



# Six Counties Kidney Patients Association

Run by Patients for Patients Since 1969

**VIVA-Online: May 2021**

We trust everyone has now received both vaccinations. Sadly our chairman Mike Pitcher, while still waiting to be vaccinated late January, caught the virus while dialysing in hospital and died ten days later in the John Radcliffe. Regretfully, patients who had to go into hospital three times every week to dialyse were refused priority for vaccination and were made to “wait their turn” along with the rest of us.

My thanks to all who helped get this newsletter finished and to our contributors for their articles.

## Contents

<b>Living well with Transplant Online Sessions</b>	<b>2</b>
The Churchill Hospital Transplant Department providing information and support	
<b>IRRITATE Study</b>	<b>5</b>
Do you suffer from itchy skin? A invitation to take part in a new research project	
<b>From our readers</b>	<b>6</b>
Travel to Europe after Brexit, your questions answered Captain Tom 100 challenge	
<b>Day in the life of a Head Teacher</b>	<b>8</b>
Problems with mushrooms or are they poisonous toadstools?	
<b>Walks across six counties:</b>	<b>10</b>
A walk through Northamptonshire: Fawsley Hall & Preston Capes	
<b>Kidney friendly recipes</b>	<b>11</b>
<b>From the archives: 2003</b>	<b>12</b>
The view from four foot one and three quarters: Tea with my MP	
<b>Conundrum corner</b>	<b>13</b>
<b>Photo gallery</b>	<b>15</b>
A selection of photos from our readers with the theme “April/May”	
<b>And finally</b>	<b>17</b>
Sanborn’s Kidney Remedy & The Editor’s Raving Trifle	

We are always delighted to receive contributions on any topic of interest to our readers, be it medical, what you have been up to, a photograph or a favourite recipe. Please email items to [webmaster@sixcountieskpa.org.uk](mailto:webmaster@sixcountieskpa.org.uk) with photos as .jpg / .png. Articles may be edited for length.

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# Living well with Transplant Online Sessions

## Support and information from the Churchill Hospital Transplant Department

The Churchill Hospital Transplant Department is running excellent online sessions to provide information about transplant and Covid-19 evidence so far and helping patients manage their anxieties around lockdown and living in these difficult times.

### **Living well with Transplant Event 1 (18th February 2021)**

This informative event was chaired by Jenny Fox (lead transplant nurse specialist) with members of the Churchill team participating. Phil Mason (Consultant Nephrologist) started off by telling us that Oxford was one of only 3 of 23 Kidney units open for transplantation during the first wave of Covid. He reported that Oxford did more kidney transplants than they would normally do, for example 18 transplants in April 2020 compared to 13 in April 2019.

Of 30,000 transplant recipients, about 10% have tested positive for Covid. Examining the morbidity rates for Transplant patients, they were low and more or less the same as non-transplant patients. 40% of transplant patients have underlying health conditions such as diabetes, and are elderly and overweight and these risk factors mirror non-transplant patients. Excess deaths were not very great.

Phil discussed the improved treatments for Covid pioneered by the Recovery Trials in Oxford. Dexamethasone (steroids used to treat inflammatory conditions) cuts the death rate by up to 30%. Tocilizumab (another inflammatory disease drug) reduces the death rate by up to 10%.

Phil then looked at the efficacy of the vaccines which are less effective in immunosuppressed patients. This is not surprising as the drugs are to suppress the immune system in order to suppress rejection. Trials are being done in Oxford and there will be more information later on in the year over how long the vaccines last and how much immunity patients get.

He said that the Pfizer vaccine has about 94% and the AstraZeneca vaccine has about 70% efficacy. Both are highly effective in reducing Covid-19 infections. The AZ vaccine did not have much data for the over 65s but in all the trials they responded just as well and were similar to the younger groups. They are more or less equivalent with the additional storage problems of Pfizer having to be kept in a special freezer at -70 degrees C. and dissolved carefully or it can be ruined. If you do get Covid with the AstraZeneca vaccine it will probably be mild and asymptomatic and you won't have to be hospitalized with severe disease. There are additional risks with pre-morbid conditions such as diabetes, obesity and old age. The vaccines take about 3 weeks to work after the first and second doses so you need to be socially distancing.

There was a question about if we were safe after 2 vaccinations. The answer was that we are only 100% safe when everyone no longer has Covid. The vaccines don't guarantee you won't die. There are risk factors such as diabetes, obesity and old age. One can still harbour the disease and pass Covid onto others. It is therefore important to follow the rules and take sensible precautions. We are responsible for our own risks and making sensible decisions.

Then Allie Thornley (Matron and Clinical Lead, Renal Medicine) examined how they are keeping patients and staff safe. They have stopped face to face appointments where possible and are using telemed and phone call appointments. GPs can do blood tests before appointment.

She said that if you need to come into the Churchill there is reduced seating in the waiting areas. Masks are compulsory. PPE and gloves are used by the staff and there are routine Covid swab tests every 2 weeks and lateral flow tests at home. Clinicians will run through medication and message the pharmacy team who will then use Telemed systems to speak to patients and order drugs. Patients must make sure they have 2 weeks supply before their appointment. At all times, safety is paramount.

Louise Hankinson (Psychologist) gave us some good strategies for reducing anxiety and uncertainty. It is normal to feel anxious in this situation and the Covid threat leads to a “fight and flight” response in our bodies. She suggested some ways of trying to reduce these feelings. One of these was focusing on the good things in your life that bring you joy such as nature, your hobbies, your work and relationships. This links in with practicing gratitude that helps you connect with the moments of joy and pleasure in our lives. She said that it was vital to have alternative ways of keeping in touch with family and friends such as the telephone and internet. Louise also mentioned self-compassion as an important strategy to adopt. Treating ourselves with kindness and compassion as we would a friend can lead to mental well being. She mentioned a 3 minute self compassion YouTube video which I have found very useful.

Mindfulness is another useful technique mentioned by Louise where we concentrate on the present with the mind and body being in the same place at the same time. For example using all our senses when we are doing our everyday activities such as making a cup of tea, eating or walking. Mindful breathing can help us return to our bodies and unhook us from our worries and fears. By having full attention in what we are doing with our mind means that we are not thinking about our worries and concerns. Staying away from the news and social media for news can reduce your worry. Staying physically and mentally active is also vital for our well being.

### **Living well with Transplant Event - coming out of lockdown 25th March 2021**

This very useful and supportive session was run by Louise Hankinson (Psychologist) and the nurses and chaired again by Jenny Fox (lead transplant nurse specialist). Again it was reiterated that anxiety and fear were inevitable in such an uncertain situation and Louise suggested to plan ahead and make small steps as we come out of shielding.

We went into breakout rooms with a nurse or psychologist facilitating the group and discussed our situation at the moment and our fears of ending shielding and how we would deal with this. It was fascinating hearing what sacrifices many of my fellow patients had had to make in the lockdown and how differently people had dealt with the Pandemic. Some people were very fastidious and left deliveries and post outside for 48 hours. They wiped down all their shopping and left it in the fridge in a separate bag. Others just threw their shopping into the fridge as normal. It was interesting to see the different attitudes to risk that each of us had as we come out of lockdown.

When we came back together again the group leaders summarized their discussions. Some people were concerned about going back to work. It was suggested that each person should talk to the manager with their concerns and get a Covid risk assessment if they couldn't work from home. Others felt that their lives would not change much as they felt that the risks were still high for them particularly if they had underlying medical conditions as well as their transplant. A lot of people were going to take small steps as suggested and gradually come out of shielding such as going to the supermarket early or late when there was minimal social contact.

Louise Hankinson discussed some strategies to help us. Practising healthy exercise is vital for our wellbeing. She said it was important to focus on the present and what is in our control and not on worries outside our control. Louise also said that having a sense of purpose is also important and to remind yourself who and what is important in your life based on your core values e.g. kindness, respect and compassion. She also reiterated the importance of treating yourself kindly and compassionately. Mindfulness and breathing exercises are also important.

She gave us some useful websites to look at:

1. FACE COVID  
How to Respond Effectively To The Corona Crisis - YouTube
2. [www.psychologytools.com/assets/covid-19/guide](http://www.psychologytools.com/assets/covid-19/guide)  
to living with worry and anxiety amidst global uncertainty.

If any transplant patients would like to join in, there is another session:

6th May, 17:00 – 18:00 . The link is:

<https://www.eventbrite.co.uk/e/living-well-with-transplant-6-may-tickets-146584840203>

They will be on sale (free) from 19th April.

<https://www.facebook.com/groups/610380453068890/>

Anne Ollivant (Oxford Branch Secretary)

## Captain Tom 100

Be part of #CaptainTom100 to celebrate the life and legacy of Captain Sir Tom Moore.

Help raise funds while celebrating Captain Tom's generosity of spirit, the hope and joy he brought to millions, and his sense of fun.



To celebrate his birthday on 30th April, think up a challenge based on the number 100: walk 100 steps, run 100 metres, bake 100 cakes, plant 100 seeds, read 100 poems, swim 100 lengths, anything you choose.

Use your challenge to fundraise for SCKPA, the Captain Tom Foundation or any charity of your choice. Share your 100 on social media, using #CaptainTom100.

More information can be found at [captaintom100.com](http://captaintom100.com).



# IRRITATE

## ImpRoving the Reporting of ITch using AcceleromeTErs in kidney patients

### Do you suffer from itchy skin?



One in three people with kidney disease are bothered by itchy skin, but many do not discuss this with their care team. Itchy skin can lead to sleeping problems. Researchers and students from the University of Manchester are looking into this problem. They want to know if wearable devices (or 'accelerometers'; see picture) can help with assessing sleeping problems in people with kidney disease who suffer from itch.

The research involves wearing an accelerometer on your non-dominant wrist for seven nights to record your movement, filling in a daily sleep and itch diary, and completing an online questionnaire. Once you have completed your data collection period, you will receive a shopping voucher to thank you for your contribution.

### We are looking for people with kidney disease who:

- Are 18 years or older
- Are under the care of a kidney doctor
- Are currently bothered by moderate to severe itching
- Have their own email address

### You can **NOT** participate if you:

- Have been diagnosed with a sleep disorder, skin condition, Parkinson's disease or restless legs.
- Have taken sleep medication or other drugs with a sedative effect in the past four weeks

If you are interested in taking part, please contact the research team by emailing or calling:  
Dr Sabine van der Veer ([sabine.vanderveer@manchester.ac.uk](mailto:sabine.vanderveer@manchester.ac.uk), phone: 0161 3067767)

There is more information about the study at: [https://www.herc.ac.uk/research\\_project/irit-a/](https://www.herc.ac.uk/research_project/irit-a/)

### Accelerometers

Wrist-worn activity trackers, or accelerometers, can accurately detect sleep problems and nocturnal scratching, which are indications of being itchy. In this project we aim to explore the potential of accelerometers to assess sleep disturbance and scratching in people with chronic kidney disease who suffer from itch.

### Hopes for the future

Once we know how we could use accelerometers to assess how badly people with kidney disease are itching and how it disturbs their sleep, we hope it will be easier for kidney patients and their doctors to recognise itch as a problem, and help them decide how to treat it.

## From our readers

### Travel to Europe after Brexit

The ease with which we have holidayed, worked and lived abroad in the European Union is over. Now we have left the EU and are a 3rd country, the UK Government has chosen a course that brings a tangle of rules and regulations for travellers. People need to plan ahead now and know what rules have changed.

This has been further complicated by COVID, border restrictions and the latest lockdown where only essential travel is allowed. Holidays have been banned and a succession of government ministers have warned us that it is too early to book our holidays abroad. Exactly when we will be allowed to travel to Europe is unknown with the 3rd wave there and threats of new variants coming in. We mustn't give up hope yet and as Europe catches up on their vaccination programme we hope to be able to travel later on this year.

#### How long can I go for?

You will be able to stay for up to 90 days in any 180-day period. Ireland is not affected. The rules for Bulgaria, Croatia, Cyprus and Romania are different and you won't use up your 90-day allowance.

#### Is my Passport still valid?

Your passport will be valid as long as:

- It is less than 10 years old
- Has 6 months left before it runs out

Travel to the Republic of Ireland will stay the same. It is part of the common travel area that existed before we became a member of the EU. If you are unsure you can use the Government passport checker.

If you need a new passport, which will be dark Blue, you should apply in plenty of time.

From 2022, UK nationals will have to pay for a £5 visa-waiver scheme in order to visit many European countries and fill in an ETIAS form (European Travel Information and Authorization System).

#### Will Border Controls be different?

For a start you will no longer be able to use the EU-fast track lanes. You may also have to get your passport stamped and show a return ticket. You could also be asked to show that you have enough money for your stay.

#### What about healthcare?

The good news is that UK travellers will continue to receive state-provided necessary healthcare including dialysis and chemotherapy through an EHIC card (European Health Insurance Card) and when that runs out, through a GHIC card (Global Health Insurance Card). It covers pre-existing medical conditions, emergency treatment and routine maternity care. As before it allows you to be treated in the same way as a resident of the country you are in either for free or at a reduced cost. Not all state healthcare is free and you may have to pay for services you would get free on the NHS or a percentage of the state-provided treatment.

The Government advises travellers to take out Travel insurance with medical cover. It is not clear which other countries the GHIC will cover in the future but Australia and New Zealand are likely to be included as the UK already has a reciprocal healthcare arrangement with them. You can apply on the NHS website. If you are visiting Norway, Iceland, Liechtenstein or Switzerland these cards are not valid.

For kidney dialysis as before, you will need to pre-arrange some treatments with the relevant healthcare providers in the country you are visiting. Make sure you are not booked in with a private healthcare provider and your sessions will be covered with your EHIC or GHIC card. A payment in advance can be arranged and you should not have to pay up front for treatment yourself. The NKF have very useful information on their website including "Travel Tips: A Guide for Kidney Patients". If you don't want the hassle of organizing your dialysis in Europe, for a flat fee of £80 Freedom- The Dialysis Holiday Specialists can do all the arranging for you.

### **Can I drive in EU countries?**

If you are driving your own car, you'll need to take a green card (insurance certificate) to show that you're insured in the EU. You need to contact your insurance company 6 weeks before you travel to get one. You will also need your driving licence and vehicle log book. Check if it is still valid. If you only have a paper copy of your driving licence, you may need an international driving permit which is available at most post offices. You can check if you need an IDP on the Government website. You will need a GB sticker and you might have to take other things like a reflective jacket or a warning triangle.

### **Can I still travel with my pets?**

Pet passports are no longer valid and you will need to get an animal health certificate (AHC). This also applies to Northern Ireland. AHC's are issued by a vet, valid for 4 months and must be obtained no more than 10 days before you travel and every time you travel to Europe.

Your pet must be microchipped and have a rabies vaccination at least a month before travelling. If that doesn't put you off taking your pet, I don't know what will!

### **Will I face mobile phone roaming charges?**

The guarantee of free roaming throughout the EU has ended. Individual mobile providers could introduce roaming surcharges again. The UK's 4 main networks, EE, Three, Vodafone and O2 promised not to introduce charges. A new UK law means travellers can't now incur mobile charges of more than £45 a month.

### **Can I buy Duty Free?**

Gone are the days when one could bring in as much as you liked from Europe and the "Booze cruises" to France. Now there is a duty free allocation both ways with limits on tobacco and alcohol. There will no longer be tax-free airport sales of goods like electronics and clothing. Actually with the duty free allowances you can bring in both ways it is quite generous - 4 litres of Spirits or 9 litres of sparkling wine, 18 litres of wine (24 bottles) and 42 litres of beer. You could still have quite a good party with this amount!

Don't be put off travelling to Europe but make sure you plan ahead. It will be worth it!

Anne Ollivant

## A day in the life of a Head Teacher

It's 6am so I roll out of bed and stagger into the shower. Complete the morning routine which has to include a cup of tea and a "little sit down" and then drive 20 miles to school.

I arrive by 7.30am, check with the Site Manager that there have been no overnight disasters. Check with the Catering Manager that she has everything she needs. Make another cup of tea.

I log on to check emails – have to replace the batteries in my remote mouse and wonder how we've got from the first emails about 25 years ago to the situation where there are what seem like hundreds each day and most of the senders seem to expect immediate replies.

Deputy Head arrives and deals with any timetable changes for the day if there are staff absences. The Senior Leadership Team arrive and we pool information on pupils and complete the daily briefing notes for staff. Note that one pupil has been hospitalised and request that his Head of Year keeps in regular contact with the parent to offer any support which might be needed.

Leave my office to be "seen" and greet pupils as they begin arriving. It is my turn to lead the school assembly. As it's Friday, that means I can devote most of the time to our weekly celebration of achievements. The Food Technology Dept have mounted a wonderful display of pupils' posters on the five food groups so I ask the assembled mass if anyone can tell me what the five food groups are. Hands go up and I pick a young man. "J....., what are they?"

"Well Miss, you'd say they're Mars, Twix, Galaxy..." By this time the whole school is laughing as my running jokes about chocolate are legend. At least once a lunchtime, one of them will tell me I must give up chocolate, to which I reply that I could, but I am not a quitter. I also try to persuade them that, if chocolate comes from cocoa beans, that must mean it's a vegetable so I can eat five bars a day. I am reassured by their good sense when they insist that, no, I can't eat five bars a day.

I return to my office to be greeted by the Site Manager and a staff member who has some experience of mushrooming. They have spotted mushrooms or toadstools around the site and suspect that some may be poisonous. We need advice. Just as I come to this conclusion, the school nurse rushes up to say that a non-verbal autistic pupil who also has pica (he will try to eat anything) has grabbed a mushroom and put it in his mouth. They cannot definitively say that he has not swallowed any of the mushroom so the remains and similar samples are put in a plastic bag, the pupil and two staff members are sent off to hospital, his mother is phoned and will meet them there. Staff are warned about the mushrooms, that they must escort classes moving between buildings and morning break will have to be taken indoors.

Now we need information about these mushrooms/toadstools. I am not looking forward to having to close the school because of an invasion by unidentified fungi so I phone the local authority Health and Safety Dept, explain the situation and say, "I don't expect you to know the answer personally, but could you tell me who to contact to get them identified." The response is a little worrying, "Ooh, we've never been asked that before..." So, I phone Environmental Health and get a response, "Ooh, we've never been asked that before. Perhaps you could Google it."

Eventually, using the ubiquitous internet, I locate the Bucks Fungus Group who undertake to send a member who lives nearby to help. A lovely lady arrives with various weighty tomes and we walk the campus. She waxes lyrical and eventually decides that we had seven different fungi, three of which are poisonous.

This is not good news but she is very practical and informs me that they would only be a problem if they were actually ingested, touching them is not dangerous and that, as they grow overnight, we should organise a “pick” each morning before school through the growing season.

Next on the agenda then is to collect the site staff, equip them with gloves and black bags and send them out to pick all the fungi they can find. Volunteers will come into school early for the next couple of weeks to clear the site before any pupils arrive each day and so I send a memo to the Business Manager to build some overtime payments into the already stretched budget.

My PA has some documents for me to read, letters to sign and the agenda for the upcoming meeting of the Governing Body. The Head Teacher’s termly report has to contain assessment and attendance data so following up with the various staff who contribute is delegated to her.

The parent of the boy who may have ingested the mushroom rings to let us know that he is fine, the hospital was very pleased by our prompt action and the fact that we sent in the samples. I have just ended that call when another parent makes contact. As she is sometimes difficult to deal with, I do feel that it is my responsibility to take the call and not have her passed to the Head of Year – when am I going to write that termly report for the Governors? I spend five minutes trying to persuade this very vocal parent that our new healthy eating menus are entirely appropriate, that pupils only eat five meals a week in school and that teenagers do not, in fact, “need” burgers, chips, chicken nuggets and turkey twizzlers but they can eat these outside school if they so wish. Then the Eureka moment occurs: “Just a moment, Mrs B-W. Why are we having this conversation? Your daughter N....., brings a packed lunch each day!”

You really couldn’t make some of it up, could you?

The Business Manager comes to join me and we review the budget so far. In business, people are used to the fact that the calendar and business years have different starting points but neither of those two points coincide with the start a school academic year. This means that in January I am negotiating with the Local Authority on a budget allocation which will apply from April but which speculates how many pupils will be in school in September. These negotiations need to be concluded in a timely manner as the projected pupil numbers dictate how many staff we appoint so that we can deliver a broad and balanced secondary curriculum. Our Business Manager is a whizz with Excel spreadsheets and always produces something which we can interrogate with ease and which will allow the Governors to have an informed debate when next they meet.

The erosion of interest rates over the years has made a dramatic difference. At one time, the money placed on deposit would generate sufficient cash to cover the electricity bills but now it won’t even cover the cost of refreshments for those termly Governors’ meetings. We have to live within our budget and that might mean difficult decisions in the future if we don’t keep spending under tight control. We have already committed to increasing the number of laptops available, there are other unavoidable premises costs and we have to account for inflationary pressures, rising staffing, National Insurance and employer pension contribution costs.

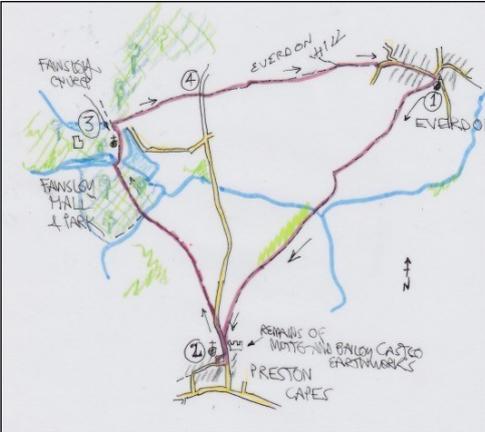
We are joined by the Site Manager, who informs us that the tree survey is about to take place and some branches of the oak trees on site need attention. And no, no matter how willing he is, I cannot allow him to simply remove them as these particular trees are subject to Tree Preservation Orders, he doesn’t have a chain saw licence and we have to replace our scaffolding tower to meet current Health and Safety regulations. He looks at me and I fix him with a glare which makes it clear that I am not arguing, I am simply explaining why I am right!

By now it’s 6.30pm so I decide to go home and tackle that report for Governors as an antidote to boring TV.

**Ed:** thanks to our Head Teacher (who will remain nameless!) for her insight into daily life.

## Walks across six counties: Northamptonshire

### A walk through Northamptonshire: Fawsley Hall & Preston Capes



This issue's walk is in the Association's sixth county: Northamptonshire, well out of Midsomer Country but one of my favourite counties for walking. This triangular and seasonally snowy walk starts in the village of Everdon, heads across rolling countryside to Preston Capes before heading north to Fawsley, its church isolated in parkland, then back across Everdon Hill to the start. Some of the route is on the Knightley Way, named after the Fawsley Hall family who expelled the villagers, enclosed the medieval open fields hereabouts and converted them to more profitable sheep pasture.

Starting in Everdon (1), leave on a path between the church and village hall. Continue broadly south-west, eventually descending to cross a footbridge over a stream. Now walk beside a long narrow wood, Kingbrook Spinney. Beyond bear half left uphill to the corner of a large field. Here you join the lane into Preston Capes village, passing the tree clad mound of a Norman motte-and-bailey castle, and then go right to the parish church (2).

Retrace your steps along the lane that you followed into the village. At a footpath sign on your left where the lane begins to bear right go half right through sheep pasture, now following the Knightley Way. Cross two arable fields before entering Fawsley Park. Descend through parkland to cross between two lakes. On your left is Fawsley Hall, now a hotel, the Knightleys having long gone. Head for the church (3) and beyond descend to join the hotel drive. Follow it as it loops round woodland until just before a cattle grid going left into a field. Now



heading east, over the crest, head for a field gate to the left of an oak tree, then continue ahead and descend to a lane (4). Across this continue ahead, passing to the right of Westcombe Farm. After several fields, eventually you reach a lane which you follow back into Eversdon.

Distance 6 Miles (9.7 Kms) Recommended Map: OS Explorer Sheet 206  
Going: : Rolling Northamptonshire countryside, three fine medieval churches.

**Ed:** our thanks to Martin Andrew for the sixth walk in this series.

His book '*Roaming Midsomer*' by Chris Behan and Martin Andrew, published by The History press, covers Midsomer walks in Oxfordshire and Buckinghamshire.

## Kidney friendly recipes

### Spare Ribs in Yoghurt Sauce for 8

- ◆ 250g pork spare ribs (8 medium-sized)
- ◆ 1 tbs soft brown sugar
- ◆ 2 tbs vinegar
- ◆ 150g low fat natural yoghurt
- ◆ 6 cloves

### Method

1. Brown the ribs under the grill for about 5 mins
2. Place in an ovenproof dish, sprinkle over the sugar, vinegar and cloves
3. Spread the yoghurt over the ribs and roast in a very low oven (140C Gas Mark 1) for about 2 hours
4. Serve with boiled rice and vegetables or a salad of your choice

### Roast Chicken with Fennel for 4

- ◆ 300g fennel, thinly sliced
- ◆ 12 shallots quartered
- ◆ 1 lemon sliced into half moons
- ◆ 6 cloves garlic, crushed
- ◆ A few sprigs of thyme
- ◆ 4 chicken breasts with skin on
- ◆ Olive oil
- ◆ 4 heaped tbs mayonnaise
- ◆ 2 heaped tbs mustard
- ◆ 2 tsp honey

### Method

1. Preheat oven to 200C, (fan 180C), Gas Mark 6
2. Place fennel, shallots, lemon, garlic and thyme in a large roasting tin with chicken breasts on top
3. Season with freshly ground pepper and drizzle generously with olive oil
4. Mix well to ensure the vegetables and chicken are evenly coated with oil. Transfer to the oven and roast for 30 mins
5. For the sauce, mix together the mayonnaise, mustard and honey.
6. When the chicken is cooked, rest for 5 mins out of the oven, then serve hot with the sauce

### Fruit Pudding for 4

- ◆ 450g mixed tinned fruit (raspberries, blueberries, blackberries)
- ◆ 25g sugar
- ◆ 300 ml water
- ◆ 4-6 slices bread, 2 days old with crusts removed



### Method

1. Drain tinned fruit and place in a saucepan. Add sugar and water and cook for 5 mins
2. Place slices of bread around the edge of a pudding bowl, covering the sides
3. Spoon half the fruit into the bread-lined bowl and place a layer of bread on top
4. Spoon in the rest of the fruit and finish with a second layer of bread on the top
5. Place a plate with a small weight on top of the bowl and leave in the fridge overnight
6. Turn out and serve with cream or yoghurt

Recipe from NKF's Food with Thought booklet

## From the archives: Autumn 2003

### The View From Four Foot One and Three Quarters.

#### Tea with my MP

You may remember that last time I mentioned my MP was coming to tea, and so he did. But what do you offer a man used to drinking mint tea with a real mint leaf served in a proper china cup (with matching saucer) by a flunky in a crisp white jacket? I searched my wardrobe, no white jacket; no jackets at all to be honest.

Next the china check: all our mugs are out as either chipped, have unsuitable drawings or slogans or are so obviously freebies as to be embarrassing. (My wife being a District Nurse I'll let you guess the kind of products our crockery recommends, but just think bladder problems and you won't be far wrong.) I finally locate two white china cups and saucers (survivors of our wedding china) hidden in the dresser, drag them out and wash them.

Now to buy supplies. Too far to get to Harrods, but Somerfield do a fine line in teabags so get one box of 'English Breakfast' and another of 'Earl Grey'. At least the tea will be fresh. Then off to the biccie aisle to purchase a packet of 'McVities Home Wheat', the most dull, conservative (with a small 'c') biscuits I can think of. (One doesn't want to offer anything too revolutionary to a member of Her Majesty's Loyal Opposition, so a product as new-fangled as a 'Jaffa Cake' is clearly out of the question.)

The day of the visit arrives, the teacups and saucers are washed (again), the tea and biscuits put on standby, the kettle filled and already boiled once (to save time) and I'm ready for David Cameron MP for Witney and West Oxon.

He arrives and we spend about an hour chatting . He learns a bit more about home dialysis and I have a moan about the high costs of being disabled . We agree that the NHS works quite well for the chronically sick but still suffers problems delivering hips, knees and other corrective surgery in a timely manner. We also agree that Social Services appears to be suffering from its own chronic disease and is not good in Oxfordshire. Too soon David is off to his next appointment.

How did the refreshments go, I hear you ask? Not that well. David had been to an Old Folks Home before he met me, so was suffering a major tea and biccie overload.

He just sipped a glass of tap water!

Nick Elliot

**Ed:** Nick also wrote a series of articles for VIVA! on what life is like when on dialysis and then later when confined to a wheelchair.

- "Nick Elliot's view from four foot and and three quarters" discussing disability and the problems with visiting theme parks (Winter 2002)
- "Dinner at our House" outlining the difficulties of getting funding to adapt one's property for wheelchair access (Spring 2003)
- "Now and Then" charting thirty years progress of being on home haemodialysis (Summer 2003)
- "Tea with my MP" (Autumn 2003)

## Conundrum corner

### How well do you know your UK Hit singles?

The answer to each is a hit single by The Beatles, ABBA, Elton John or Take That  
Name the song title and the artist

1	Pressing the doorbell twice	11	Low value coin street
2	Firework male	12	This can be done in sixty seconds
3	Two days before tomorrow	13	Five people getting married?
4	1 x £5, 1 x £10, 1 x 50p	14	Everlasting fruit picking
5	Bohemian Rhapsody on Strictly	15	Retreat
6	People on trains	16	Note-worthy gratitude
7	Put your foot on a mince pie	17	If it's not me then it must be you
8	Alive and round	18	Just leave it alone
9	Global leadership	19	Single player card game
10	Permanently etch into your memory	20	Jaundiced diver

From the Happy Puzzle Company at [www.happypuzzle.co.uk](http://www.happypuzzle.co.uk)

### Word Search

Find the 16 British birds hidden either across, backwards, diagonally or down

R	T	R	M	L	G	O	I	N	H	T	T	D	G
T	I	G	A	L	A	J	A	C	K	D	A	W	R
I	T	R	G	N	T	A	T	T	S	C	G	R	E
T	E	E	P	I	G	P	I	I	P	A	B	G	A
D	U	E	I	G	O	I	R	A	A	A	L	G	T
E	L	N	E	N	T	E	C	R	R	K	A	O	T
L	B	F	T	I	O	D	R	N	R	O	C	L	I
I	P	I	P	L	A	W	O	I	O	O	K	D	T
A	L	N	I	R	I	A	W	B	W	R	B	F	L
T	O	C	G	A	D	G	N	O	R	D	I	I	U
G	E	H	E	T	T	T	L	R	T	R	R	N	G
N	S	D	O	S	L	A	G	I	A	N	D	C	O
O	A	N	N	N	G	I	E	I	R	E	T	H	L
L	I	I	G	O	H	L	H	S	U	R	H	T	B

Blackbird
Blue tit
Crow
Goldfinch
Great tit
Greenfinch
Jackdaw
Long tailed tit
Magpie
Pied wagtail
Pigeon
Robin
Rook
Sparrow
Starling
Thrush

## Sudoku

	5	2	9			7		8
		7	2	6		4	9	
							5	
9				7				
	2	5				1	4	
				2				3
	6							
	9	3		4	6	5		
2		1			9	3	6	

Sudoku involves a grid of 81 squares divided into nine blocks, each containing nine squares. Each of the nine blocks has to contain all the numbers 1-9 within its squares.

Each number can appear only once in a row, column or box. Also each vertical nine-square column or horizontal nine-square line across must contain the numbers 1-9, without repetition or omission.

Every puzzle has just one correct solution.

## Answers to February's Conundrum

### Abbreviations & Acronyms

1	<b>ASAP</b> as soon as possible	15	<b>BACS</b> bankers automated clearing system
2	<b>NB</b> nota bene	16	<b>MRCS</b> member of the Royal College of Surgeons
3	<b>RNLI</b> Royal National Lifeboat Institution	17	<b>RNA</b> ribonucleic acid
4	<b>AIDS</b> acquired immune deficiency syndrome	18	<b>IQ</b> intelligence quotient
5	<b>SUV</b> sports utility vehicle	19	<b>FYI</b> for your information
6	<b>AKA</b> also known as	20	<b>SATs</b> standard attainment tests
7	<b>GCHQ</b> Government Communications Headquarters	21	<b>AWOL</b> absence without official leave
8	<b>HMRC</b> Her Majesty's Revenue & Customs	22	<b>SOCO</b> scenes of crime officer
9	<b>NOYB</b> none of your business	23	<b>SARS</b> severe acute respiratory syndrome
10	<b>RSVP</b> répondez s'il vous plait	24	<b>ZIP</b> code- zone improvement plan code
11	<b>ADHD</b> attention deficit hyperactivity disorder	25	<b>KISS</b> keep it simple stupid
12	<b>IBM</b> International Business Machines	26	<b>UNESCO</b> United Nations Educational, Scientific and Cultural Organisation
13	<b>SCUBA</b> self-contained underwater breathing apparatus	27	<b>STD</b> subscriber trunk dialling
14	<b>QUANGO</b> quasi-autonomous non-governmental organisation	28	<b>OPEC</b> Organisation of the Petroleum Exporting Countries

## Photo Gallery: theme 'April/May'

Our gallery of photographs, sent in by readers, with the monthly theme.



Daffodils at Cliveden By Martin Wood



Peonies by Pam Pitcher

Email your favourite photo with a June theme to [webmaster@sixcountieskpa.org.uk](mailto:webmaster@sixcountieskpa.org.uk)

Include a title and the sender's name (pseudonyms acceptable).

Closing date is 20th May 2021.

**Photo Gallery: theme 'April/May'**



Great tit feeding young by John Heald



Cliveden in the Spring by Beverly Wood

Email your favourite photo with a June theme to [webmaster@sixcountieskpa.org.uk](mailto:webmaster@sixcountieskpa.org.uk)  
Include a title and the sender's name (pseudonyms acceptable).  
Closing date is 20th May 2021.

## And finally

**Sanborn's Kidney Remedy** from VIVA! Winter 2002



**Ed:** price was 75 cents, I dread to think what was being sold!

**Muriel's recipe for a sherry trifle** with poem by Ian Mathie (VIVA! Late Summer 2009)

Our Muriel makes Trifle  
That she soaks with lots of booze,  
Then loads with fruit and custard,  
It's sure to make you snooze;  
It's rich with cream and cherries,  
Toasted almonds on the top,  
After tasting the first spoonful  
It's very hard to stop.  
She's promised us the recipe,  
Here in VIVA! 't will appear,  
So try it out and make some,  
Then rave about it here!

"I put some trifle sponges into a bowl and add sherry diluted with fruit juice (dialysis patients use squash). Then add tinned fruit, followed by a pint of custard. When it has set, add whipped cream. If you are not on dialysis you could add nuts or grated chocolate. Enjoy!"