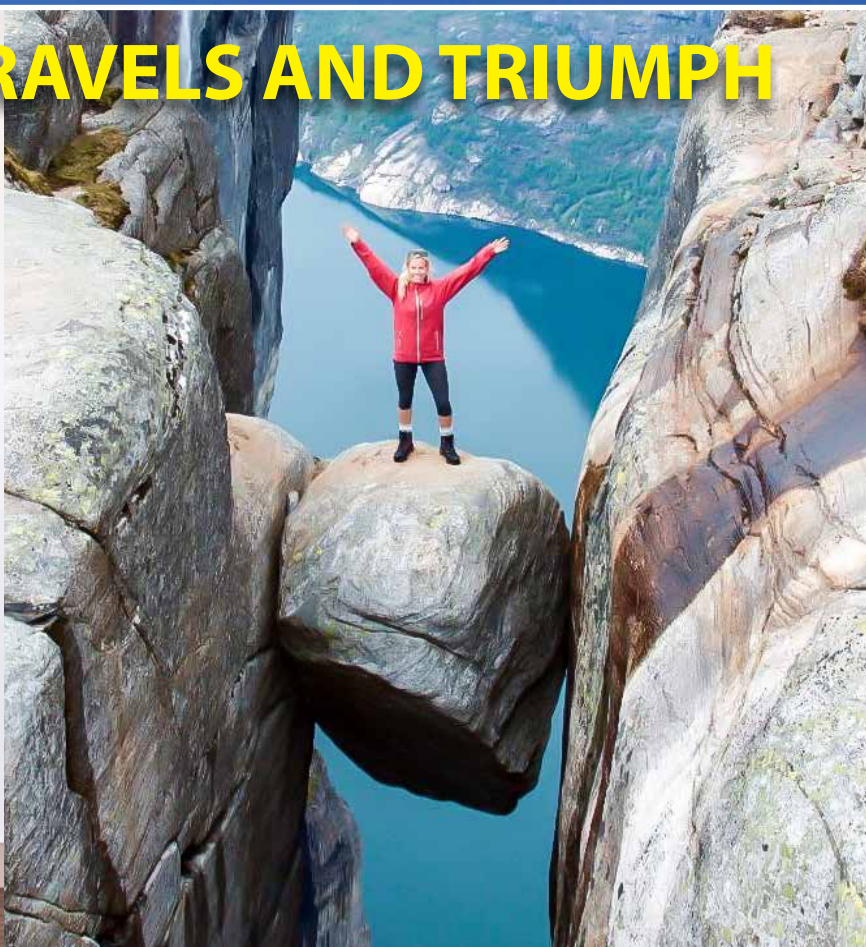


# Hepatic Happenings

## THROUGH TRAVELS AND TRIUMPH



**I'm a sports major and outdoor enthusiast! I graduated from University last year and have been sailing and skiing my way around the world since.**

Hi everyone, my name is Katie and I was born and bred on a sheep and beef farm in Whakatane, New Zealand. Growing up with an older brother my childhood consisted of riding motorbikes, camping, hunting, playing with animals and all other farm related activities. My biggest achievement to date has been surviving a liver transplant and representing my country at the World Transplant Games (WTG) in Australia, 2009. Twenty years on from my operation it is impossible to put into words what the gift of life means to me.

Having an organ transplant has created no physical or mental barriers and everyday I aim to live my life to the fullest. Whether it's skiing in the Swiss Alps, skydiving in the Whitsundays, hiking in Norway or sailing in Croatia; these things have become more than just a dream for me it has become my lifestyle. The freedom, the sense of adventure and getting to explore off the beaten track...my transplant has been my ticket to see the big wide world.

So what's next? Right now I am working onboard a yacht in Indonesia where I will spend the summer cruising between here and the Maldives. Over the next few years I hope to tick off some more of my bucket list adventures which include: skiing my way around the world, yoga course in India, surfing

in Hawaii, assist with research in Antarctica, solo skydiving, Heli-skiing and competing at the upcoming WTG in 2016.

**...my transplant has been my ticket to see the big wide world.**

I want to thank my closest friends and family for inspiring me to travel, to dream big, to live for the adventures, to stay present and to hold onto the memories that mean the most. Without their consistent love and support I know I wouldn't be where I am today.

To my Organ Donor family, I hope that what I am doing with my new liver and life shows the amount of gratitude I feel for having received a second chance at life.

# HepC Cure At Last

Professor Ed Gane explains the breakthrough Hepatitis C cures.

**S**ince the onset of the hepatitis C epidemic in 1980, this liver disease has rapidly grown to become the leading cause of liver failure, liver cancer and liver deaths across the Western World.

As a result, HCV is now the leading cause of liver transplantation in the world. More than 50,000 people are living with HCV in New Zealand, most of whom were infected more than 20 years ago including 6000 who have already progressed to cirrhosis. Although all the complications can be prevented by eradicating HCV with antiviral therapy, less than 1% are treated per year in this country. This pathetic treatment uptake rate is because current PHARMAC funded treatments are interferon injections for one year which poorly tolerated and not very effective.

## New Cures

There has been a revolution in HCV treatment over the past three years, with the development of Direct Acting Antivirals (DAAs), oral therapies which when combined together can replace interferon injections and shorten duration of therapy to only 12 weeks. Three companies now have approved oral treatments for HCV – Gilead's Harvoni, AbbVie's Viekira Pak and most recently Merck's Zepatier. All will cure most patients infected with HCV genotype 1 but not those infected with Genotype 3, which is found in almost 40% of New Zealanders. Also, these three combinations are not as effective in people who have been treated before or who have cirrhosis and Viekira Pak and Zepatier are not safe in people with liver failure so cannot be used on the waiting list for transplant.



**Hepatitis C Virus**

But Gilead has just developed a single tablet combining sofosbuvir and velpatasvir, which, when taken for 12 weeks, is able to cure 99% of everyone, regardless of HCV genotype, prior treatment, cirrhosis, or liver failure. In the recent ASTRAL 4 study, this combination was safe and effective in people with liver failure. Cure led to recovery of liver function and removed the future need for transplantation.

Several of these new treatments are now approved in New Zealand by MEDSAFE and are currently being assessed by PHARMAC. From the 1st March, these new oral treatments will be funded in Australia for everyone living with HCV and will be able to be prescribed by GPs. The Australian Government hopes to treat and cure all 240,000 Australians living with HCV within the next 10 years. PHARMAC are exploring a similar elimination strategy here in New Zealand. This would rapidly reduce the demand for transplant for HCV, thereby increasing the numbers of livers for people with other liver diseases.

## Caution

A note of caution – there has been a lot of media publicity about generic forms of these new tablets which can be imported from overseas, either directly from Indian, Bangladesh, China or via the HepC Buyers Club in Tasmania. The biggest concern is that some of the new DAAs are extremely difficult to make and

that the versions being produced in Bangladesh or China are fakes or poorly effective. Any liver transplant recipient in New Zealand should hold onto his or her money as it is likely that the first patients to be able to access PHARMAC funded treatment later this year will include everyone referred for transplant or who has already been transplanted for HCV.

*Ed Gane*



**Harvoni new cure for Hep C.**



# SHANE'S STORY

## A teenagers journey



**I**'ve been asked to write this to give a young persons experience of having a transplant. But seriously, someone my age wouldn't read it, so I guess really its for the Mums who want their kid to read it.

I was diagnosed with Cystic Fibrosis when I was eleven. Right from the beginning the doctors said I'd need a liver transplant when I was about seventeen. Mostly I forgot about it, until 18 months ago when they put me through a big assessment to see if I'd be ok for a transplant, because they reckoned my liver would only last another year or so.

The team decided that it would be a good idea to get a new pancreas at the same time as the liver transplant because it would help my CF, meaning I wouldn't need to take lots of pills with all my food and I wouldn't be diabetic anymore.

The double liver/pancreas transplant hadn't been done in NZ so the doctors and my family thought it was a big deal, but to me it didn't really make any difference, it was all too big to think about.

My way of dealing with it all was to just not care about it, and not to remember too much about what they kept telling me about how big a thing it was. During the assessment week they told me a lot about how hard the recovery would be, especially because of the new pancreas. Even I couldn't avoid knowing the recovery wasn't going to be much fun.

The worst part I remember about the whole thing was waking up after the operation and wanting water. They would only give me a sip at a time. That was the hardest thing I remember about the whole stay in hospital, being really angry they wouldn't give me any water. What was weird was that I don't even like water!

*I still can't get my head around the fact that my liver and pancreas came from someone who had died.*

Once I was up on the ward the rest of the hospital stay was mostly boring, it wasn't as bad as the doctors had said it was going to be. I didn't have much pain, and I was used to having lots of needles in me and lots of people looking at my body all day long.

I came home after about 3 weeks. It was fun because I could play computer games for ages and not get hassled. My recovery was pretty easy, nothing like the doctors had said it would be. I didn't get any infections, or have any complications or any more surgery, so being home for 3 months was okay.

The worst thing was having to be really careful about food because of the fear of infections. I stuck to the rules which meant I didn't eat any sushi for 6 months! It sounds a little thing to get annoyed about, but 6 months is a long time not to eat your favourite food. I was good and never cheated, but it was a great

### Shane on his jetski.

day when I could go back to my favourite sushi store!

I still can't get my head around the fact that my liver and pancreas came from someone who had died. It must have been a hard time for that person's family and it was a pretty amazing decision they made to let me have the organs so I could live.

Because my operation and recovery went so well I went back to school after three months. I didn't want to go on the first day because I was worried about what people would say. I've always hated being different because of my CF and I didn't want to go back and have everyone asking me lots of questions. But because people knew how I am no one really said anything to me which was a relief.

Nine months after the transplant my life is pretty normal. Some things are easier, like having the energy to keep up with my friends, the awful blood noses have stopped, and people have stopped hassling me to eat all the time. Also now people aren't worried about my spleen bursting and me bleeding to death, so I can do things like riding the jetski without all the adults having that worried look on their faces which I always hated. Now I just want to be an ordinary kid.

Shane

# A JOURNEY OF FAITH

**H**i, I am Haydee and this is my story.

For the last twenty years, liver disease has been a part of my life, an enemy, slowly but surely taking ground. It robbed me of my health, opportunity and finance. It put me in life threatening situations on numerous occasions.

I returned to NZ, from Sydney in March 2013 after living and working there for 16 years. I was extremely unwell and underweight. Within weeks I was told I would need a liver transplant, the expected wait would be 12 months, if I made the transplant list. I didn't meet the MELD criteria, but there was hope that I might meet "some other criteria". In June I made that list.

I had been on the waiting list for 14 months. I turned to God and said, "Lord if I can't have my transplant at Christmas, can I have it now?"

Little did I realise what impact that simple, off the cuff prayer would have, and what it would set in motion.

Five days later I had a very vivid dream. In the dream, my Transplant coordinator phoned and offered a liver to me. I didn't give any weight to the dream or put any store in it. I only mentioned it to one person; then it was quickly and completely forgotten.

Two days later, I received a phone call, from my transplant coordinator just as in my dream. I was offered a new liver; I had under an hour to get on my way to Auckland. I was calm on the phone, but when I got off... panic! All I could think about was "I have to do my dishes" So I did my dishes. Mike (my support person) and I arrived at Palmerston North



**Haydee post-transplant**

Airport. I checked in, while he parked the car. After checking in I looked at my watch. It was six o'clock. We had checked in with under a minute to spare. It was then I realised God was with me every step of the way.

In the process of prepping for the surgery my specialist came and asked what I would like to do with the liver. Would I like it disposed of, cremated or preserved in a jar? I promptly replied, "What am I going to do with it? Put it on my mantle piece?" (We both laughed).

*God has taught me to be bold, and seize the moment, if I want to see Him work in my life.*

I had the transplant early the following morning, a nine-hour operation. This was followed by emergency surgery hours later for a blood clot in the hepatic artery. I woke two days later. The next day I was up on my feet.

**Day Five.** My body was rejecting my liver, while I was concentrating on nausea and vomiting.

**Day Seven,** 3pm. The team inform me that my liver is working...the bile ducts are not. I would be back to surgery the next day, if early morning blood tests showed no change. After they left I prayed "Lord I don't want a third surgery can you please make

my bile ducts work". God answered swiftly; by 10 am the next morning I had the news that my bile ducts were working.

At times I had burning questions of surgeons but it was often tricky to get hold of them. So I prayed that I would encounter one of them... and we did eventually cross paths. Mike and I were coming out of the lifts, and Steve Munn was about to walk in. I said "Hi" He said "Hi". Then in the micro-seconds that followed I had a conversation taking place in my head. It went something like this... God "So Haydee are you going to say something to him?" "But Lord he's busy, he's about to go in the lift". God "Are you going to waste this opportunity?" So I grabbed my moment, opened my mouth... I wanted that answer. God has taught me to be bold, and seize the moment, if I want to see Him work in my life.

I went to Australia recently and was told by my former gastro, had I remained in Sydney, I would have died waiting. Yet here I am today alive and well.

My health is improving in every way. What the Locust has eaten, God has restored!

I thank God for the miracle that I live.



# Starship CNS team changes



**Starship's CNS team: Karyn Sanson, Meredith Foster, Cate Fraser-Irwin**

It's hard to believe the time has flown by so quickly and its now almost the end of 2015!

In this issue we have shared the thoughts of a recipient and parent who have been through the transplant process recently. For us it serves as a poignant reminder of the rollercoaster ride that is transplant.

As always the nurse specialists have been busy caring for our well known and new families and children. This year so far we have done 10 transplants in 9 children and have several more on the active list waiting for the ever precious donors.

The big changes for us this year has been the restructure of our CNS service.

Cate has taken on a two-year contract to help set up a new National Intestinal Failure Service. This means she is working half her time in her previous role (you will still get to see her) and half time in the other. Her new role left space for a new CNS to

join the team. It's great to welcome Meredith Foster to our team and she has now been with us almost six months. Many of you will remember Meredith as a Staff Nurse and Nurse Educator on 26b. She brings with her a wealth of knowledge and passion for this service so we are very pleased to have her on board.

Karyn continues a mix of seven days per fortnight CNS and three days per fortnight working for the Paediatric Society in a networks coordination role for both Gastro and Cystic fibrosis.

Having three part timers has meant we have had to change the way we deliver our service to ensure that families continue to get the best care we can provide. Each of you now has an allocated CNS to support you. This person will have the most detailed knowledge of your situation and the longer term goals.

For basic day to day issues we have an acute phone so that families wanting to discuss an

acute problem can phone in during the day and one of us will be able to assist you. We take turns carrying the phone and the number is 021 837 870.

May 2016 bring a happy and healthy year to come where hurdles are overcome and your goals achieved.

Happy New Year everyone.

## **Your CNS team**

*Cate, Karyn and Meredith*

# Alice's adventures

Alice was born 25th May 2009 after a normal pregnancy. When she was 3 weeks old she became jaundiced, her stools were very white and her urine was a rusty red colour

. When I rang my midwife and told her my observations she told me to take Alice to Timaru Hospital that day. A blood test was done and I was told that Alice needed to go to Christchurch Hospital for further testing.

My husband Mike and I were told it could have been one of several things, all which we had never heard of before. It was pretty mind boggling, but it did explain why Alice seemed to always be hungry and filling her nappies so often. I later found out that Alice's liver was not able to break down my breast milk and absorb its goodness. It was basically going straight through her.

The following day Mike and I took Alice to Christchurch. It took a week of testing and waiting to find out that Alice had Biliary Atresia (the bile duct is blocked or absent). Because her bile was not able to drain into the intestine, it builds up in the liver, causing irreversible damage. It is a condition that affects approximately 1 in 15,000 births.

At 5 weeks old Alice underwent her first operation. This was the Kasai procedure - an attempt to rebuild her bile duct. A piece of her intestine was joined to her liver. We were at Starship for just over two weeks before we were transferred to Christchurch Hospital for another week.



Alice (right) with her sister Hazel and her new cousin

One third of Kasai operations are successful, one third buy some time for the child to grow larger before it fails and one third fail immediately. Unfortunately Alice was in the latter group. We had only been home for 8 days when I noticed that Alice's tummy seemed to be very large. I took her to our family doctor who immediately sent us back to Christchurch Hospital. We were in Christchurch Hospital for 3 weeks before they sent us back to Starship for a liver transplant assessment. This was not what we were expecting or wanting to hear.

We arrived at Starship Hospital mid-August, Alice was not quite 3 months old. Unfortunately, she went down-hill really quickly. Her bilirubin was rising daily causing her skin, the whites of her eyes and even her tears to turn yellow. Normal bilirubin rates are 3-30; Alice's was in the

700's by the time she went to transplant. Alice's tummy was filled with fluid (ascites). The ascites made it very hard for her to breathe as her lungs were being squashed. When you have liver disease the blood flow increases in your body due to the liver not being able to cope with its normal load of blood. This caused several complications for Alice. Her spleen increased in size and consumed more blood cells than normal requiring Alice to have regular blood transfusions. Alice also developed varices at the top of her oesophagus. These are veins that struggle to cope with the increased blood flow and bulge, and if they burst, can cause a life threatening bleed.

As you can imagine, Alice was not sleeping well, Mike and I stayed alternate nights at the hospital with her. We were like ships in night. Some nights we were lucky to get 2 hours sleep



in total, it was hard and despairing. What got us through was our amazing family support. Both sets of grandparents came up when they could, and even stayed at the hospital to give Mike and myself the odd night off so we could spend time together.

In September we were told to write a list of possible people who could be live donors for Alice. Mike (my husband, Alice's dad) was first on the list. He went through many tests during the month of September, and thankfully, passed them all so he was lined up to be her donor.

Alice's operation was scheduled for Tuesday 20th October, but she had other plans. By Thursday 15th October she had deteriorated so rapidly that the decision was made to do the transplant on Saturday 17th October – she had less than 48 hours to live. Mike was taken away at 8am and Alice at 10am. Mike's operation took five hours, Alice's took 12 hours!

At age 4½ months Alice was the youngest patient the transplant team had operated on – but they did an amazing job and the transplant was a success.

Alice's recovery was not without its complications. Her hepatic artery stopped working two days after transplant which required another five hour operation to try and save her new liver. After 10 days in PICU she was finally released to the general ward, two weeks later she was released to our room at Ronald McDonald House. During the 3 months post-transplant (when we had to stay in Auckland) she had several complications, including biliary strictures that required hospital stays.

At the end of January 2010, aged 8 months old, Alice was finally cleared to go home to Temuka. We were only home three weeks when she was airlifted back to Starship because she had metabolic acidosis – we spent another six weeks in Auckland before going home on March 30th. At 10 months of age Alice was finally home for good.

Alice is now six years old and she is doing really well. She had not stayed overnight in a hospital with transplant related issues since she was two years old, and she lives life to its fullest. Mike and I are so proud of



**Alice at four months**

her and we will be forever grateful to the wonderful people who looked after her when she was so sick.

*Kate Manson*

*Mother of Alice Johnson*

## STATISTICS

**No. of transplants to date**  
(Feb 1998 – Dec 2015)

- 643 in 614 patients
- Paediatric transplants – 124
- Adult transplants – 519

## 2015

- 86 patients assessed for transplant (18 paediatric)
- 48 transplants to date
- 12 paediatric transplants
- 36 adult transplants
- Age range 3 months to 72 years
- 15 female
- 33 male
- 3 live donors



## Jump Jam Champion

Keira is a ten year old girl who is waiting for a liver transplant.

In November she made it to the National Jump Jam competition in Christchurch and her team came second! This was very important to Keira as, when she was listed, all she wanted to be able to do was make this competition and perform with her group. Well done Keira!

# Lions Transplant House makeover

When the New Zealand Liver Transplant Unit (NZLTU) was being set up, the importance of providing an accommodation facility for liver transplant patients and their families was recognised.

The feeling of being at home and not just a place to stay was essential. Although the NZLTU receives funding from the Government to provide accommodation for patients from out of Auckland if needed, there was no funding to set up a specific facility for the Liver Transplant Unit.

The NZLTU approached the Lions Club and proposed that Lions sponsor Transplant House (as well as other major set up costs of the NZLTU).

Through the great generosity of the people of New Zealand and the Lions, including Lions International, a very large amount of money was provided. Transplant House was purchased in May 1999 and refurbished from these funds.

In 2000 Lions Transplant House was gifted to a Charitable Trust:

Transplant House opened for patients and their families in May 2000.

In March 2015 renovations of Lions Transplant house commenced. This involved a full external paint of the house, including the roof and internal paint of each unit. The front door has been painted a beautiful “poppy” red.

Each unit was fitted with new carpet, curtains, linoleum and an update to kitchens. Margaret Barnett and I enjoyed shopping trips to purchase new lounge suites, dining room furniture and new beds for each unit.

Renovating Lions Transplant house whilst trying to maintain its functionality for our patients



was not without its challenges from March through to July 2015. Throughout these months we were able to maintain two units for patient occupancy. Thank you to those patients and their families who stayed during this time, negotiating the scaffolding and workers. This renovation was no small task. Parking was at a premium for both residents and the many onsite workers involved in this project. The result has been spectacular and given the units a very fresh and homely, well needed boost.

On behalf of NZLTU and our patients – Thank you to Lion Transplant House Trust for these renovations.

Margaret Barnett is a constant familiar face to those who stay at Lions Transplant House. Whether it be sorting the internet or the

fire alarm, arranging the laundry or mowing the lawns...we'd be lost without this very bubbly and energetic, caring lady. Thank you Margaret on behalf of NZLTU and all patients to whose stay you make that much easier.

Of the 45 patients who received Liver transplants in 2015, there have been 34 adult liver transplants in 2015. 22 were from outside of the wider Auckland area and stayed in Lions Transplant House with an average stay of 31 nights.

Our occupancy for 2014 was 85% and in 2015 has been 71% ( a reflection of some lost occupancy during renovations )

*Fionna Burgess* –  
Liver Transplant Coordinator



Bedroom makeovers included new carpet paint and beds.



Margaret Barnett, the human face of Transplant House. Responsible for the upkeep and smooth running of the home away from home.

Kitchen makeovers included new vinyl and white goods



Lounge with new carpets and furniture

The garden at Transplant House is an oasis of tranquility even in the middle of the city.



**15 year anniversary  
2000–2015**

Graeme  
Ik-Wan  
Christine  
Lagaali  
Rita  
Vao  
Carmen  
Murray  
Byron  
Greg  
Suon  
Oliver  
Murray  
Sesemahe  
Nadia  
Basil  
Robert  
Grant  
Xiao

**10 year anniversary  
2005–2015**

Janette  
Kieran  
Oeung  
Gerald  
Sireli  
Geoffery  
Colleen  
Liam  
Matthew  
Edwin  
Wayne  
Wendy  
Henry  
John  
Michael  
Cuong  
Jacqueline  
Graeme  
John  
Nadine  
Khairai  
Ruby  
Bryan  
Raylene

**5 year anniversary  
2010–2015**

Te Kira  
Ngatupuna (Charity) Upoko  
Gary Wilson  
Utiku  
Jesse  
Leonie  
Athena  
Margarita  
Grant Watson  
Christopher  
Sefo  
Serenity  
Oliver  
Vimal  
Hamdi  
Isabelle  
Youkhana  
Lilly  
Emarasi  
Satish  
John  
Paul  
Kevin  
Mafina  
Ian  
Alan  
Allen  
Opeti  
Iharaia  
Son  
Dale  
Touy  
Michaelle  
Sophie  
Charlie  
Brett  
Dan-Tong  
Susan  
Pierce



# TRANSPLANTING THE GAMES?

**S**itting here on the beach at Bonjour Resort Mele Bay Port Vila Vanuatu I have been exploring nearly twenty years of post transplant life.

My journey began even earlier when I was unwell after giving an airline marketing course in Katmandu. The medical team at Air New Zealand referred me to a specialist who discovered that I had a relatively rare liver disease. Eventually some years later the condition deteriorated and I was fortunate enough to be referred from Auckland Hospital to Royal Prince Alfred Hospital in Sydney. Ten months later Cathy, our now three year old son, Jamie, and I returned home post transplant.

After we had our second son I was introduced to the NZ Transplant Games Association and took the family to our first Australian games in Adelaide. We meet up with many individuals and families who share a love of life and saw participation in adventures and sport as important as spreading the message about organ and tissue donation. Subsequently we have been to a number of the Australian games, the next is planned for Sydney in 2016 [www.australiantransplantgames.com](http://www.australiantransplantgames.com)

In alternate years I have been fortunate enough to have attended some World Transplant Games, the next of which is in Spain in 2017 [www.wtgm.org](http://www.wtgm.org)

We have never had a New Zealand Games but perhaps a solution could be to have a series of mini games in parts of New Zealand or the Pacific Islands.

Today I had a kayak race out to a sandy atoll before snorkelling near the reef in lovely temperate waters. This afternoon it was mini golf and tomorrow tennis, volley ball and pétanque. Soon the beach will be cleared of dead coral ex Cyclone Pam ready to improve beach access for swimming. For athletics there are plenty of open spaces, ball throwing, and beautiful walks to nearby waterfalls perhaps moun-



**Ken Newlands in Vanuatu**

tain biking or multi-sport events. We passed a magnificent golf course on the way out here, advertising an Ambrose style tournament so those with little golf experience team up and share the best score from their team.

The list goes on but I can just imagine the camaraderie between donor families, recipients, altruistic live donors, and interested medical personnel, all in need of a break and sharing common goals of remaining somewhat fit, with various perspectives of the transplant journey.

*Thanks to the Butterfly Trust, doing aid work here in Vanuatu, for the opportunity to win the prize that enabled us to travel, Air Vanuatu and Benjor Resort, and all who have shared this twenty year journey, we look forward to meeting you at a transplant games in the future.*

*Ken, Cathy, Jamie and Cameron*

For more information about joining the New Zealand teams go to [www.transplantnewzealand.org.nz](http://www.transplantnewzealand.org.nz)

*cont from page 12*

Professor Ed Gane continues to collect accolades in NZ and throughout the world with his work in hepatitis B and C. He was recently elected as a fellow to the Royal Society of New Zealand. Again we are so incredibly privileged to have Ed in our unit, sharing his expertise.

Thanks to Jude Woodside for his invaluable contribution to *Hepatic Happenings*. Without his hard work and expertise, we would struggle to produce this magazine.

Thank you also to those of you who have sent "your story" to us. We love receiving these and want you to keep them coming in. Contact me or your transplant coordinator if you need help in the future. I would love to have a page next year on celebrations, for example first day at school, weddings, births, mountains climbed, any achievement you have done.

I wish you all a wonderful 2016, the best of health and for those waiting for a transplant, we hope that call comes soon. Best wishes from us all here at the NZLTU

*Margaret Johnston*





Barry Harrison (Liver Transplant coordinator), Amy Cole (Research Coordinator), Lay Cunningham (Research Coordinator), Kathy Oliver (Team Support), Angelle Lockie (Research Coordinator), Fionna Burgess (Liver Transplant coordinator), Dr Kitty Croxson (Virologist), Dr Sylvia Wu (front) (Registrar), Dr David Orr (Hepatologist), Margaret Johnston (Nurse Practitioner), Jen Chesborough (Nurse Specialist), Dr Dominic Ray Chaudhuri (Hepatologist), Dr Priyanka Lilic (Registrar), Jane Biddulph (Research Coordinator), Christine Becker (Social Worker), Prof Stephen Munn (Director and Transplant Surgeon), Dr Papu Prasad (Research Registrar), Prof John McCall (Transplant Surgeon)

## Hepatic Happenings

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**Contributions for 2016 issue welcome.  
Tell us your story.**

Please send to:

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Hepatic Happenings would benefit from any sponsorship or financial contribution to printing costs of this annual publication. Thank you very much to those who contributed to this last year it was really appreciated. If you or your company are able to help with a small donation for the future publication, please contact Margaret Johnston at above address.

Cheques made out to: "THE LIVER TRANSPLANT SUPPORT TRUST" or can be paid directly into the bank account: 02-0100-0047156-000. If you require a receipt, please contact Margaret.

# From the 15th Floor

Another year has gone by and it's been busy once again. 2015 was a record year for liver transplants with 48 lucky recipients, thanks to the generosity and kindness of the families of the deceased donors and of course the 3 live liver donors who donated their part of liver to one of their loved ones. We hope all the "new" recipients are doing well, we know how thankful you are for the opportunity for another chance of life.

### Prof John McCall returns

We are thrilled that Professor John McCall has returned to the NZLTU. He currently shares his expertise week about between Dunedin and Auckland. For those who don't know John, he was one of the founding surgeons with the NZLTU (along with Prof Stephen Munn) back in 1998. John is a Hepatobiliary and Transplant surgeon, and he also set up the NZLTU live liver donor programme back in 2002. He brings with him incredible knowledge and expertise in transplantation.

Also new to the NZLTU team is Christine Becker, our new social worker. Christine originates from Berlin, Germany and has been in New Zealand for ten years now. She had been working in the Mental Health sector, but is now working for the NZLTU four days a week. She is passionate about her work with the liver transplant patients and their families, and has enjoyed meeting and working with the patients and their families thus far.

### Achievements:

Some of us have been working for ADHB for a long time. Kathy Oliver (NZLTU Team Support), Margaret Johnston (Nurse Practitioner) and Fionna Burgess (Transplant Coordinator) were recognised in the recent ADHB's long service awards for 20 years of service. It's hard to imagine where that time has gone, but we have all been privileged to have met so many wonderful people (patients and colleagues) over that time.

Congratulations goes to Fionna Burgess, who after a lot of sweat, tears and study passed the North American Transplant Coordinators clinical exam. This is an extremely gruelling 3 hour exam, an awesome effort and result.

Congratulations also to our "ULTRA MARATHON MAN". Barry Harrison completed the Tarawera 100km off trial run in February this year in a time 12hrs 15mins. Barry trained by running 21km's to work, then cycling home several times a week. It's tiring just to think of this incredible effort. Barry and Helen Evans recently spoke at the NZ Gastro Conference in Rotorua on Transition services in the ADHB. This focussed on the success of the Liver transplant young person's clinic which has now been operating since 2012. While at the conference Barry also won the "Great Guts Charity Run", a 5km run which had been won for years by the same gastroenterologist, so it was with great kudos that he won.

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