor Kelvin Lynn**

Medical Director of Kidney Health New Zealand

Professor Kelvin Lynn has been a great volunteer and supporter of the Christchurch Kidney Society. The above photos show him at the 2006 Annual Christmas Party, where he was an expert icecream server. A few of us have a fond memory of him also cooking sausages at the Halswell Quarry for another Society function, wearing a ‘Snoopy’ Apron (unfortunately no photo located).
Below is a recipe that is a simple yet effective way to provide some Christmas cheer. The contents of these cookies can vary depending on what you have in the pantry and any variety of chocolate, nuts and dried fruit would work. If you have high potassium try replacing the almonds with craisins (dried cranberries).

Forgotten Cookies (16 serves)

2 eggs whites, room temperature
Pinch salt
120g (1/2 cup) castor sugar
1 teaspoon vanilla
120g (3/4 cup) roughly chopped almonds
120g (3/4 cup) chocolate chips, or dark chocolate chunks or caramel drops

- Preheat oven to 180°C. Beat egg whites and salt until foamy.
- Gradually add sugar and continue beating until mixture holds stiff peaks and makes a glossy, stiff meringue. Add vanilla, almonds and chocolate.
- Cover baking tray with baking paper. Drop teaspoonfuls of the mixture on prepared baking tray. Put in oven then turn oven off. Leave in closed oven overnight (or for at least 3 hours until oven is cold).

(Sourced from Healthy Food Guide)

Have a happy and safe Christmas period

Hilary Dumbleton
CONSUMER COUNCIL REPORT
November 2014

This will truly be my last report from the Consumer council as the representative for chronic conditions as I have completed my five year term. It has been great to be part of this Council in a CDHB which sees the people it serves being at the center of healthcare either in a hospital, or the community.

It is possible that I may still work on some areas of interest as the Council has not the numbers to fill all requests, but can act as a network to suggest other consumers who may be able assist, as it is becoming more and more recognized that the consumer voice is an essential one.

I am shortly joining a group of others on the council for a workshop about Collaborative Care. This is concerned with the long term care of people with complex conditions in general practice.

Recently our Youth representative has been involved with “Strengthening the Youth Centre”, and a Youth Friendly Space Audit in draft form has been drawn up. For more information the contact for this project is tayla@cantyouthworks.co.nz or call 021 621 044.

The Patient Portal pilot is near completion and is currently being evaluated. Around fifty people receiving care took part in this as part of its development (see last newsletter’s report explaining “The Patient Portal”).

At the moment the Council has been looking at falls visual aids, which is part of the Falls Prevention Programme and is currently being trialed in a Christchurch Hospital ward. The Falls Visual Aids Project ensures that staff and visitors know at a glance what vulnerable patients require to assist them with mobility.

One of our members is actively involved with the Infection Prevention and Control Board.

The CDHB Strategic Action Draft Plan 2015-2016 Action Draft Plan is another major continuing area of engagement for this next year. There has not been such a plan for the CDHB since 2007. This draft plan is aligned with the NZ Action Plan, with strategic focus areas specific to the Canterbury Health System. A sub-group of Consumer Council members will work with the project manager. A key feature is the need for user friendly language.

Information about the Council in available on the CDHB website, and please do make contact with the Council if any queries through Wayne Turp at Planning and Funding. These are just some of the areas in which the council is currently providing input.

June Shaw
CKS Graeme Cox Youth Education Trust

Supporting young people affected by CKD

Two of our Trustees have decided to retired from their positions on the Trust. We would like to sincerely thank Deanne Dowding and Charlotte Brough, for their contributions since the Trust was created. Charlotte was the leading force behind the Charity Dinner held in 2012, we all watched in awe as she gathered together volunteers and auction items and showed us how this type of event should run. As you can probably remember, a good profit was made on the night, which has generated good interest earnings since. We wish both Deanne and Charlotte the very best for the future.

We welcome two new Trustees, Carmel Gregan-Ford and Becky Hayston:

Becky Hayston
Carmel Gregan-Ford

We are very excited to have them join us and look forward to working with them in the future.

For an application form and any further information or to donate to the Trust: please contact the CKS office, 230 Antigua St, Christchurch or email the trustees: cksyouthtrust.nz@gmail.com.

Greg Beach
Chairman

Noeline Cox
Secretary

Jo Houghton
Treasurer

Our thanks to all those who donate to, fundraise for and assist in maintaining the Trust.
SNIPPETS

CKS Pot Luck Lunch Round-Up, Friday 26 September

Professor Kelvin Lynn gave an interesting talk at our recent Pot Luck Lunch. He discussed Kidney Health NZ’s *Blueprint for Improving Renal Services in New Zealand*. The Spring Edition of The Renal Messenger has a very good feature on page 11 which covers the following points in the blueprint document:

- Trying to improve the numbers of deceased donor renal transplants in NZ
- Setting a national standard to facilitate pre-emptive live transplants
- Reimbursement of live donors’ expenses
- Reducing barriers to home dialysis
- Improve support for home dialysis patients
- Improve access to “Away from home” haemodialysis
- Improve GP knowledge of management of CKD

For any further information please contact info@kidneys.co.nz or phone Kidney Health NZ on 0800 543 639.

Next Pot luck lunch — 27 March 2015

The topic:

**COOKING UP A STORM**

Bring your own lunch or something to share and join with other members and supporters.

Govan Seminar Room, 1st floor, 40 Stewart St, Christchurch.

Disclaimer

While every care is taken to insure the accuracy of information, views expressed in the Renal Messenger are not necessarily those of the Society. Articles by non professionals are intended to interest and inform and are not intended as medical or dietary advice. This information should come from the medical professionals involved in your care.
38th RSA NZ BRANCH CONFERENCE

In October, Christchurch hosted the Renal Society of Australasia (RSA) NZ Branch annual conference. The Christchurch dialysis service, along with support from Blair Donkin (Charge Nurse Manager Dunedin Dialysis Service), CKS and Carmel Gregan-Ford from Kidney Health NZ, were responsible for the facilitation and organisation of this event. Although held annually, this conference generally makes it to Christchurch once every seven years.

Delegates were mainly nurses and allied health workers from Renal units around New Zealand and Australia. Those attending were treated to a wide range of speakers covering various subjects mostly relevant to our area of expertise.

Professor Justin Roake spoke about vascular access in his capacity as a dedicated dialysis access surgeon, Dr Kate Grundy, Palliative care specialist, spoke about palliative and end of life care in end stage kidney disease and Associate Professor Suetonia Palmer shared with us her research experience. Along with these, a number of other renal physicians such as Dr Nick Cross, Dr Tom Evans, Dr David McGregor and Professor Rob Walker from Dunedin spoke on subjects related to their areas of expertise.

The mood was lightened by local entertainer/radio presenter Gary McCormick. He had the unfortunate post lunch time slot with the aim of waking up the audience. This he did well by telling us of his aspirations of becoming the next NZ Prime minister and among other things, he would ensure that while the new pipes are being laid in post earthquake Christchurch, an extra set of smaller pipes could be installed concurrently and attached to every home and labelled specifically RENAL, in preparation for future dialysis requirements. LOL

We also heard from local lecturer Nathan Mikaere-Wallis from the Brainwave Trust who gave us a highly Illuminating talk about the adolescent brain. He was a truly inspiring speaker giving us insight into the issues we are all faced with during this turbulent period of our lives. A number of our local nurses from Christchurch and other centres presented on various subjects throughout the 2 day conference.

Rob Brydon, the longest home dialysis patient in New Zealand shared the photographic journey he created about his 38 years on dialysis (this can be found on YouTube by searching “The Project: 38 years on dialysis”). His presentation proved to be both awe inspiring and emotional for the entire audience and was overwhelmingly favoured best presentation at the conference.
The trade displays allowed the opportunity for delegates to be exposed to and learn about up and coming equipment and technology. Everything from synthetic fistula graft material to dialysis machines to dialysis chairs were on display with reps available for information and discussion.

The conference was successfully held at the Copthorne Commodore Hotel with its lovely facilities and beautiful food, it’s fair to say the 97 delegates were well catered for. The Friday evening saw the social programme take shape. Delegates were dressed in their home colours supporting the “Home Sweet Home” conference theme and were treated to entertainment by Ethel and Bethel (Bingo Babes) and the local band, Drawcard.

The conference was deemed a success with positive feedback from all those in attendance. A special thanks to the organising committee whose hard work and dedication certainly paid off: Wendy Cuthill, Kate McKey, Nicola Kinsman, Penny Coffey, Lesley Horsburgh, Carmel-Gregan Ford, Kate Hay, Blair Donkin, Becky Hayston and Sandy Neale.

(ARTICLE PROVIDED BY BECKY HAYSTON AND SANDY NEALE)

EDITOR’S NOTE

I attended the conference as one of my first duties as Field Officer and it was absolutely wonderful and reinforced again how lucky we are to be surrounded by such wonderful people.

(PHOTOS: Top left; Dr Nick Cross delivering his presentation. Bottom right; Ethel and Bethel enjoying the company of Janelle Kennedy, Clare Greasley (Pharmacists) and Hilary Dumbleton (Dietician).
JUST FOR A LAUGH..........  

Actual Sentences Found In Patients Hospital Charts:

- The patient has been depressed since she began seeing me in 1993.
- Healthy appearing decrepit 69 year-old male, mentally alert, but forgetful.
- Patient has left white blood cells at another hospital.
- Patient’s medical history has been remarkably insignificant with only a 40 pound weight gain in the past three days.
- Between you and me, we ought to be able to get this lady pregnant.
- Skin: somewhat pale but present.
- She is numb from her toes down.
- The skin was moist and dry.
- Occasional, constant, infrequent headaches.
- Patient was alert and unresponsive.
- Rectal examination revealed a normal size thyroid.
- She stated that she had been constipated for most of her life, until she got a divorce.
- Patient has chest pain if she lies on her left side for over a year.
- The patient was to have a bowel resection. However, he took a job as a stock broker instead.
- On the second day the knee was better, and on the third day it disappeared.
- Patient has two teenage children, but no other abnormalities.
CKS MDU Available for Hire

Take you off on your long awaited (aren't they always) holiday weekend or plan a spring break. Our Mobile Dialysis Unit is fully equipped for all dialysis needs and bookings can be organised by phoning Kieran Smith or Selwyn Heatley at The Home Dialysis Training Centre Phone 364 0610.

**Hire Charges:** The current fees are as follows: (all include GST, insurance and road user charges)

1. New Zealand dialysis patient’s $200 bond plus $50/day.
2. Overseas dialysis patients $500 bond plus $125/day ($NZD).

Bond and hire fees must be paid in full by either cash or cheque at least 2 weeks prior to picking the vehicle up. **Note:** The Christchurch Kidney Society will consider the reduction or waiving of these fees for any dialysis patient under the care of the Nephrology Department, Christchurch Hospital, for whom their payment would be a burden.

**Bookings and general enquires should be directed to:**

Dialysis Services,
Christchurch Hospital,
Private Bag 4710,
Christchurch 8001,
New Zealand
Telephone: (03) 3640-614
The Christchurch Kidney Society (Inc.)

Kidney Information Centre
Level 1, 230 Antigua Street
Christchurch 8011

Phone: (03) 379 5529
Email: c.ks@xtra.co.nz

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