

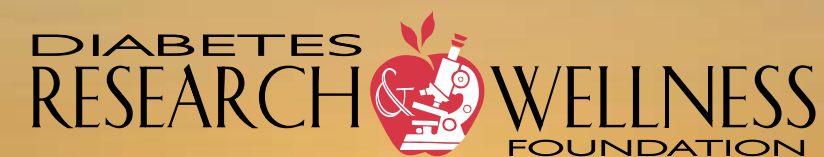


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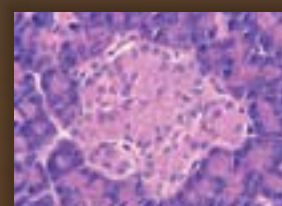
Working to make life better for people with diabetes.

Registered Charity No: 1070607 • Company No: 3496304 • Company Limited by Guarantee



*The sun is rising on the cure...*

2009 ANNUAL REPORT



## An organisation for people who live with diabetes every day

The mission of the Diabetes Research & Wellness Foundation (DRWF) is to help find a cure for diabetes and, until that goal is achieved, to provide the information and support required to improve self-management skills and reduce the risk of the life-threatening complications of this increasingly prevalent and chronic long-term condition.

### In order to accomplish our mission – DRWF:

- PROVIDES funds to researchers whose work offers the best hope and most expedient path to a cure for diabetes;
- PROVIDES funds to researchers whose work has already provided substantial insight into the causes, early detection or treatment of diabetes and its complications;
- ENCOURAGES and facilitates the development of fledgling researchers in the field of diabetes research;
- RAISES awareness to diabetes, its risks, symptoms and complications;
- PROMOTES public education in order to improve understanding and self-management skills with the aim of reducing the risk of potentially life-threatening complications;
- PROVIDES information, services and publications to people with diabetes;
- PROVIDES information, publications and funding to diabetes and other healthcare professionals for the purpose of improving education within the diabetes population and ultimately the quality of care and support that is delivered;
- PROVIDES hope to the many people living with diabetes on a daily basis.

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## A Message from Michael Gretschel Volunteer President



Dear Friend of Diabetes Research,

In 2009, amidst much 'hand-wringing' over worldwide economic fears, DRWF continued to forge ahead and see advances in its research funding commitments. Of course, progress in any of our activities is thanks in no small way, to your generosity and commitment to our cause.

With the ongoing challenges of refining and improving the process of islet isolation, we were pleased to hear at the International Pancreas and Islet Transplant Association Congress in Venice, Italy, that worldwide collaboration between researchers, institutions and corporates, was addressing these issues as a matter of priority.

Indeed, a particularly heartening observation was made at the Congress, which was jointly held with the International Xenotransplant Association. Three years ago, many viewed the possibility of harvesting pathogen-free islets from pigs for human transplant with scepticism, yet this prospect has now gained near universal acknowledgement.

Our commitments to both the DRWF Islet Isolation Facility at Churchill Hospital, Oxford and the Spring Point Project, in partnership with the Schulze Diabetes Institute in Minnesota, are making headway in their respective fields.

In particular, Spring Point Project's pre-clinical trials have shown great long-term success rates and we look forward to FDA approval for human trials.

2009 was an exciting year, no doubt about it! Our hopes and efforts are now firmly focused on pushing these advances even further, to a point where patients are actively recruited into the clinical trial programme in the UK, where donor pancreas are allocated equally to both whole organ transplant and islet cell grafts.

I have been completely engaged with diabetes for 34 years—since my eldest son was diagnosed at two years old. My family has lived on hard work, optimism, faith and commitment to finding a cure for all.

I honestly believe we are on the verge of seeing islet cell transplantation available, economical and successful for the wider diabetes population.

Existing largely on voluntary income and receiving no government funding, we could not have come this far without the generosity and commitment made by our friends, members and supporters.

Words of thanks go out as profusely as humanly possible.

We are all humbled by your support and pledge OUR renewed commitment as we enter our twelfth year of operation in the UK.

My sincere thanks – THANK YOU!

W. Michael Gretschel  
Chairman – Board of Trustees



## A Message from Sarah Bone Chief Executive

The incidence of diabetes has continued to rise rapidly. From 1996 the number of people diagnosed with diabetes has increased from around 1.4 million to more than 2.5 million. It is estimated that by 2025, diabetes will affect more than four million people in the UK alone. The global expectation is that by 2030 more than 430 million will be affected by the condition. Staggering!

Our ultimate goal is to find a cure for diabetes and our research funding has gained ground somewhat in 2009. The DRWF Islet Isolation Facility in Oxford continues to harvest islets for research and transplant at six centres in the UK. We heard at the joint IPITA / IXA conference in Venice how worldwide collaboration is addressing the issues of optimising islet isolation techniques and how our committed 'islet transplanters' in the UK continue to battle to get donor pancreas allocated to islet cell grafts as an equal to whole organ transplant. Our efforts to find a suitable, sustainable supply of islets has also advanced in the form of the Spring Point Project - an effort which has received global recognition in the xenotransplant field. I echo the sentiments of our Chairman, when I say it was a real vote of confidence to see DRWF acknowledged on so many research presentations at the Conference.

In addition to these major programmes, it was wonderful to hear that two previously funded DRWF researchers are achieving so much in the diabetes arena. Dr. Victor Gault (Open Funding 2007) was named recipient of the Rising Star Award by the internationally acclaimed European Association for the Study of Diabetes (EASD) and Dr. Mayowa Osundiji (Studentship 2005) is completing his post doctoral training at the Dana-Farber Cancer Institute at Harvard University, USA. Both scientists acknowledged the funding received by DRWF as helping them to advance their careers.

It is vitally important, that whilst we drive research forward we continue to raise awareness to diabetes through clear messaging; provide quality and relevant advice to individuals and offer support and friendship to those who need us. Everyone should know the difference between Type 1 and Type 2 diabetes and what they can do—where possible—to prevent it, manage it and reduce the risk of complications.

One thing is clear, we will only find a cure for diabetes by working collaboratively. This means that many people, many groups and the efforts of all are required globally, to ensure that we reach our end goal. We could not do so much without the dedication and commitment of our supporters, to our cause. That means YOU!

Thank you for being with us, every step of the way.

## Professor Paul Johnson, Director DRWF Islet Isolation Facility, Oxford

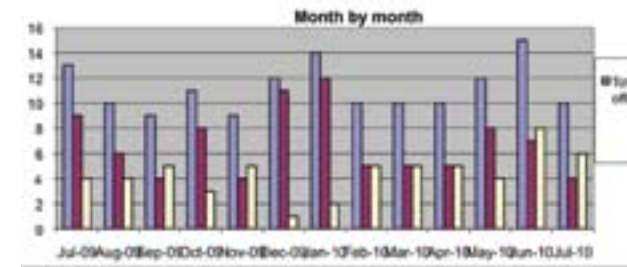


OXFIT

Over the last 12 months, the Oxford Islet Isolation Facility has continued to deliver both a 'state of the art' National clinical service, and a substantial research programme. This report highlights the main achievements of the team during the year.

### Summary of Islet Isolation and Clinical Islet Transplant Activity

The graph below summarises the monthly activity of the Oxford Facility in terms of total numbers of pancreases referred into the Facility each month, total number per month excluded as they were unsuitable for clinical use (2nd bar on the graph for each month), and the total monthly number that were processed for islet isolation (3rd bar).

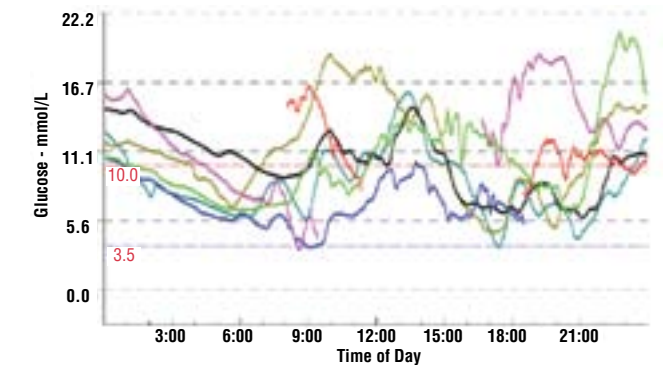


A total of 134 offers were made into the programme, but only 36 were processed for clinical islet isolation as these met the agreed inclusion criteria for the clinical programme and were also deemed suitable following organ retrieval. There is an overall shortage of pancreas organ donation worldwide in comparison to the number of people with Type 1 DM. Compounding this shortage however, is the fact that most countries still have a pancreas allocation system that favours whole organ transplantation. Whilst this was appropriate when islet transplantation remained experimental, the increasing success of islet transplantation over recent years means that the current allocation algorithms need re-evaluating. It could be argued that the success of islet transplantation is all the more impressive taking into account that most teams have had to use suboptimal pancreases for this procedure. The Oxford team has been instrumental in addressing this allocation issue. Of the pancreases that have been processed over the past year, over a third of these have yielded 200,000 Islet Equivalents (a universal measure of islet number) or more. These outcomes are comparable with any of the leading centres in the world.

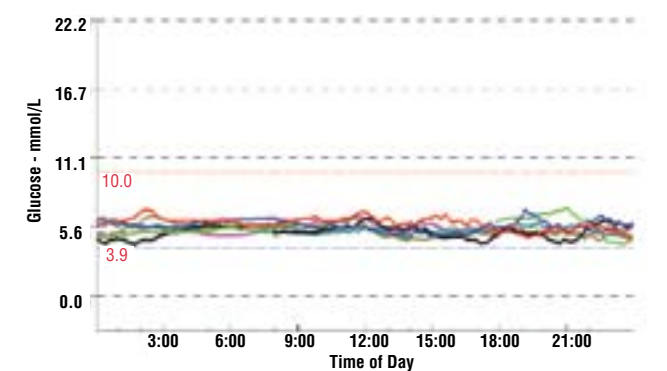
During the year, six clinical islet transplants have been performed with considerable success. two patients have achieved insulin-independence

with a single islet graft, something that confirms the quality of islets isolated in the DRWF Facility in Oxford when a good donor pancreas is received. The graphs A and B demonstrate the dramatic improvement in glucose control achieved following islet transplantation in one of our patients. These findings are typical of many of our islet recipients and confirm the huge potential benefit that this treatment offers.

### A. Pre Transplant:



### B. Post transplant: 3 month Insulin reduction 75%



### Summary of Research Programme

The team has continued to undertake research into several areas of islet biology and islet transplantation. These include: studies of islet development (to investigate alternative sources of islets), studies investigating ways of optimising islet isolation, studies aimed at improving islet transplant outcomes, and a study investigating whether islets replicate following transplantation. We continue to have close

collaborations with Professor Patrik Rorsman, Professor of Islet Physiology, whose team evaluate all our islet preparations in detail. We are also working closely with Professor Steve Gough who has recently established the Translational Diabetes Research Group within the Oxford Centre for Diabetes Endocrinology and Metabolism (OCDEM). We are very actively involved with the UK Islet Transplant Consortium, and Paul Johnson serves as the Chair of the UK Islet Isolation Sub-Group which has both clinical and research remits. We have research collaborations with pharmaceutical companies including Serva and Vitacyte. Team members have had their work published in a variety of journals, and have presented their research findings at a number of key international meetings over the last 12 months, with DRWF clearly acknowledged each time. This included a number of oral and poster presentations at the Congress of the International Pancreas and Islet Transplantation Association that was held in Venice in October 2009.

#### Summary of key achievements of staff members

The team in Oxford continue to be acknowledged for their contributions to the field of islet transplantation. Paul Johnson was recently made President-Elect of the International Pancreas and Islet Transplant Association and has also been awarded a James IV Travelling Fellowship for visiting islet centres around the world. He was awarded an Honorary Fellowship of the American Academy of Paediatrics (AAP) for his islet work, and delivered the prestigious Stephen-Gans Lecture on Islet Transplantation at the AAP in Washington last October.

Neil Walker was awarded a Transplantation Society Travel Award for Young Investigators for his research and was also selected as an 'Innovator in Diabetes' by Diabetes UK. Finally, Stuart Robertson won the Peter-Paul Rickham Prize from the British Association of Paediatric Surgeons for his research on islet development.



### Bernhard Hering, MD

Professor of Surgery; Eunice L. Dwan Diabetes Research Chair; Director, Islet Transplantation; Scientific Director, Diabetes Institute for Immunology and Transplantation; Co-founder of Spring Point

"We have the capacity to cure this devastating disease and help people enjoy a happy and productive life no longer constrained by diabetes and constant fears and worries," says Bernhard Hering, M.D., an internationally recognized diabetes researcher and scientific director of the Schulze Diabetes Institute. "Curing Type 1 diabetes is possible. We only need to declare it possible, engage the brightest minds, be contagiously committed, and break all barriers. This gift is breaking big barriers by boosting resources, raising awareness, and injecting a sense of urgency and responsibility."



## Imagine the Cure for Diabetes

Current diabetes treatments attempt to regulate blood glucose levels via insulin administration. Transplantation of insulin-producing islet cells from the pancreas offer a biological means to normalize blood glucose levels without constant monitoring – a cure.

Islet cell replacement in patients with diabetes promises to cure diabetes in its entirety, eliminating complications and improving quality of life. Today, successful islet cell transplants are performed at more than 35 institutions worldwide. The Schulze Diabetes Institute at the University of Minnesota was the first to achieve consistent diabetes reversal using transplantation of islets from a single donor (so-called marginal-dose islet transplantation). The first patient who received her single-donor transplant at the Schulze Diabetes Institute celebrated her seventh year of insulin independence in October 2008. "Replacing pancreatic islets is the only way to restore normal blood glucose levels and insulin independence," says David Sutherland, MD, PhD,

Head of the University of Minnesota's Division of Transplantation and Director of the Schulze Diabetes Institute, and widely regarded as the world's pioneer of pancreas and islet transplantation.

But the widespread applicability of these islet-replacement therapies suffers from the limited supply of donor tissue. To solve this, researchers considered using islets from another animal – pigs.

Research conducted by Dr. Bernhard Hering, Scientific Director and Director of Islet Transplantation at the Schulze Diabetes Institute, and his colleagues resulted in a landmark achievement on the path to a cure: pig islet transplantation reversed diabetes for more than six

months in diabetic primates, who were no longer dependent on insulin after transplantation. These unprecedented results in an animal model most close to the human situation is regarded proof-of-concept, enabling us to proceed and prepare for clinical studies.

### What is being done now?

To move this research breakthrough towards a clinical applicability, work has continued to refine a safe immunosuppression regime. To accomplish this, Bernhard Hering, M.D., and his group have launched a fast-track project to refine and reduce the immunotherapy needed to prevent rejection of



Announcement of the major pledge by the Richard Schulze Family Foundation, Dick Schulze addressing the audience at the ceremony. In the background Dr. Bernhard Hering from the Schulze Diabetes Institute and Dr. Mary Firpo from the Stem Cell Institute.

transplanted pig islets. Meanwhile, a means is needed to supply the pigs to serve as pancreas donors from whom islets are to be isolated. Donor pigs need to be of high-health 'medical-grade' status to minimize the potential of disease transmission upon transplantation into patients. Raising these 'medical-grade' pigs requires special biosecure (barrier) facilities in which the air is filtered, water is disinfected, specialty feed is irradiated, staff enters and exits via shower in/shower out stations, and don special clothing when in contact with the animals among other things. Spring Point Project has been established as a nonprofit organization to build and operate such biosecure facilities to raise these high-health pigs. Spring Point Project has the mission 'to provide an unlimited source of pig islet cells to accelerate the availability and affordability of islet transplantation to cure diabetes,' and has the task to supply suitable pigs, from which islet tissue is isolated, at the time clinical trials are to commence.

To make this possible business executives and leading scientists have joined forces, capitalizing on their complementary expertise to make the cure a reality. In partnership between the Schulze Diabetes Institute and Spring Point Project, the two initiatives: perfecting the scientific breakthrough and producing high health pigs, proceed on a parallel track. The goal is to have suitable donor pigs available by the time the scientists have refined the immunosuppression to a point that makes it safe for use in patients. 'With Dr. Hering's breakthrough science and Spring Point's relentless pursuit of the supply source, we are

moving from hope to a cure. Every day brings us closer to the time when clinical trials may begin. I don't make this claim lightly. We are also most grateful to the Diabetes Research & Wellness Foundation (DRWF) for their generous donation to the construction and operations of this state-of-the-art animal facility,' said Thomas Cartier, founder and Chairmen of the Board of Spring Point Project.

In December 2008, the Richard M Schulze Family Foundation announced a major \$40 million pledge to support the diabetes research. At this occasion the Institute changed its name from the Diabetes Institute for Immunology and Transplantation to the Schulze Diabetes Institute. This pledge was the second largest in the history of the University, and the second largest in the history of diabetes research in the United States. One of the programs supported is the pig islet transplantation program, with which Spring Point Project is heavily involved, to bring this technology from research into clinical application for diabetes patients!

## Spring Point Project in 2009: Major Accomplishments

Colleagues from around the world continue to visit us with regard to discussions and information exchange about building, populating, and operating biosecure animal facilities. Obviously, the partnership between Spring Point Project and the Schulze Diabetes Institute is unique in the world, and attracts quite some attention and interest!

Spring Point Project up leveled our internal Quality and Regulatory capability with the hire of a highly experienced individual in the Quality field. In addition, we've augmented the staffing of our biosecure facility to ensure sufficient coverage of necessary tasks in event of employee health concerns, i.e. influenza outbreaks in community. Our staff have given presentations at scientific and general meetings and continue to publish their work in peer-reviewed biomedical scientific journals.

In the outlook toward future perspectives, the question of how the islet cell product developed in the partnership between Spring Point Project and the Schulze Diabetes Institute will be scaled up on FDA approval to proceed to large scale

production was addressed. To answer this question, Spring Point Project hosted multi-disciplinary planning sessions with experts from the pertinent but currently disparate disciplines of large scale and 'medical-grade' pig production. The sessions evaluated models in which large scale DPF pig production could be accomplished. Using various approximations, these planning sessions provided Spring Point Project with preliminary plans, timelines, and trigger points for large scale 'medical-grade' production detail planning, development, and execution.

**'Replacing pancreatic islets is the only way to restore normal blood glucose levels and insulin independence.'**

Toward the end of the year, we established a new collaboration with the Minnesota Medical Foundation (MMF). The Minnesota Medical Foundation, founded in 1939, is an independent nonprofit organization which supports the advancement of health-related education, research and service at the University of Minnesota. It is governed by a volunteer board of trustees. Our Founder and President, Tom Cartier, has been invited to become a board member. In 2008, MMF raised more than \$125 million in pledges and future gifts. Under the new collaboration, Spring Point fund-raising will be coordinated by MMF so Spring Point will be better able to focus on the science and research associated with pig islet cells and to prepare for the anticipated expansion of DRWF facilities to handle the expected demand for pig islet cells. This change will provide a more coordinated fund-raising effort in pig islet cell transplantation research at the University of Minnesota. We feel this new relationship with MMF is a logical and a natural extension of our partnership with the Schulze Diabetes Institute and the University of Minnesota.

# Achievements and Performance

**Awareness** — extensive activities were undertaken to raise awareness to diabetes, its risks, symptoms and complications and to raise the profile of the charity and its services during 2009:

- More than 1.9 million mail packs that carry 'calls to action' and information about diabetes and the charity's activities were distributed during the course of 2009
- 5,272 general information packs were distributed to members of the public requesting information about the support services offered by the charity and specific self-management guidance
- More than 34,000 E-News letters were sent to subscribers during the year, containing four key diabetes-related news items and driving traffic to the charity website
- Timely dissemination of latest diabetes-related news releases via the website, E-News blast and Diabetes Wellness Newsletter
- DRWF and professional speakers were asked to facilitate the National Nutrition and Health Conference working with Heart UK to provide the 'Diabetes and Heart Health Symposium'
- DRWF was asked to provide support to Lions International at their regional Diabetes Screening Day in Fleet
- For the second year running, DRWF worked collaboratively with other UK diabetes organisations to promote World Diabetes Day (WDD) on 14th November under the banner of the IDF Unite for Diabetes Campaign and the Global Monument Challenge, achieving significant publicity and awareness across the UK and beyond

## IMPACT:

- More than 190,000 positive responses were received on receipt of the charity mailings – an indication that at least 10% of people mailed

had been exposed to the awareness raising and educational materials included within the package. It's likely that many more recipients also opened the pack and read the content, but chose not to respond directly to DRWF at that time

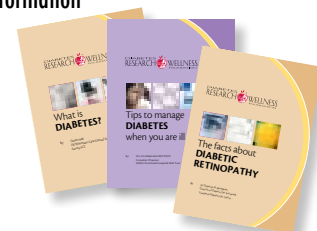
- Traffic to the charity website had increased by around 31% at the end of 2009 indicating that the monthly E-News blast was indeed driving the visitors to the site, further exposing these individuals to available diabetes support resources
- 892 new diabetes and related healthcare professionals were added to the in-house GP and Clinic database having requested to receive complimentary copies of the Diabetes Wellness News and free patient information resources – an increase of around 33% on 2008
- Providing workshops for diabetes and related healthcare professionals ensures that those providing care to people with diabetes continue to improve and refresh their own knowledge and understanding of the condition and are able to provide relevant and effective support and are exposed to the support services offered by the charity
- 26% of individuals tested at a regional awareness and diabetes screening event were asked to present at their local Lloyds pharmacy for fasting blood glucose tests. Of those individuals who presented, 10.5% were referred to their GP for further testing having blood glucose readings of over 6.1mmol/l (25% of which had fasting results over 10 mmol/l) – a clear indication that DRWF is helping to reach individuals who are as yet undiagnosed with the condition
- DRWF was approached by a number of organisations during the year to work with them in providing diabetes-related support to their membership and beyond

■ DRWF worked with other UK charities to raise awareness to World Diabetes Day on the 14th November. The theme was that of the IDF 'Prevention and Education' and the working party undertook mass media exposure to raise awareness to the differences between Type 1 and Type 2 diabetes; its risks and symptoms and the need for effective self-management. A joint letter was sent to around 2,000 media contacts to promote our activities and to encourage groups and organisations to take part in the Global Monument Challenge with an increase of participation on 2008 by around 25% with 35 key landmarks across the country lighting up in blue on WDD

■ Internationally, DRWF worked with other members of the Diabetes Wellness Network of charities to promote WDD on a global basis with direct mailings in the UK, US, France, Germany & Sweden

**Education & Support** — to provide good quality, effective and relevant information and support to people with diabetes, their carers and healthcare providers, in order that they can be effective in their self-care:

- 175,220 copies of the Diabetes Wellness News were circulated to members of the public, DRWF supporters and healthcare providers
- 13,472 patient information leaflets were requested by healthcare providers through the charity's quarterly re-order service, in support of their clients with diabetes
- 5,871 patient information leaflets were downloaded in pdf format from the DRWF website



■ 1,911 patient information leaflets were downloaded in audio format from the DRWF website

■ Two new titles were added to the Patient Information Leaflet series during the year 'Healthy Eating and Diabetes' and 'Exercise and Diabetes'

■ 3,054 diabetes awareness necklaces were requested by members of the public and healthcare professionals during the year

■ The annual Active with Diabetes Walking Holiday took place in the Lake District during May 2009 with 13 delegates attending the week-long event, learning how to manage their diabetes and medication regimes whilst incorporating exercise into their daily lives

■ A Diabetes Wellness Workshop took place during National Diabetes Week in June 2009 in collaboration with the Royal South Hants. Hospital, Winchester at the Novotel in Southampton. More than ninety delegates attended the educational event which provided the opportunity to attend more than six workshops during the course of the day, focused on diet and nutrition, foot health, oral medications, insulin adjustment and delivery and an overview of diabetes with taster exercise classes

■ The annual residential Diabetes Wellness Weekend was held in Blackpool in early September and was supported by the diabetes team from Blackpool Victoria Hospital. Thirty-six delegates attended the 4-day event which focused on improved understanding of all aspects of diabetes and good self-management skills in a relaxed and informal environment

■ World Diabetes Day Coffee Morning – DRWF opened their offices to the local community on 14th November to promote WDD and raise awareness to the support and information provided by the charity to those with diabetes

## IMPACT:

- An increase of more than 12% (on 2008) of

circulation of the Diabetes Wellness News during 2009

■ 892 new healthcare professionals were recruited to the Diabetes and related healthcare professional database to receive complimentary copies of the monthly newsletter and access to patient information resources (+34% on 2008)

■ 466 new subscribers to the Diabetes Wellness Network were recruited through the year (-13% on 2008)

■ A membership survey was conducted during 2009 to establish the demographics of the Diabetes Wellness Network subscribers with a 15.5% response rate

■ An overwhelming 96% of members thought the information provided within the Diabetes Wellness News was GOOD or VERY GOOD

■ 65% of respondents agreed that the publication helped with their diabetes understanding and subsequent self-management

■ 59% of members use their quarterly Good Health Pocket Diary as an aid in their self-management technique

■ 90% of Wellness Event attendees said that they found the experience beneficial

■ Website patient information leaflet downloads were up 19% in Q4 2009 largely attributed to the download of the new titles added in the latter part of the year, in particular 'Healthy Eating and Diabetes'

## Research Funding —

to support vital diabetes research projects with a view to discovering the causes, new and improved treatments for diabetes and its complications, whilst working towards finding a cure:

■ DRWF extended invitations to four possible new research advisory board members during the year

■ The DRWF 2009 Clinical Fellowship was awarded for a period of three years from a total of eight

applications to Dr. Nina Petrova (King's College Hospital, London) £168,827

■ Five Open Funding Project grants were awarded during the year from a total of 35 applications – Narendran, University of Birmingham £27,000; Cuthbertson, University Hospital Aintree £24,900; Welsh, Southmead Hospital Bristol £16,360; Mafucci, Barts and London School of Medicine and Dentistry £30,000; Squires, University of Warwick £14,906

■ DRWF granted continued funding of the DRWF Islet Isolation Facility staff at Churchill Hospital, Oxford for:

5 year Lab Manager 2010-2015; £310,604

2 year Post-Doc position 2010-2012; £85,618

1 year Transplant Administrator position 2011-2012; £27,696

■ DRWF continues to develop its Research Strategy to ensure that both beneficiaries and stakeholders are aware of the charity's commitment to funding the highest quality grant applications through its rigorous peer review process and transparency of activities by providing feedback and evidence of research outcomes through all DRWF and other communications

## IMPACT:

■ Three invitees to the Research Advisory Board (RAB) were delighted to accept. The DRWF RAB now has 11 members and is chaired by Professor Stephen Gough (Oxford)

■ 14% of Open Funding applications were granted during the year (+6% on 2008 awards)

■ When surveyed, 76% of DRWF subscribers said that they were aware of the charity's research funding programmes

■ DRWF applied to become a partner with the National Institute for Health Research (NIHR) during the year and was accepted, meaning that the charity's clinical research funding will be included in the NIHR portfolio with the potential for DRWF funded researchers to apply to the NIHR for additional support cost funds

## DRWF Wellness Events

### 'Active with Diabetes' Walking Holiday Bowness-on-Windermere, The Lake District 11th - 16th May 2009

The annual 'Active with Diabetes' Walking Holiday took place in May in the Lake District area of Bowness-on-Windermere. It was a five-night event which included three full days of walking under the expert care of our Ramblers Countrywide leader and Diabetes Nurse Specialist. The group comprised of fourteen delegates, who all enjoyed a great week of healthy walking, whilst learning more about diabetes and the importance and effect of exercise on insulin sensitivity.



### Diabetes Wellness Day South Southampton Novotel - Hampshire 13th June 2009

The Diabetes Research & Wellness Foundation worked collaboratively on the Diabetes Wellness Day South with the diabetes team from the Royal South Hants Hospital in Southampton. The one-day event was attended by 90 delegates and supported by a plethora of diabetes and other healthcare professionals who facilitated a rolling workshop programme to provide 15 sessions throughout the day. All talks focused on the key aspects of living with diabetes and establishing a pro-active approach to self-care. An exhibition room with 26 stands provided additional information and support.



### Diabetes Wellness Weekend Herons Reach Blackpool, Lancashire 4th - 7th September 2009

The annual Diabetes Wellness Weekend took place in Blackpool in 2009 and was attended by 35 delegates. Working closely with the diabetes healthcare team from the Blackpool Victoria Hospital, DRWF provided a full weekend of educational and informative talks and workshops on all aspects of diabetes and related healthcare. This relaxed and informal event offered taster sessions in varying types of exercise and activity classes; such as Tai Chi, swimming and Nordic walking—all with the aim of encouraging improved understanding of diabetes and good self-management skills.

## DRWF Wellness Events

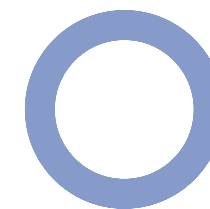
### National Nutrition and Health Conference Olympia, Kensington, London 12th - 13th November 2009

In November DRWF attended the 10th National Nutrition and Health Conference at Olympia in Kensington, London. The two-day conference was aimed at healthcare professionals from various disciplines and with a background or interest in diet and nutrition. The targeted audience provided an ideal backdrop to present the new titles in the DRWF patient information leaflet series - 'Diet and Diabetes' and 'Exercise and Diabetes'. The commissioned authors of these titles were present on the day as part of a 4-strong team, to take part in a satellite symposium provided by DRWF on 'Diabetes and Heart Health'. DRWF offered four sessions during the course of the second afternoon of the event and was supported in its delivery by Heart UK.



### World Diabetes Day Coffee Morning DRWF Offices 14th November 2009

The annual DRWF World Diabetes Day Coffee Morning was hosted at the charity's offices on Saturday 14th November. DRWF opened its doors to welcome members and local people alike to visit the offices and celebrate WDD. The event was well attended and local press arrived to document our activities. The morning focused on raising awareness to the IDF global monument challenge, of which DRWF had played a significant part in UK activity for 2009, and the 5-year theme of 'education and prevention', whilst bringing together members and supporters.



world diabetes day  
14 November

# Lay Summaries for 2009 Grant Awards

## 2009 Fellowship Award

**RECIPIENT:** Dr Nina Petrova

**INSTITUTION:**

Diabetic Foot Clinic, King's College Hospital, London

**PROJECT:**

An investigation into the mechanisms of pathological bone resorption in acute Charcot osteoarthropathy

**SUMMARY:**

Some people with diabetes and nerve damage can develop a bone and joint disease known as the "Charcot foot" in which there is considerable bone destruction. This bone destruction is caused by special cells called osteoclasts. We will investigate why osteoclasts from patients with Charcot foot destroy bone excessively. If we identify the factors that lead to increased activity of these cells, this will help the understanding of bone destruction and lead to new treatments for this difficult condition.

**AMOUNT:**

£168,827 (three years)

## 2010 Open Funding Awards

(awarded 2009)

**RECIPIENT:** Dr Paul Edward Squires

**INSTITUTION:**

University of Warwick

**PROJECT:**

A role for C-peptide in alleviating diabetic nephropathy

**SUMMARY:**

Kidney damage and reduced kidney function is a major complication of high glucose seen in diabetes. C-peptide is produced as a by-product of insulin production and has recently been shown to exert a number of protective effects when administered to diabetic patients presenting with renal complications. However, the mechanism by which C-peptide evokes this protective role in the kidney is unknown. This study will establish mechanisms by which C-peptide reverses structural and functional changes seen in the kidney, as a result of acute and chronically elevated levels of glucose, with the aim of identifying a novel therapeutic treatment.

**AMOUNT:**

£14,906 (1 year)

**RECIPIENT:** Dr Tania Maffucci

**INSTITUTION:**

Barts and The London School of Medicine and Dentistry, Queen Mary University of London

**PROJECT:**

Novel signalling pathways regulating insulin secretion

**SUMMARY:**

Type 2 diabetes is due to defects in production and action of insulin. Diabetes develops when pancreatic beta cells do not work properly. We still do not know precisely what goes wrong and why pancreatic beta cells release less insulin. Our work so far has suggested that pancreatic beta cells from people with type 2 diabetes possess a reduced amount of a specific protein belonging to a family of enzymes called 'phosphoinositide 3-kinases' (PI3K). Furthermore, our studies have revealed that when cells cultured in laboratory have a reduced amount of this particular enzyme they secrete less insulin. This project wants to understand how this PI3K controls insulin secretion and the consequences of its reduction observed in diabetic individuals. This can reveal whether defects in insulin secretion observed in type 2 diabetes can be at least in part due to a defect in this enzyme.

This will add brand new information on how beta cells work and will help identify at least some of the steps that go wrong in type 2 diabetes, potentially leading to new treatments. It must be noted that this is the first time that a role for this enzyme in insulin secretion has been observed; therefore, its potential contribution to diabetes has not been investigated so far.

**AMOUNT:**

£30,000 (1 year)

**RECIPIENT:** Dr Daniel Cuthbertson

**INSTITUTION:**

University Hospital Aintree

**PROJECT:**

Zinc-alpha2-glycoprotein (ZAG): A 'friend or foe' in obesity-induced insulin resistance and non-alcoholic fatty liver disease? (NAFLD)

**SUMMARY:**

Zinc-alpha2-glycoprotein (ZAG) was first identified in cancer patients with significant weight loss. Subsequent animal experiments, whereby ZAG was either given or the levels of ZAG were manipulated genetically, demonstrated that ZAG acts as a natural regulator of the amount of fat: higher ZAG levels caused fat to be lost and burnt off, while lower ZAG levels allowed fat to accumulate. Recently, human studies have identified

ZAG in fat and liver suggesting ZAG may also be relevant in controlling how much and where fat is stored in people and that it may play a role in the development of obesity, type 2 diabetes and fatty liver disease.

Some reports suggest that in some people ZAG levels increase with obesity, while others suggest the opposite and so its clinical relevance still remains unclear.

This study aims to determine how ZAG levels change in the blood, fat and liver in people with a wide variety of body weights and to determine the effect of weight loss by examining changes in ZAG in fat and liver biopsies before and after bariatric (weight reduction) surgery. The results of the study will help us to understand how ZAG is involved in the development of obesity, type 2 diabetes and fatty liver disease, and determine whether it represents a potential target for treatment of these conditions.

**AMOUNT:**

£24,900 (1 year)

**RECIPIENT:** Dr Gavin Welsh

**INSTITUTION:**

Southmead Hospital, Bristol

**PROJECT:**

Humanin (and related bioactive peptides) - a novel treatment for diabetic nephropathy?

**SUMMARY:**

Diabetes is the most common cause of end-stage renal failure (ESRF) in the developed world. Although the link between diabetes and kidney failure is not understood, the progression of diabetic nephropathy follows a predictable clinical course. Initially, in early diabetic nephropathy the kidneys leak small amounts of protein (microalbuminuria), and as the kidneys deteriorate further (progressive nephropathy) this amount increases (overt albuminuria).

The kidney's filters consist of two cell types called podocytes and endothelial cells, which interact together to form the filter. We can grow both cell types within our laboratory and the major aim of our laboratory is to understand how these cells interact and communicate with each other to form the filter in a healthy individual, and how this healthy state is disrupted during diabetes. In collaboration with Desmond Mascarenhas, (Mayflower Organization for Research & Education, Sunnyvale, CA, USA) we have become interested in the possible beneficial actions of the neuroprotective peptide humanin on the kidney. Dr. Mascarenhas has shown that this compound can markedly reduce protein loss (albuminuria) in an animal model of diabetes. This proposed work focuses on understanding the actions of humanin and other related bioactive peptides

(being developed by Dr. Mascarenhas) in treating the disturbances in the filtration function of the kidney seen in diabetes.

**AMOUNT:**

£16,360 (1 year)

**RECIPIENT:** Dr Parth Narendran

**INSTITUTION:**

University of Birmingham

**PROJECT:**

Lifestyle intervention for reducing beta cell autoimmunity in type 1 diabetes: a preliminary ex-vivo study

**SUMMARY:**

Type 1 diabetes is a form of diabetes in which the insulin-producing cells in the pancreas (called beta cells) are mistakenly destroyed by the body's immune system. Work we have done previously has shown that features associated with obesity bring on the onset of type 1. This was important because it was previously generally believed that obesity was only linked to type 2 diabetes, the other common form of diabetes. We would now like to see if regular exercise in patients with type 1 diabetes can slow down immune attack of beta cells. These experiments will be preliminary, but results could form the scientific basis for a lifestyle-based approach to preventing beta cell damage in type 1 diabetes.

**AMOUNT:**

£27,000 (1 year)

## Institutional Awards

■ Springpoint - 2009

\$400,000 (approx. £266,000 - exchange rate fluctuations possible)

■ University of Oxford - DRWF Islet Isolation Facility

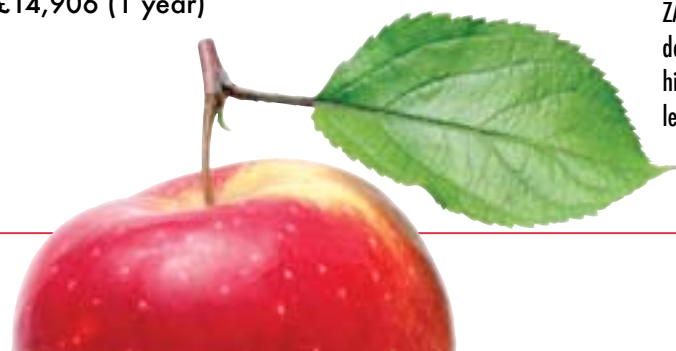
— Islet Transplant Administrator

— Post-Doctoral Scientist

— Lab Facility Manager

Contract funding x 3 (1-5 year duration)

£423,918





YEAR*	GRANT TYPE	BENEFICIARY	VALUE OF AWARD (£)	TERM
1999	Research Grants	9 awards	84,610.00	1-3 yrs
2000	Non-Clinical Fellowship	Dr. Luke Chamberlain (Glasgow)	106,456.00	3
2001	Studentship	Joanne Collins (Birmingham)	39,000.00	3
2001	Memorial Grant	Radcliffe Hospital (Oxford)	45,000.00	1
2001	Clinical Fellowship	Dr. Karen Anthony (KCL)	120,000.00	2
2002	Non-Clinical Fellowship	Dr. Chris Burns (KCL)	155,515.00	3
2002	Research Grants	4 awards	110,961.00	1
2003	Clinical Fellowship	Dr. B. Ravikumar (Newcastle)	100,000.00	2
2003	Research Grants	3 awards	86,983.00	1
2004	Non-Clinical Fellowship	Dr. Sergey Nezhentsev (Cams)	118,126.00	3
2004	Research Grants	5 awards	93,359.76	1
2005	Studentship	Mr. Mayowa Osundiji (Cams)	51,000.00	3
2005	Clinical Fellowship	Dr Arun Natarajan (Newcastle)	40,977.00	1
2005	Research Grants	4 awards	100,893.00	1
2006	Non-Clinical Fellowship	Dr Gavin Bewick (Imperial)	164,189.32	3
2006	Research Grants	4 awards	114,664.00	1
2007	Clinical Fellowship	Dr Mimi Chen (Bristol)	165,000.00	3
2007	Research Grants	4 awards	111,358.00	1
2008	Non-Clinical Fellowship	Dr James Bowe (Kings)	165,000.00	3
2008	Research Grants	3 awards	59,742.00	1
2009	Clinical Fellowship	Dr. Nina Petrova (Kings)	168,827.00	3
2009	Research Grants	5 awards	113,166.00	1
<b>RESEARCH GRANTS - COMMITMENT TO DATE</b>			<b>£2,314,827.08</b>	

\*Denotes the year the grant was awarded, not necessarily the year funding commenced

2003	Institutional Grant	Oxford Islet Transplant Prog.	1,348,751.05	6
2005	Institutional Grant	Spring Point Project and Diabetes Institute for Immunology & Transplantation	600,000.00	3
2007	Institutional Grant (grant awarded in US dollars, exchange rate fluctuations possible)	Spring Point Project and Diabetes Institute for Immunology & Transplantation (UK)	888,888.00	4
2008	Educational Centre	Stephanie Marks Appeal Ashford & St. Peter's Hospital, Surrey	81,000.00	2
2009	Institutional Grant	Islet Isolation Facility, Oxford (contract funding x 3 - 1-5 years)	423,918.00	5
2009	Institutional Grant (grant awarded in US dollars, exchange rate fluctuations possible - \$400,000)	Spring Point Project		2

approx. 266,000.00

<b>TOTAL GRANT COMMITMENT TO DATE</b>			<b>£5,923,384.13</b>	
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### SUBSCRIBE:

Become a member of the Diabetes Wellness Network and receive your monthly copy of the Diabetes Wellness News; quarterly Good Health pocket diaries; discounted attendance of Diabetes Wellness events; discounts on diabetes and related publications and products. Visit [www.drwf.org.uk](http://www.drwf.org.uk) to join online or call 023 92 636131

### DONATE:

With no Government funding, DRWF relies largely on voluntary donations. Show your support of our research, awareness and educational activities by making a valued contribution.

- You can pay by: Cash/Cheque/Credit Card - make cheques payable to 'DRWF'. Call: 023 92 637808 to make a credit card payment.
- Donate online and visit: [www.drwf.org.uk](http://www.drwf.org.uk) and click on the 'donate on-line' button
- Send your cheque or postal order to:  
DRWF, 101-102 Northney Marina  
Hayling Island, Hampshire PO11 0NH



### 'PARTNERS FOR THE CURE'

Become a committed giver and sign up to our 'Partners for the Cure' campaign. 'Partners' make a regular donation by direct debit either monthly, quarterly or annually and receive a quarterly complimentary copy of the Diabetes Wellness News to keep them up to date with our activities and research funding. Regular giving as a 'Partner' is the most cost effective way to make a donation. It allows us to plan ahead and inject an even larger percentage of our funds directly to where it's needed the most.



To become a 'Partner' call: **023 92 636136**

### GIFT AID

If you are a UK tax-payer you can increase the value of your donation by 25% at no additional cost to yourself! You must pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity reclaims on your donations in the appropriate tax year (6 April one year to 5 April the next and currently 25p for each £1 you give). All you need to do is complete a Gift Aid declaration when you make a donation to DRWF and we will reclaim the tax on any previous donations, back 4 years, and any future donations you make. Please remember to inform us of any changes in your tax status.

*giftaid it*

### LEAVE A 'LEGACY OF HOPE'

Legacies are vital to every charity. Leaving a gift in your Will is easy and a tax efficient way of supporting a cause that has been dear to your heart. It is always worth seeking professional help from a solicitor when you are drafting your Will to avoid any potential problems arising for your family. If you decide that diabetes research is a cause you would like to support by leaving a Legacy, all you need to do is tell your solicitor and provide the charity's details, which are:

Diabetes Research & Wellness Foundation  
Registered charity no: 1070607  
101-102 Northney Marina, Hayling Island, Hampshire PO11 0NH

### FUND-RAISE:

We need as much support as possible from individuals that would like to fundraise on our behalf. If you're interested in running a race, a marathon, taking part in a walk, holding a coffee morning or raffle etc., contact us for a free 'Fund-raising Activity Pack'.

### VOLUNTEER:

As a small workforce, volunteer assistance is greatly appreciated. If you are interested in helping distribute patient information leaflets or newsletters or helping at an event, in a volunteer capacity, please let us know. We will hold your details on our volunteer database and call on you from time-to-time to help.

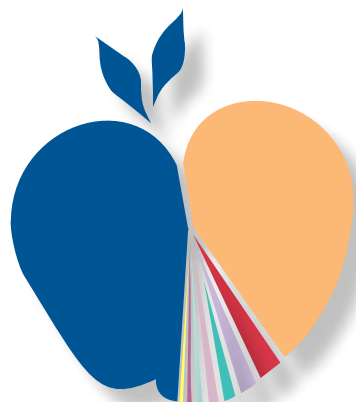
To fund-raise or volunteer, call: **023 92 636131**



## 2009 Income/Expenditure Profile

### 2009 Income Profile

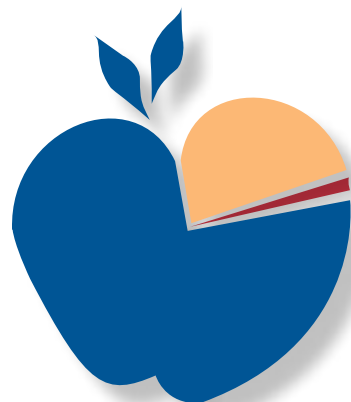
- Donations (47%)
- Gifts in Kind (40%)
- Gift Aid (7%)
- Legacies (4%)
- Bank Interest (.2%)
- Membership (.3%)
- Other (1%)
- Books (.02%)
- Grants rec. (.04%)



Donations	£2,512,694
Gift Aid	£382,975
Gifts in Kind	£2,172,103
Bank Interest	£8,536
Legacies	£211,537
Membership	£19,617
Books	£1,208
Grants rec.	£2,000
Other	£56,192
<b>TOTAL</b>	<b>£5,366,862</b>

### 2009 Expenditure Profile

- Charitable Activities (Awareness, Grants, GIK) (84%)
- Fund-raising & Publicity (12%)
- Support Costs (4%)



Charitable Activities (Awareness, Grants, GIK)	£4,783,513
Support Costs	£208,883
Fund-raising & Publicity	£659,247
Governance	£26,954
<b>TOTAL</b>	<b>£5,678,597</b>

## In Memory Gifts – 2009



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- The Miss Evelyn M Murdoch Charitable Trust
- Thomas Douglass Waugh Will Trust
- The Coulthurst Trust
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