

# JOINT SUPPORT

ARTHRITIS NEW ZEALAND NEWSLETTER MARCH 2017



*Acknowledging the different faces of arthritis*

## 2017 – time for people with arthritis to speak up in election year.

We are preparing for election year and asking all of our supporters to join us in working to make arthritis a major health issue for current and aspiring politicians. We know the facts:

- 624,000 adults have a diagnosis of arthritis in New Zealand (Ministry of Health New Zealand Health Survey)
- Arthritis can affect people of any age and contrary to a widespread myth it does not only affect the elderly
- Arthritis is a serious health issue that requires attention – and not dismissed as *just a bit of arthritis*
- More people have arthritis than diabetes and heart disease combined
- Half the clients who use the services of Arthritis New Zealand are of working age and reducing barriers to their being able to stay in employment is one of our key priorities
- Gout is a form of arthritis and Māori and Pacific men are more likely to be affected by gout because of their genetic makeup.

Unfortunately many people are unaware of these facts and we cannot assume they are common knowledge or widely understood. We continue to be frustrated with the myths that are perpetuated. Our task this year is to make sure that politicians of all parties become familiar with these facts and commit to improved management of all forms of arthritis.

During the last election we were delighted to see the National Party make a commitment to funding improved services – a pledge which resulted in the establishment of Mobility Action Programmes around the country. These are pilots only and part of our task this year is to ensure that funding for these programmes continues.

We also need people to tell their stories about the challenges of living with arthritis so we can share them and educate not only politicians but the wider public. It is time to strenuously promote arthritis as a serious health issue!



Over the next few months we will be working on an arthritis manifesto and providing talking points and questions for our supporters to use. For this to be effective we need thousands of people to become involved – please join our team.

### **This year we ask you to**

- Become part of our election year activity by joining our arthritis advocates and telling your story
- Tell us what issues and policies are of interest to you by completing our online survey
- Join our teams contacting local candidates

Call us on 0800 663 463 and leave your name, postal address, and phone number and our advocacy team will get in touch with you.

*Don't have internet access? You can still be involved!*  
Just leave us your contact details.



**ARTHRITIS  
NEW ZEALAND**

KAIPONAPONA AOTEAROA



## From the President

Our AGM is always an interesting meeting. At the meeting in 2016 there was a lively discussion on how we engage members in ways that are relevant to the current times.

For most of our members this quarterly newsletter is the most regular form of communication. Twice a year, like this edition, the newsletter is delivered to a much wider circulation and includes our donors and supporters.

A small number of members form our Regional Liaison Groups – we have one for each of our three regions. I would encourage you to talk to the members from your area on the Liaison Group and the regional representative on the Governing Body. These people have volunteered to serve you as members in a governance role.

Like a number of other incorporated societies our membership numbers are decreasing. Many of our 3,000 members have been long term supporters and see membership as one way of demonstrating their ongoing commitment. However members now represent only a small segment of the people with whom we engage. Our mission is *“Improving the life of every person with arthritis”* underlying our commitment to work with and for people with arthritis regardless of membership status.

We have more people who commit to supporting Arthritis New Zealand through being donors, volunteers and supporters than we have members. For a variety of reasons many people see this as a more relevant way of supporting us. These donors and supporters are important stakeholders. Many of the people who access our information and services have fleeting contact with us. We want that fleeting contact to be positive – and perhaps build into long term support.

Last year our Arthritis Educators had over 20,000 contacts with people living with

arthritis. We recognise these numbers only touch the surface of our goal to help every person living with arthritis in this country. This aim to reach out to all is one of the reasons we have reorganised the way the organisation works. For us to reach out to more people and live within our resources we will be focusing on a wider reach – through public awareness and web based resources. Over the past five years the number of hits to our website has grown five fold. I have been interested in seeing how younger people with arthritis reach out to the organisation through services such as our Facebook page.

At the AGM we committed to using this year to review options for membership and representation. This recognises that the models that were developed last century are not necessarily going to meet current and future needs. I, and other members of the Governing Body, will be taking opportunities to hear from members, clients, supporters and people with arthritis who do not affiliate formally with us about how we structure ourselves for the future.

We are excited that we have a commitment from the Ministry of Health to work more closely with us so that together we can ensure services for people with arthritis are available right across the country

However you connect with us – be it as a member, a donor, a volunteer, a client or a supporter I hope you find the connection to be a positive one.

A handwritten signature in black ink that reads "P. Larmer". The signature is fluid and cursive, with a large initial "P" and a long, sweeping underline.

**Peter Larmer**  
President

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Editor: Dianne Armstrong  
Email: [editor@arthritis.org.nz](mailto:editor@arthritis.org.nz)  
Phone: 0800 663 463

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## From the Chief Executive

Kia ora tatou

In January 2017 my status changed – I became a grandmother for the first time. Like many life changes I didn't necessarily ask for, nor want, the change but once it happened I have embraced it with enthusiasm.

As I hold my little granddaughter it is hard for me to envisage the world she will grow into. When I was born only half of New Zealand households had a fridge or a washing machine let alone any other "mod cons". The New Zealand population hit the 2 million people mark as a result of people like my parents who emigrated to New Zealand for a better life. The country my little one grows into has far more people and we are aware of far more social problems than those halcyon days of the 1960s. According to Statistics New Zealand she is highly likely to see the start of the 22<sup>nd</sup> century.

Benjamin Franklin is quoted as saying "When you're finished changing, you're finished." As he lived in the 18<sup>th</sup> century one can only imagine the changes that have happened since then. It's an interesting thought that had he been alive now given his love of inventions and technology he might well have been a keen Facebook user!

Many commentators say we are now living in the fastest-changing communications and technology landscape of all time. In my working life email has taken over from letters as the main communication tool. I can remember faxes being high tech and now they are almost obsolete. Facebook only began in 2004 and now one-and-a-quarter billion people and millions of businesses globally use it to communicate.

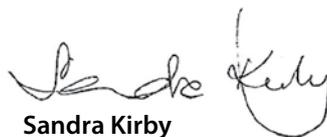
As signalled last year with the new Strategic Plan agreed by the Governing

Body we are changing the organisation to be able to meet these ambitious goals. We will complete the move to having offices in Auckland, Wellington and Christchurch. Having an office is not a core service. Our services are available for people from Cape Reinga to Bluff – most people are now connecting with us electronically so our website, email and Facebook pages are an important first point of contact. One of the other advantages of our technology interface is that people can contact us at a time that suits them – even if that's the middle of the night. We won't guarantee an instant response at that time!

The phone – 0800 663 463 remains a vital service, especially for those who don't have computer access and those who want to talk to a person. Our phone service is currently limited to business hours.

I'd like to think that by the 22<sup>nd</sup> century a cure has been identified and made accessible for at least some of the 140 forms of arthritis. We at Arthritis New Zealand want to be part of that – which is why research remains an integral part of what we do.

Yes this year, like every year before it, is bringing change. I confidently predict the years ahead will also bring changes, because we are not yet finished.



**Sandra Kirby**  
Chief Executive



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## Treatment Options Available to People with Osteoarthritis in New Zealand

In October of 2015 Associate Professor Peter Larmer, Dr Sandra Bassett and I were awarded one of the Arthritis New Zealand Summer Student Scholarships. The funding allowed us to employ a final year physiotherapy student (Jasmin Gibbs-Grant) for the summer, to assist us in our study of treatment options available to people with hip and knee osteoarthritis in New Zealand. A summary of the project's findings is described below.

The project proved so successful, we have been awarded another summer scholarship in 2016. This new study is an extension of the first study and includes an online nationwide survey of treatment options available to people with hip and knee osteoarthritis in New Zealand.

The aim of our first study was to explore the sequence and nature of treatment options available to people living with osteoarthritis (OA) of the hip and/or knee in New Zealand. In total we interviewed twenty-three people living with the condition. The interview questions focused on people's experiences of being offered and receiving treatment for their OA. All of the stories that people shared with us were analysed for reoccurring themes, which led to the identification of three themes.

What we found was that for most people their general practitioner (GP) was their initial and main healthcare provider for OA management and advice. It was reported that following diagnosis, people explored a variety of treatment options for their hip and/or knee OA. This finding supports the notion that there is no clearly defined treatment pathway for people following diagnosis. People described how they had received inconsistent advice from different health professionals, and sometimes felt uninformed and unsupported. The conclusions that we drew from our study are that people living with OA are looking for consistent advice and a clear management pathway. Also,

that GPs tend to be the first healthcare professional that people contact about their OA but following this consultation there is no clear identifiable management pathway. Jasmin was awarded the ML Roberts physiotherapy student research award for her work on the project.

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*Our goal is to survey as many New Zealanders as possible living with hip and/or knee OA about treatments that they have been offered for the condition.*

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The success of this first study has led to the funding of a national survey about OA treatment in New Zealand. This research is again being supported by an Arthritis New Zealand Summer Student Scholarship. Our goal is to survey as many New Zealanders as possible living with hip and/or knee OA about treatments that they have been offered for the condition. The survey is quite short, so if this is you and you think you may like to participate in our survey, please click on the link below (or type it into the web browser on your computer) for more information and to participate.



**OA Treatments Survey link:**  
[www.surveymonkey.com/r/OAtreatments](http://www.surveymonkey.com/r/OAtreatments)

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**Daniel O'Brien**  
Lecturer, Physiotherapy Department  
Auckland University of Technology

**[dobrien@aut.ac.nz](mailto:dobrien@aut.ac.nz)**

# The Patient Experience of Musculoskeletal imaging: A Mixed Methods Study

Musculoskeletal (MSK) imaging tests (X-ray, ultrasound, CT and MRI scans) are common tests for diagnosis or management of arthritis. Many factors influence the choice of test; in addition to accuracy and cost, patient preference and tolerance are important considerations. Few studies have examined the patient experience of undergoing these tests.

The aim of this project was to understand the patient experience of having these tests. The first stage of our project involved interviewing patients following an MSK test and the second stage involved a postal questionnaire.

This project was funded by an Arthritis New Zealand research project grant. The lead investigator was Professor Nicola Dalbeth, a rheumatologist in Auckland. Other members of the study team were: Associate Professor William Taylor (rheumatologist), Associate Professor Anthony Doyle (radiologist) and Professor Merryn Gott (health sciences). Dr Sandra Bourke, a recently qualified rheumatologist from Auckland, coordinated the study as part of her Masters of Medical Sciences degree.

## Stage one: The interview study

Interviews were conducted with 33 patients who had had an X-ray, ultrasound, CT or MRI scan for investigation of arthritis in the previous 6 weeks. During the interview patients were asked why they were having the test and about information they received prior to the test. They were asked in detail about the test process and how they felt during it. There was discussion about receiving results and the overall experience of the test. Each interview was recorded and transcribed and transcripts were analysed for recurring patterns or themes.

The majority of patients had rheumatoid arthritis, gout or psoriatic arthritis. The key findings were that patient knowledge

about tests was from information they received from their doctor and their previous experience of imaging tests. Most patients were aware of potential harm from intravenous contrast or radiation. However, patients perceived imaging as part of standard clinical care and believed the benefits of tests outweighed the potential risks.

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*Analysis of the questionnaires showed that a number of factors contribute to the overall experience of the test; particularly interactions with staff, discomfort during joint positioning, and viewing the images with the doctor.*

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Discomfort was described; due to claustrophobia, negative interactions with staff, and pain due to positioning. Some patients felt anxious waiting for tests or results. Viewing images with the doctor resulted in improved understanding of disease and a sense of personal involvement in arthritis treatment.

## Stage two: The questionnaire study

These findings of the interview study were used to develop a questionnaire about MSK imaging for the second stage of the project. The aim of this study was to understand what factors contribute

most to the patient's overall experience of MSK imaging tests. The questionnaire was posted to patients who had had one of the four imaging tests of a joint for investigation of arthritis in the preceding 6 weeks. 132 patients responded to the questionnaire.

Analysis of the questionnaires showed that a number of factors contribute to the overall experience of the test; particularly interactions with staff, discomfort during joint positioning, and viewing the images with the doctor.

## Summary

This study provides new information about MSK imaging tests which will be used to improve the experience for people with arthritis. Particular areas for focus are careful consideration of patient comfort during joint positioning and encouraging doctors to view the images with their patients.

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### **Dr Sandra Bourke (BSc, MBChB, FRACP)**

Department of Medicine, University of Auckland.

## Orange



Once again the Geraldine Brophy-produced and directed play *ORANGE* took to the stage. This time in Auckland.

Rehearsals were held in Wellington and we introduced Auckland actors firstly to an earthquake and then flooding. But it was all taken in their stride and two great performances ensued. The case was again a mix of young adults with arthritis and professional actors.

## Camp



While you are reading this the Annual Children's camp will be underway. Once again children and families from across New Zealand will be joining us in Matamata for a full weekend of fun and information.

We are looking forward to catching up again with Zara and her family. "It's so good to realise you're not alone in this." They're the heartfelt words of a father after attending the Arthritis New Zealand camp for children with arthritis at Matamata.

His daughter, Zara, felt the same but put it this way: "I found I could enjoy running with other kids because they're just as slow as I am!" Zara was diagnosed with a form of JIA (juvenile idiopathic arthritis) when she was 2. She's now almost 12.

For the parents attending the camp with their children, Arthritis New Zealand organises talks by first-rate professionals in the medical and allied fields so that, on their return home, they can better understand and cope with their child's condition.

"They really level with us. They speak in non-medical language we can understand."

Planning, organising and then making the camp happen costs about \$30,000 each year.

## The Attitude Awards Hall of Fame

Anne Hawker – Inducted in 2016

Anne Hawker has been driving change in the disability sector for 35 years. When her first child was seven months old Anne had the first 'attack' of what was originally diagnosed as MS but was later explained as a general neurological condition.

She soon recognised that disabled people were ostracised from society and did not have access to good information; Anne rallied a team to establish the Mosgiel

Disability Resource Centre, an information hub that became a model centre for the rest of the country.

Today Anne is the Principal Disability Adviser for the Ministry of Social Development. She is constantly engaged in advocacy and has held many leadership positions in prominent disability organisations in New Zealand and overseas.

Anne was the first woman President of Rehabilitation International of which DPA (NZ) is the NZ National Member Organisation. She was also the former President of DPA(NZ) and of the Dunedin regional DPA.



## Academic Elected a Fellow of The Royal Society of New Zealand

Professor Tony Merriman was one of four leading University of Otago academics newly elected as Fellows.



Tony has contributed to the pre-clinical and clinical science of autoimmune diseases and gout in New Zealand, particularly in Māori and Pacific people. He has shown the genetic and environmental elements of gout, which has informed public health advice and drug availability in New Zealand. He has also made important academic advances examining large health data sets, drawing key conclusions furthering the understanding of gout.

"I was really surprised to get elected, said Tony. This is a reflection on the standing and respect that gout research has internationally. I must emphasise that this award is also about my colleagues and the research environment in NZ. The NZ gout clinical research community are held in high regard."

Arthritis New Zealand was delighted to be able to provide an independent reference for Professor Merriman who has had a long association with us. He has been the recipient of grants from our research fund to support his rheumatoid arthritis and gout studies.

We have appreciated that in addition to his prolific academic writing Professor Merriman has worked to make his research accessible to the general public and in particular to Māori and Pacific people through contributions to our *Joint Support* magazine and presentations to the media.

In our view this was well deserved recognition.

*The Royal Society of New Zealand offers expert advice to government and the public, recognises excellence in research and scholarships in science, technology and humanities, promotes science and technology education, publishes peer-reviewed journals, administers funds for research and fosters international scientific contact and co-operation.*



**David Orr was recently the recipient of the *River City Press Bouquet of the Week*.**

Chairperson of the Whanganui Support Group, David introduced the concept of an 'Anniversary Garden Amble' and has continued to organise this very popular event for 15 years, bringing significant funds for the work of Arthritis New Zealand, as well as enjoyment for many garden visitors.

David received a beautiful bouquet of and a voucher for lunch for two at the Grand Irish Pub. He will share both with his wife Shirley who has lived with arthritis for a number of years.

Arthritis New Zealand is grateful to be supported by:



## Thank you Kaz!

It took him 66 days, but he did it for Arthritis New Zealand. Walked from Bluff to Cape Reinga, that is.

Kaz Noiri is a nursing student at Otago Polytechnic. He also works as a volunteer for an aged care organisation. Through his volunteer work he knows about some of the challenges people living with arthritis face every day.

A Japanese national, he was keen to see as much of New Zealand as he could. So he decided to turn his lust for seeing

New Zealand, and his empathy for people living with arthritis, into a walk from Bluff to Cape Reinga.

He received sponsorship, plus gifts of accommodation and meals right along the way. The 66 days were not easy, but Kaz remained cheerful and optimistic, blogging and sending updates to his website daily.

One of the biggest challenges of the journey confronted him close to the last day. A trail he was using near 90 mile beach abruptly ended with a wall of tough coastal grass twice his height. He steadily knifed his way through, cutting himself on the sharp plants as he went.

Kaz raised \$10,072.05 for Arthritis New Zealand. We cannot admire him enough.



### Some interesting facts:

- Kaz is **29 years** old
- Kaz walked **2,244km**, from Bluff to Cape Reinga
- He was on the road for **66** days
- Walking **3–13 hours** every day
- Kaz raised an amazing **\$10,072.05** for Arthritis New Zealand



*"Kaz is a true inspiration – not only to staff and students of Otago Polytechnic, but also to the wider community. We applaud his sense of adventure and his desire to make a difference, and we are behind him all the way as he takes on this monumental challenge."*

**Matt Carter, Otago Polytechnic's Acting Director Communications,**

## The emotional nature of bequest giving

The call that every charity is humbled to receive.

Early this week I took a call from 'Roy'. He was calling to let us know that he was updating his Will.

His wife had passed away some years ago. She had lived with rheumatoid arthritis (RA) for most of her life and in Roy's view this condition and the medications that helped her daily, had in fact shortened her life.

Over the years they had discussed leaving a gift to Arthritis New Zealand.

We hadn't had any previous contact with either Roy or his late wife, but they had watched our work with interest and shared our passion for finding a cure.

Roy could of course have made this alteration to his Will without contacting us, but he wanted to share their story and how he hoped the gift from him would assist. Of course he said with a smile in his voice that he was hoping that we wouldn't receive that gift for some years.

Roy is now part of our Gerbera Club family and we will enjoy keeping him up-to-

date on our work and advances in the search for a cure. That is the real value of a bequestor letting us know of their plans.

This call reminded me of the importance of continuing to keep current and prospective donors at the centre of what we do.

*Thank you Roy and I hope we are continuing to chat to you for many years to come!*

We know that there are a staggering number of New Zealanders who have not updated or arranged a Will. This is a vital task for us all so that we make the choices on our assets and personal property rather than leaving that task to someone else that may have no idea on what how we would want these items and assets treated.

After family and friends have been cared for encouraging you to consider making a gift to a charity that you may have supported for many years is important. Charities value these gifts immensely.



## Thank You

### Life and Unichem Pharmacies!

During our Appeal in September these pharmacies ran an 'Add a dollar' campaign. In total they have raised over \$15,000 to support our work.

In addition they accepted collection materials from our volunteer collectors which we arranged to pick up. Amazing support!



## Bequest

Do you have a Current will? There are many reasons for ensuring that you have a valid and up to date will.

To protect loved ones. And it is only by means of a valid will that you can be certain that your family and friends will be taken care of when you are no longer there.

Once you have taken care of those who are close to you, you might like to remember Arthritis New Zealand. We are always overwhelmed when we receive advice of a bequest. These gifts ensure our work continues for generations and confirms the importance of supporting the 620,000 New Zealanders with arthritis.

If you would like to talk to someone about leaving a gift to Arthritis New Zealand in your will or for more information, please call Dianne on 0800 663 463 or email [dianne.armstrong@arthritis.org.nz](mailto:dianne.armstrong@arthritis.org.nz)

*Saying goodbye is never easy. Arthritis New Zealand is grateful to those who ask friends and family to donate to us in lieu of flowers. These generous thoughts and donations assist in the funding of our work for the 620,000 New Zealanders with arthritis.*

## Why do they do it? To prove they can!

Greg Buckett has faced many health challenges over the years especially in his teens and 20s. Many people would have given up on the outdoors, despite a love for it. However in February Greg began throwing everything he had into New Zealand's toughest mountain bike race – and, as a charity close to his heart, Arthritis New Zealand got the benefit.

He is an absolute walking billboard for "Arthritis, doesn't need to hold you back!"

Along with team mate Willie Snowden, Greg – who spent many of the early years of his life on crutches due to arthritis – tackled The Pioneer 7 Day Epic, a mountain bike race described as the toughest in New Zealand.

The race saw the pair bike just over 545 kilometres and climb 15,824 metres in a race from Christchurch to Queenstown. To put that amount of climbing into some sort of perspective, it's not far off twice the height of the world's highest peak, with the top of Mount Everest being 8,848 metres above sea level. Their goal, not only to complete the event but also to raise money for Arthritis New Zealand.

Diagnosed with rheumatoid arthritis at age 15, Greg spent most of his teenage years in and out of hospital. Staying mobile required crutches by the age of 23 but, two years later with the help of a full hip replacement, he was able to claim back some of his mobility.

However, it was not to be the end of crutches and with an infection taking hold, Greg lost his hip at the age of 27.

"Strapped to a hospital bed in traction with no hip for two months was an all-time low for me," Greg says.

"After five hip operations I was back up and running but arthritis had not finished with me yet. I needed a total shoulder replacement by the time I was 29."

Would this ever end, he thought; was every joint in his body going to need replacement by artificial means?

For Greg, who is now 43 but still has to live with arthritis, The Pioneer race offers



something extra special – the opportunity to really stretch himself, and take in some of the toughest and most scenic parts of the South Island backcountry.

"I manage my arthritis on a daily basis but have found that I'm limited in the ability to walk any reasonable distance - one hour of walking is no problem, two hours is not so good but after three hours I'm bed-ridden and struggle for days afterwards."

That meant tramping was out of the question, something that was extremely frustrating as Greg loves the outdoors and has always wished he could get out there more often to experience its joys first-hand.

Greg explains "Then I discovered mountain biking. I can ride for 10 hours then get up the next day and do it all again. Now I can go on the wilderness adventures I used to dream about."

Riding seven days straight is a big challenge, but luckily for Tasman-based Greg there was someone local who he could call on to design a training programme that would get him in shape to tackle The Pioneer.

"For years I've followed a life-time local hero, world adventure racing champion Nathan Fa'avae. He runs, paddles, bikes, rafts non-stop for days on end with little to no sleep. He's arguably the best at it in the world and during his races I often

imagined myself running alongside of him."

"I made a pact with myself that if there was ever a mountain bike race over a similar distance that would test myself to the limits that Nathan would experience in his races, I would do it."

Greg says he's grateful that, unlike adventure racers like Nathan who have to rely on virtually no sleep when they race, during the week of The Pioneer he could camp overnight and get some well-needed rest before he tackled the next day's mountain biking.

While the months of training for the event were hard, Greg says he's never been fitter.

He and his team-mate have an added incentive for completing The Pioneer.

Greg says he used the event as a fundraiser for Arthritis New Zealand, as he has huge respect for the work they do and the support they gave him when times were hard.

"When I woke up with arthritis at age 15 I thought I was the only person in the world to have this crippling disease. Today there are 1000 people under the age of 18 struggling with arthritis in New Zealand. I say let's help them, help these people in need."

To sponsor Greg and help Arthritis New Zealand, go to <https://give.everydayhero.com/nz/Greg-Team-Talleys-Pure-Mussel-Race-The-Pioneer>.

**NB if you or anyone you know is interested in taking on a challenge like this to support Arthritis New Zealand, get in touch with Emma.barker@arthritis.org.nz**

## Another hill to run up

You've read about Nicola Wearne before when we highlighted her Polar Marathon run. It seems that life has another challenge as she literally goes to the ends of the earth to overcome her chronic illness – and now she's going to great heights as well.

The mum-of-two, who was diagnosed with rheumatoid arthritis at age 38, has her sights set on the Everest Marathon, the world's highest and probably most adventurous trail running marathon.

Held annually on May 29, in honour of the first successful ascent of Mt Everest by Tenzing Norgay Sherpa and Sir Edmund Hillary, the marathon is a tribute to the adventurers.

"I have always wanted to visit Everest," says Nicola of her desire to compete. "I feel that visiting it is part of being a New Zealander. "I like to share my

experiences in the hope that it helps another who is either struggling with a chronic disease or the struggles that we get thrown at us on a daily basis."

"I'm excited, and nervous, for the Everest Marathon. It's a true feat of endurance, with 16 days of compulsory acclimatisation before we even get to the start line. With the gear required and the sheer logistics of taking on a run of this nature, it will certainly be a challenge!"

Now, with her arthritis in remission, Nicola's heads off on her next challenge. The Everest Marathon. Beginning at



the Everest Base Camp, at an altitude of 5,380m, the race navigates the terrain for 42km to Namche Bazaar.

We are going to enjoy following Nicola again as she carries the torch of 'Arthritis, doesn't have to hold you back'.

### Green Prescriptions

## Getting New Zealander's Moving

The Green Prescription (GRx) support programme has been delivered nationwide since 1998 and has changed the lives of many New Zealanders!

Green Prescriptions are often prescribed by GP's or Nurses but more and more people are now taking action and self-referring to the free programme. We are seeing more and more people with gout, arthritis and joint conditions now accessing the service for lower impact activities.

A list of the GRx providers can be found on [www.health.govt.nz/our-work/preventative-health-wellness/physical-activity/green-prescriptions/green-prescription-contacts](http://www.health.govt.nz/our-work/preventative-health-wellness/physical-activity/green-prescriptions/green-prescription-contacts) or by calling the 0800 ACTIVE (0800 228 483) number.

How clients are supported by the service differs from area to area but can include an initial face to face consultation, weekly group based lifestyle workshops, walking groups, nutrition seminars and guest presenters. Not only do the Green Prescription teams support with workshops and lifestyle information and advice they will also support you to get started with existing physical activity programmes in your community.

To qualify for the service you must be 18 years or older and have a stable medical condition that would benefit from a



more active lifestyle. This can range from: obesity, pre or type 2 diabetes, arthritis, gout, asthma, mental health conditions, or heart problems.

To see some recent success stories and to find out more about GRx in your area go to the Ministry of Health website ([www.health.govt.nz/our-work/preventative-health-wellness/physical-activity/green-prescriptions/green-prescription-contacts](http://www.health.govt.nz/our-work/preventative-health-wellness/physical-activity/green-prescriptions/green-prescription-contacts)), ask your Nurse or GP or you can call 0800 ACTIVE.



# Queenstown Regenerative Medicine *in Auckland*

New revolutionary treatments for **Osteoarthritis** using your own stem cells now available in Auckland.

## Pure Expanded Stem Cells (PESC)

**Queenstown Regenerative Medicine is home to the most advanced stem-cell protocol available - PESC.** This protocol creates a concentration of 95% Mesenchymal Stem Cells (MSC) from your own selected fat sample.

## New Stromal Vascular Fraction (SVF)

QRM has developed a new safer, verified & cost effective Stromal Vascular Fraction (SVF) stem-cell protocol. It is now available to clients in Auckland and Queenstown.

## Cryogenic Storage for Future Use

QRM operates a cryogenic-freezing storage facility that allows patients to preserve their stem cells for future use.

**Call Us Today**  
to find out more

[www.queenstownrm.co.nz](http://www.queenstownrm.co.nz)

[info@queenstownrm.co.nz](mailto:info@queenstownrm.co.nz)

+64.3.441.1276

Skin Institute, Level 2, Totara Health Centre, 1 McCrae Way, New Lynn, Auckland 0600

## Mobility Action Programme (MAP)

In 2015, the Government allocated \$6 million for the provision of early intervention programmes of care for people with musculoskeletal (MSK) health conditions, mainly osteoarthritis.

The Mobility Action Programme (MAP) was established to respond to specific challenges facing the New Zealand health system, being; an increasing demand for health services for osteoarthritis and other MSK conditions, an ageing population, not enough early intervention programmes for people with osteoarthritis and other musculoskeletal conditions, the under-utilisation of allied health professionals (e.g. physiotherapy) skills, knowledge and expertise and that there is a perception that General Practice is less able to appropriately diagnose and treat people with musculoskeletal health conditions than is now needed.

The aim of the MAP is to improve access to community based, multidisciplinary programmes of care including diagnosis, treatment, education and rehabilitation for people with musculoskeletal health conditions. Seventeen pilots have been funded and there is a MAP in every District Health Board (DHB).

**Arthritis New Zealand** and **Melon Health Ltd** have established a partnership and designed the Managing Osteoarthritis (MOA) programme. MOA is a digital, evidence-based self-management programme aimed to support, educate and assist people with mild to moderate osteoarthritis (OA) to better manage their conditions, improve their physical functioning and improve their overall quality of life.

The MOA programme comprises eight self-management modules, access to a personal health coach (Arthritis New Zealand Educators), online information and taking part in an online forum, talking to others who are managing the same issues. The programme will be delivered over the web and mobile platforms

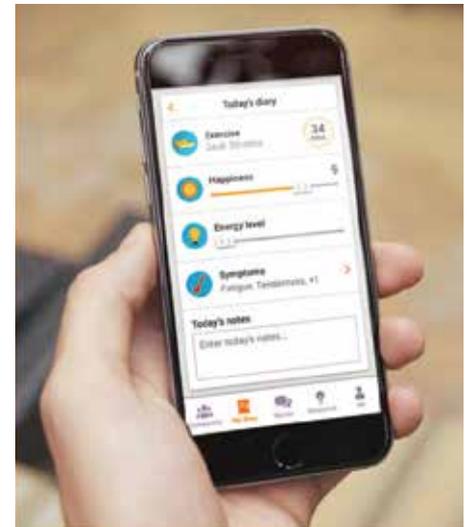
so that participants can take part and receive support from anywhere, anytime, provided they have internet access.

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*The aim of the MAP is to improve access to community based, multidisciplinary programmes of care including diagnosis, treatment, education and rehabilitation for people with musculoskeletal health conditions.*

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MOA is based on evidence based OA management principles focussed on improving symptom management, emotional wellness, stress and access to social support, which are all key needs for people living with chronic conditions.



Melon Health Ltd and Arthritis New Zealand have been funded to deliver 450 MOA programmes to people in five DHBs over three years, (West Coast, Wairarapa, Taranaki, Whanganui and Lakes DHBs).

Melon Health and Arthritis New Zealand are working with Primary Health Organisations (PHOs) and General Practice teams to establish the MOA.

**For further information about this programme, contact**

**Siobhan Bulfin**

CEO Melon Health Ltd,  
Email [siobhan@melonhealth.com](mailto:siobhan@melonhealth.com),  
Mobile 021 510 669

**Cathie Morton**

Health Advice and Research Manager,  
Arthritis New Zealand  
Email [cathie.morton@arthritis.org.nz](mailto:cathie.morton@arthritis.org.nz)  
Phone 04 472 1427



James Parker after completing the Iron Man

## Challenge Wanaka

2017 was the first year Arthritis New Zealand was one of the charity partners for this amazing event.

It was a 3.8km swim, 180km bike ride and 42.2km run for those doing the full Iron Man.

After the horrendous weather of 2016, the sun did come out this year – and that in itself was a real challenge.

Arthritis friends Glen McSkimming and James Parker were out there proving that 'Arthritis doesn't have to hold you back'.

Our Charity team gave it their all and came in 4<sup>th</sup> and we loved the Wanaka Volunteer Fire Brigade in the teams full event (3<sup>rd</sup>).



The Wanaka Volunteer Fire Brigade in action.

## Are you affected by psoriatic arthritis (PsA)?

We will be hosting a live webinar on Tuesday April 4<sup>th</sup> 12.30 to 1.30pm. This will be the first time we trial a webinar.

If you, a family member or friend have PsA or think you may have, then this session will be incredibly helpful.

We have arranged to hold this at a time that is possible for you to watch at work.

Registrations are essential so that we can send you the log in details.

Please either call Dayleen on 0800 663 463 or email [info@arthritis.org.nz](mailto:info@arthritis.org.nz)



**Live webinar**  
**4 April 12.30**  
**Register now!**

# Arthritis New Zealand Research Grants

Arthritis New Zealand 2016 Research Grants' funding round is now open. **Closing date – 31 March 2017.**

Arthritis New Zealand is a not-for-profit organisation which aims to enable a better quality of life for people affected by arthritis. Arthritis New Zealand works in the areas of education, public awareness, direct support, lobbying and funding research.

Arthritis New Zealand supports arthritis related research in New Zealand and annually invites applications for quantitative and qualitative research studies in the field of arthritis.

Arthritis New Zealand has a limited pool of funding to contribute to research projects and thus Arthritis New Zealand is likely to be the sole funder only for small research projects or pilots for larger projects. It is unlikely that Arthritis New Zealand will fund more than \$120,000 per project. However all applications will be considered on their merits.

Arthritis New Zealand now invites applications from people or organisations involved in arthritis related research for grants from the following funds for the period **1 July 2017 to 30 June 2018.**

## Arthritis New Zealand Research Funds

Arthritis New Zealand will have approximately \$200,000 available for distribution in 2017/2018 towards research projects in the field of Arthritis.

## Irwin Isdale Memorial Fund

This fund is available to enable trainee rheumatologists to attend appropriate conferences and meetings in New Zealand or Australia. This fund is discretionary and is distributed throughout the year.

## Wellington Regional Densitometry Trust – Osteoporosis Fund

Arthritis New Zealand will have approximately \$45,000 available for distribution from this fund in **2017/2018.** This fund is available for research in the field of Osteoporosis.

## Summer Scholarships

Arthritis New Zealand offers \$5,000 summer scholarships; proposals will be received from 1<sup>st</sup> February 2017.

The Research Grant Application form is available from our website [www.arthritis.org.nz](http://www.arthritis.org.nz) or for further information contact:

Dayleen Troke, Administrator  
Arthritis New Zealand, PO Box 10020, Wellington  
Phone 04 4721427  
Email [Dayleen.troke@arthritis.org.nz](mailto:Dayleen.troke@arthritis.org.nz)



## Yes, I want to support New Zealanders affected by arthritis!

### My details:

First name:

Last name:

Mailing address:

Please fill in this donation slip and post back to us:

Freepost 157311  
Arthritis New Zealand  
PO Box 10020  
Wellington 6143

### Enclosed is my donation of:

\$120  \$80  \$50  \$25 other:

### I am paying by:

Visa  Mastercard  Amex  Diners

Cheque enclosed (please make out to 'Arthritis New Zealand')

### Card number:

Expiry date:  M  M /  Y  Y

Card holder:

Signature:

Did you know that you can also donate online?  
Visit [www.arthritis.org.nz](http://www.arthritis.org.nz).

Thank you for your generosity!

# JOINT SUPPORT

## For further information...

### Call free 0800 663 463

When you phone our free 0800 number you will be put in contact with one of our trained Arthritis Educators, who can give you advice and support on managing your arthritis. You can also find out about your region's support groups, and when an Arthritis Educator will next be visiting your district.

### Make a donation

Did you know that by phoning 0900 333 20, you can make an automatic \$20 donation to support the more than 530,000 New Zealanders who are living with arthritis?

### Visit [www.arthritis.org.nz](http://www.arthritis.org.nz)

Visit our website for the latest news about arthritis, information about different types of arthritis, downloadable brochures, to find out what's on in your area, and more.

### Offices

Wellington Level 2, 120 Featherston Street, PO Box 10 020, The Terrace, Wellington 6143  
Phone 04 472 1427

Auckland 09 523 8910

Christchurch 03 366 8383

### Facebook



[www.facebook.com/Arthritis-New-Zealand-141779119206755/](http://www.facebook.com/Arthritis-New-Zealand-141779119206755/)

### Twitter



[www.twitter.com/arthritisnz](http://www.twitter.com/arthritisnz)

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NEW ZEALAND**

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