



# The HOPE Foundation for Research on Ageing

*Preparing New Zealand for an Ageing Future*



**Professor David Richmond,  
Inaugural Professor of Geriatric  
Medicine,  
The University Of Auckland.  
Founder & Chair of the Foundation**

Anniversaries encourage reflection. It's good to look back and ponder over where you have come from and how. They offer a chance for celebration of

the here and now. And they're also a stimulus for renewing vision; trying to get the future a little more into focus and thinking about new directions.

2014 is the 20th anniversary year of the HOPE Foundation. I'm not going to try to recap our history. Many of you long-time associates know most of the story anyway. What I will highlight is that we are where we are today only because of the support of many wonderful people. I include funding organisations as well as individuals of goodwill, because all funding decisions private or commercial are made by people. There is a certain risk in funding a new organisation that not everyone is willing to take.

We have achievements worthy of celebration. As of 2014 we have supported 25 summer students at the University of Auckland and 36 postgraduate research students at Auckland, Waikato, Massey Victoria and Otago universities. Many of the latter have been supported for up to three

years, hence the number of scholarships actually awarded is much higher than these figures indicate. In addition we have funded some contract research independent of the universities, and organised approximately one community seminar or workshop each year

Often wondered how all this research data actually affects the real world? Well, it's all reported: in scientific journals, in scientific meetings, sometimes in the media. As various investigators share their results, important issues become clearer until a "breakthrough" as the media love to call it occurs, and a new approach to some burning issue becomes available.

What of the future? Our alliance with the Selwyn Foundation has given us a great platform from which to plan the future. The Board does have dreams of new initiatives made in partnership with the Selwyn Foundation. Time will tell. We would like to position ourselves as a major force in encouraging research into ageing in N.Z.

As for me, I have decided that 20 years as Board Chair is enough and that it's time for a change. New ideas, new emphases. So this will be my final letter in this capacity. I take the opportunity of extending my deepest thanks to all of you who have supported and encouraged the Foundation over these 20 years and I trust that you will continue to support it. I can report to you that I leave the running of the Foundation in excellent hands. Thank you.



**Carolyn Ward,  
Chair, Friends of the Foundation**

The Friends of The Foundation was launched at Government House in November 2005. Joan-Mary Longcroft QSM was the Inaugural Chair. She stepped down at the end of 2009 to be succeeded by Carolyn Ward. The

members of the 2014 Committee remain the same as last year: Carolyn Ward (Chair), Leonie Lawson, Joan-Mary Longcroft, Marie Quinn and Linda Snell (Minute Secretary). I advised the Board last year that I would like to step down as Chair of the Friends Committee this year, having by then served nearly 5 years. This will take effect from the Annual Meeting in August. As yet nobody has come forward to take over so there will some reorganization later in the year. We will continue as a Committee until August and if anyone

would like to become part of the Committee, please let me know. We would very much appreciate some new members!

We welcome a new Friend of the Foundation:

- Helen Rowe. Helen is a physiotherapist with the Auckland District Health Board.

## **2013 End of Year Function at the Opera Factory – Friday, 20 December**

As previously advised, we again took 30 tickets for this very popular evening, "A Christmas Cracker! opera gala" that we had no trouble selling! All agreed it was a delightful evening.

## **2014 Friends Fund-raising Event – Sunday, 11 May**

On 19 October last year Joan-Mary and I attended the "Preeves Night" at Howick Little Theatre where the five

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## SCHOLARS AND SUMMER STUDENTS CHOSEN FOR 2014

*The cornerstone funding from the Selwyn Foundation plus additional grants from Family Trusts have enabled us to extend our grants to researchers in 2014. Specifically this had meant one extra Summer Student for the University of Auckland and one extra post graduate Scholar for Massey University and the University of Auckland. A brief summary of each research proposal is given below.*



### **Understanding subjective memory complaints**

#### **Assessment and aetiology**

**Bridget Burmester,  
Massey University**

Many facets of memory function decline with age and many adults become concerned about perceived changes in their memory as they grow older. Subjective memory complaints such as trouble remembering someone's name cause

considerable distress for many as they grow older. They result in significant concern and are associated with lower levels of wellbeing and poorer quality of life.

In some cases they have been reported even more distressing than physical health concerns such as heart attacks.

Previous research has shown that such memory losses are associated with impairment in activities of daily living such as using the telephone, taking medication and managing financial affairs.

This research will focus on how to best measure subjective memory complaints and the development of the causes of the distress arising from subjective memory complaints.

## **New Zealand Baby Boomers**

### **Attitudes towards mental health help-seeking and preventative and therapeutic psychological measures**

**Joanna Maree Macfarlane,  
Massey University**

The first 'baby boomers' joined the official ranks of 'elderly' in 2011 and as the rest of this cohort enter this life stage it is expected that New Zealand's mental health system will come under unprecedented strain. Is the mental health system ready for the specific needs of this group of ageing New Zealanders?

This research will explore the attitudes of those born between 1946 and 1964 towards mental health help-seeking

and specifically preventative and therapeutic psychological measures.

It is currently unclear what this cohort's attitudes are to mental health help-seeking and whether health-seeking barriers exist for them.

To date no research has examined attitudinal differences within the cohort so it is envisaged that the findings of this research will help New Zealand's mental health providers target this age group more effectively and ensure that appropriate interventions and care are available for this group.



### **Consequences of a decline in retrograde transport in age-related denervation**

#### **Implications for sarcopenia**

**John Brady,  
University of Otago**

Everyone over 65 will experience progressive muscle loss and consequent frailty, a condition referred to as sarcopenia. The age-related declines in muscle strength and motor

control associated with sarcopenia result in a massive loss in independence due to increased risk of fall injury and loss of mobility such as decreased ability to climb stairs, get out of bed, shopping and household chores. Though the precise cellular changes that lead to sarcopenia are not known one theory links age-related muscle wasting to age-related denervation.

Age related denervation is widely described in elderly muscles and has been shown to contribute to muscle fibre death and atrophy both of which result in an overall loss in lean muscle mass and strength.

Retrograde transport is the process by which nerve cells move important support substances from their periphery (in this case the neuromuscular junction) to the cell body (in this case in the spinal cord).

# Scholarships Awarded for 2014

## Evaluation of a comprehensive mobile technology cardiac rehab intervention

**Leila Anne Pfaeffli,  
University of Auckland**

Coronary heart disease (CHD) remains a leading cause of death in New Zealand and particularly impacts older adults. Once a patient is diagnosed with CHD they are more likely to have recurring cardiac events that require further hospitalisation.

The Text4Heart study evaluates a new method to support older adults with CHD make lifestyle changes with the hope of preventing recurring cardiac events and help

them live healthy lives for longer. Participants in the intervention group of the research will receive a personalized text message programme over 6 months and access to a supporting website.

Messages will contain information and strategies to help participants to stick to their prescribed medication regime, reminders to have a regular check up with their physician, and maintain healthy lifestyle changes including exercise, health eating, managing stress and stopping smoking.



## Functional evidence of Alzheimer's disease in the eye

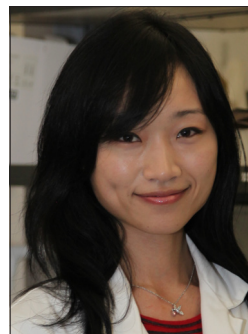
### *Clinical Application*

**Lily Yu-Li Chang,  
University of Auckland**

Alzheimer's disease (AD) is the most common cause of dementia with progressive deterioration of cognitive and bodily function.

This study aims to improve the quality of life of AD sufferers by more effectively diagnosing the disease which is likely to improve treatment outcome and delay progression.

Although there is currently no curative treatment for AD, early diagnosis is still warranted as lifestyle changes, forward planning, and therapy aimed at symptomatic relief will optimise the quality of life of those with AD. Numerous research projects are seeking treatment



for AD and the success of any treatments developed will depend on timely diagnosis of the disease and identifying those at risk of developing the disease.

Because AD diagnosis through an eye examination is simple, cheaper and more accessible than current methods, involving MRI and PET scans, it will reduce costs and make early diagnosis available to all at risk

of AD. The social stigma for AD has reduced significantly, and there are now support groups such as Alzheimer's New Zealand, that provide education and assistance to patients and their families. This research will further increase awareness of AD to the public and hopefully the next step in AD management will expand beyond palliative therapy and take a more active role in slowing or preventing the disease.



## Hypoxic spreading depression in the Substantia Nigra

*A comparison with the Hippocampus and implications for Vascular Parkinson's*

**Rashika Karunasinghe,  
University of Auckland**

This research is focused on a deep brain region named the Substantia Nigra. Compared with the rest of the brain the dopamine producing neurons of this nucleus progressively degenerate during normal ageing. This process accelerates during Parkinson's disease, a disorder characterized by the untimely and relatively selective loss of these neurons, with resulting deficits in patients' mobility. Early results of this research indicate that the dopamine producing neurons of the Substantia Nigra are able to tolerate acute ischemic

insults much better than other groups of neurons. The objective for this year is to understand the molecular mechanisms underlying the protective response that occurs in nigral dopaminergic neurons.

The ultimate goal is that this research will lead to improved treatment strategies for patients with a vascular onset form of Parkinsonism.

## Thanks to Our Sponsors . . .

**The Selwyn Foundation**

The Selwyn Foundation is our cornerstone sponsor and currently funds 80% of our activities.

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# Summer Student Grants 2014

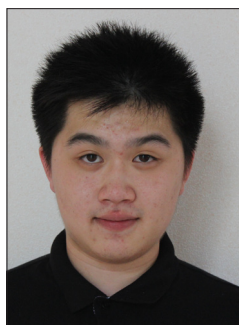


## How can loneliness and social isolation be reduced amongst older people

**Gideon Geldenhuys**

The aim is to synthesise the best available evidence with regards to interventions to address loneliness and social isolation in older people. As people age, experiences of loneliness and social isolation

become more common. It is estimated that 50% of those over age 80 experience loneliness most or all of the time. Research has shown a correlation between loneliness and isolation with poorer health in old age. On the other hand those with strong social ties may experience better health outcomes. This project will look at the many different interventions and how effective these interventions are at addressing loneliness and isolation in older people. This research has particular importance to New Zealanders as it may inform policy and decision makers and will help ensure our aging population experience social connectedness, thus improving health outcomes during old age.



## Aged residential care – Healthcare utilisation study

**Alvan Wang Chi Cheng**

Acute hospital admission of older residents of residential aged care facilities is common, often detrimental to the health of these residents and potentially avoidable.

The Freemasons' Department of Geriatric Medicine has recently completed the first ever randomised controlled

trial of a complex intervention gerontology nurse support and education, benchmarking and multidisciplinary clinical meetings), aiming to reduce such acute admissions. This was a very large study with high uptake, but demonstrated no difference in admission rate between intervention and control arms (i.e. the intervention was apparently ineffective). If this finding is genuine it has enormous implications for health care systems.

The aim of the current project is to examine the possibility that in the above study, residential aged care facilities in the control arm may have modified their admitting behaviour during the course of the study thereby contributing to the false negative results.



## Suicide in older New Zealanders: a review of GP's records

**Kody Thomas Shaw**

The specific aim of the project is to examine the demographic, medical, psychiatric and psychosocial factors associated with suicides in the elderly. This is a retrospective

descriptive study. Information will be obtained from general practitioner's medical records of older people (aged 65+) who committed suicide in the past 5 years in New Zealand. With regards to sample size, approximately 50 people in this age range committed suicide each year over this

5-year period. The Coronial Services, Ministry of Justice, has agreed to forward us the details of the deceased people. With ethics approval, general practitioners will be contacted and asked to provide the relevant records for the 12 months prior to the suicide. In 2010, the group with the highest rate of suicide in the country was males over the age of 85. Despite this worrying pattern, there has only been one previous study into the suicide behaviour of older New Zealanders.

The NZ Suicide Prevention Strategy acknowledges that the risk of suicide in the elderly population is often overlooked. This is of particular concern because elderly persons who attempt suicide usually have a strong intent to die and are more likely to make fatal attempts, choose more lethal means and more often live alone, all of which decrease their chances of being discovered.

### Friends of the Foundation – continued from front page

plays for this year were being showcased. We were excited to see that they're putting on "The Importance of Being Earnest", a favourite Oscar Wilde play. This play, which is a revival to mark HLT's diamond jubilee, overflows with razor-sharp wit, sublime elegance and dizzy romantic comedy.

Our committee decided this was too good an opportunity to miss and we had no trouble in deciding to take the theatre as in past years. HLT have kindly moved the time of one of the Sunday matinees from 2 pm to 6 pm. The date is Sunday 11 May so please put in your diaries now!

NB: We anticipate this will be a very popular evening so let

me know ASAP if you would like to come and I'll add your name to the list. As in the past, tickets will be \$40 which will include refreshments.

### Friends Donation 2014

Donations to the Friends are tax deductible. Friends pay \$25.00 annual gift for an individual or a concession rate of \$40.00 per couple.

It's now time to consider your renewal for 2014. Cheques should be made out to The HOPE Foundation and mailed to PO Box 32082, Devonport, Auckland 0744. If you are not a Friend already, why not join?

Contact Carolyn on (09) 520 0971 for further information.