



DRIPLINE

PNDU
Parenteral Nutrition Down Under

In this issue, learn the results of PNDU's August AGM and upcoming events; read about teenaged HPNer, Emily's talk to AuSPEN's Paediatric Conference; read some of the recent HPN Awareness Week activities held in hospitals and industry sites; consider becoming involved in a survey about financial stress, or a research project conducted by the University of Sydney. And of great importance, consider helping PNDU to function by joining the Management Committee as treasurer.

Gillian Anderson

Dripline Editor

ISSUE 57
AUG–OCT
2026

CONTENTS

- PNDU Management Committee
- Upcoming Events
- PNDU Needs Help
- Emily's AuSPEN Talk
- HPN Awareness Week – an overview
- HPN Awareness Week – Royal Brisbane Women's Hospital
- HPN AW – Gold Coast University Hospital
- HPN AW - Baxter activities
- Seeking Volunteers for a Research Project
- Financial Stress Survey (plus flyer)
- Australian Gastro Week, 2026
- Thank You
- PNDU information: Membership, donations and contact information



PNDU Management Committee

PNDU held its 2026 AGM on 18th August, 2026. The new committee is:

President: Chris Walker

Vice President/Dripline Editor: Gillian Anderson

Secretary/Public Officer: Miranda Einstein

Treasurer: Position not filled

MC members: Julia Rollings

Mariann Singh

Rachelle (volunteer)

Unfortunately, Sal, our treasurer, had to step down and the position is as yet unfilled.

Gillian Anderson gave a year's notice that, after 15 years, she will be stepping down from the MC and Dripline editor position at the next AGM.

Upcoming Events

- AuSPEN conference 5 – 7th November, Launceston Tasmania
- PNDU Annual Gathering Launceston, Tasmania 8th November
  Please contactpndu@gmail.com if you would like to attend.
- PNDU Representation

- Rare Disease Disability Network RDDN Showcase Melbourne, 19th November
- Release of the final RDDN Toolkits - end of a 2 year workshop to highlight Rare Disease Disabilities and provide resources to help access disability services including NDIS
- Rare Voice Australia Rare Disease Summit Melbourne, 19th November

- World Intestinal Failure Day 1FDay 2027 February 1st, 2027

PNDU NEEDS HELP! We're looking for a Treasurer

PNDU needs a Treasurer! Chris, our President, has been doing a sterling job juggling both his own role and the Treasurer's duties, but we really can't expect him to keep doing both.

We're a small organisation, so this isn't an enormous job, but we do need someone willing to take on the financial side of things and help keep PNDU running smoothly.

What's involved?

- Scan receipts and keeping financial records organised.
- Presenting a short Treasurer's report at PNDU online committee meetings, held approximately every six weeks on a weekday
- Preparing and presenting the annual Treasurer's report at the AGM.
- Completing the relevant activity statements.
- Preparing and lodging PNDU's annual financial reporting with the ACNC.

Do you need accounting experience?

If you're comfortable with numbers, reasonably organised and willing to learn, we'd love to hear from you.

Chris is very happy to chat with anyone interested, and answer questions.

And importantly, we understand that life with HPN can be unpredictable. We're all either on HPN ourselves or caring for someone who is, so we know there will be times when other things have to take priority. We're looking for someone who can help out, not someone who needs to be available 24/7!

Could this be you?

Please give it some thought. PNDU relies on volunteers to keep going, and having someone take on this role would make a real difference and take a significant load off Chris.

If you're interested, or even just want to find out a little more, simply email **contactpndu@gmail.com** with the subject line Questions about the Treasurer's job.

No obligation – we're happy to have a chat!

On the 8th of August I had the privilege to speak at the Auspen conference alongside my mum, sharing our journey with parenteral nutrition - hers as the parent who lived through the terrifying start of it, and mine as the teenager living it now.

The lead-up to that day felt bigger than I expected. In the weeks before, there was this mix of excitement and nerves building quietly in the background of everything else — school, dance, normal life — like a low hum I couldn't quite switch off. When I actually sat with what it meant, being asked to stand in front of a room of clinicians and speak about my own life, it felt like an enormous honour. Not something I take lightly. These are people who've been part of some of the hardest moments of my life, and here I was being trusted to speak to a whole room of them, not as a patient being spoken about, but as someone with something worth hearing.

Standing up the front with Mum before we started, I could feel how different this was going to be from the appointments and rounds I'm used to. This time the room was full of clinicians who were there to listen, not to examine me — no bloods, no exam table, just chairs and a microphone. It was strange in a good way to have that much undivided attention without anything medical actually being done to me.

Mum spoke first, taking the room back to when I was two years old and became critically unwell overnight with a spontaneous catastrophic volvulus. She described the ICU, the surgeries, the weeks we weren't expected to survive, and the years afterward of learning to live with ultra short bowel and home PN. It's a story I've heard many times, but hearing her tell it to a room of clinicians hit differently — I watched people who deal with cases like mine every day go completely still, and it reminded me how much was happening around me before I was old enough to understand any of it.

Then it was my turn, and I won't pretend I wasn't nervous — my hands were shaking a bit as I took the microphone from Mum. But once I started talking, it felt less like a presentation and more like finally getting to say things out loud that I don't usually get the chance to say, especially not to the people making decisions about my care. I described what this life looks like now, at seventeen, as living a bit of a double life — one version of me is a normal high schooler who loves dancing, hanging out with friends and staying out too late, and the other knows how to fix a pump alarm at 3am and talks about electrolytes like a school subject.

Most nights, while everyone else is asleep or on their phone, I'm connected to a bag of TPN that keeps me alive.

I spoke about mobility — both the physical kind, where my energy just isn't always there, and the practical kind, where being tied to a line and a pump means even a walk or a sleepover takes planning most people never think about. I spoke about what travel actually takes for our family: TPN in a backpack on the beach, lines flown interstate, my dad once flying home just to bring me supplies. And I spoke about the parts that have quietly cost the most — osteoporosis, kidney stones, hypermobility, anxiety and PTSD — the flow-on effects of fifteen years of treatment that don't always show up in a chart.

But I also wanted the room to hear what's helped. Being spoken to directly instead of through my mum. Clinicians who know my favourite show or my siblings' names, not just my case. Being treated as a teenager first and a patient second, wherever possible.

Consistency in teams, so I'm not re-explaining my whole life every time someone new walks in.

When we finished and sat back down, a few clinicians came up afterwards to talk to us properly, not just to say thank you but to actually ask questions — about school, about the transition to adult care, about what's actually helped. That part meant almost as much as the speech itself. It's rare to walk out of a room full of medical professionals feeling like the conversation is still going, rather than like it's over the second you stop talking.

Reflecting on it now, what I hope people took away is simple: behind every treatment plan is a person still trying to have a normal life inside an abnormal set of circumstances. Getting to say that out loud, to a room full of the people who care for families like mine, felt like an important step — not just for me, but for everyone in our community whose story looks a little like this one.



Emily with Dr Juliana Puppi

Home Parenteral Nutrition Awareness Week

27 September – 3 October 2026

Raising awareness

Home Parenteral Nutrition Awareness Week (HPNAW26) is the major event of the year on the PNDU calendar. Each year, it brings the wider HPN community together to raise awareness and deepen understanding of life with chronic intestinal failure—a rare and complex condition requiring home parenteral nutrition.

Fundraising and donations

HPNAW26 is also PNDU's major fundraising event.

PNDU is a registered, not-for-profit charity run entirely by volunteers. Donations of $2.00 or more are tax-deductible. Donations can be made via the PNDU website

Donate | Parenteral Nutrition Down Under



The HPNAW26 theme

Chronic intestinal failure is a rare and complex disorder, and home parenteral nutrition is a rare and complex diet. For HPNAW26, PNDU revisited the theme below.

"HPN: A Rare Diet"

Resources and participation

With help from HPNer Jordan, PNDU distributed HPNAW26 resources to our members, treating hospitals and industry friends. These included posters, stickers, informative flyers and fun games, encouraging everyone to take part and share their experiences of #HPNLife.





PNDU HPN AW26 Video

HPN Awareness Week opened with the release of the PNDU HPN AW26 Video. Miranda once again brought her creative touch to an old favourite, Home Parenteral Nutrition Degustation, refreshing this much-loved resource.





The video is available on the PNDU website: pndu.org.

Thank you, Miranda, for refreshing this valuable resource.

Spreading the word on social media

Social media helped spread the message of "HPN: A Rare Diet". The PNDU video recorded more than 1,500 views on Instagram in the first two days of HPN AW26 and more than 10,000 views across all social media platforms.

Thank you to our supporters

A heartfelt thank you to everyone who supported AW26. Special thanks to our industry friends Baxter and Fresenius Kabi, professional societies AuSPEN and NZ NIFRS, and rare disease organisations such as RVA for helping us spread the word.

Sharing photos and experiences

It is wonderful to see our members, clinicians and industry friends sharing photos of how they participate in and celebrate Home Parenteral Nutrition Awareness Week. PNDU greatly appreciates the photos and experiences our members share with us.

Take a look below to see how the week unfolded.

















Wagga Wagga Base Hospital bringing Specialised HPN care closer to home

PNDU supports people receiving home parenteral nutrition and their families, carers and communities. Together, we offer comfort, connection and hope. I was delighted to attend the opening of the HPN clinic in Wagga Wagga. Connecting people who live with intestinal failure and require HPN helps reduce isolation by bringing together those with shared experiences. I had the opportunity to meet with Ros and introduce her to PNDU over dinner the night before the event. Ros was transitioning from RPA to Wagga.

Wagga Wagga Base Hospital, in the Murrumbidgee Local Health District, is Australia's first regional health service to establish a home parenteral nutrition programme and its Australia's 30th HPN centre. The launch was an inspiring step towards putting the 'home' in home parenteral nutrition: regional patients no longer need to travel long distances to Sydney for treatment.

During the day at Wagga Wagga Base Hospital, an education session by Professor Sharon Carey outlined the history of HPN at Royal Prince Alfred Hospital (RPA) and shared valuable insights. (Words of wisdom)

A panel chaired by Professor Swapnil Pawar brought together those who made the service possible and explored what HPN care closer to home means to Ros, the HPNer at the centre of the discussion.

Panel members

- Professor Sharon Carey, RPA, contributing extensive expertise in dietetics and intestinal failure.
- Dr Peter Lim, RPA's Medical Director of Intestinal Failure Services.
- Ros, sharing the lived experience central to the discussion.
- Chris, President of Parenteral Nutrition Down Under, representing the broader patient community.
- Kylie and Jasmin, representing the Wagga Wagga Base Hospital team.



Partnership in action

(Professor Swapnil Pawar)

The day marked more than the launch of a new clinical service. It celebrated a tertiary hospital sharing its extensive expertise with a regional hospital to bring highly specialised care closer to home. At the centre of this partnership is Ros, the first patient who will transition her home PN care from RPA to Wagga.

This partnership brings together a tertiary centre willing to share its expertise, a regional team ready to build new capabilities, and a multidisciplinary team working together to support a patient. It also depends on the patient's confidence to take that journey with us.

Specialised care closer to home

Ros may be our first patient, but we hope her transition marks the beginning of something much bigger.

Ultimately, care closer to home should not mean compromising access to specialised care. It should mean finding better ways to bring that expertise to the people who need it."

Royal Brisbane Women's hospital

Royal Brisbane Women's Hospital "A Day in the Life" HPN Challenge

Specialist Nutrition Support Team

Words by PNDU President Chris.

Our sister organisation PINNT originally launched the "A Day in the Life" HPN Challenge in the UK. With support from Baxter, PNDU and our wonderful clinicians, it has taken off in Australia. During HPN Awareness Week, participants carry a backpack containing a full HPN bag, pump and giving set for several days. They learn how to prepare the HPN bag and prime the pump and giving set, which is then taped to their arm to simulate an HPN connection. Throughout the challenge, text messages simulate everyday situations, such as an HPN delivery arriving, a flat pump battery needing a recharge, air-in-line alarms or a leaking stoma. These interruptions temporarily disrupt participants' routines, helping them better understand #HPNLife.

The RBWH team shares their reflections below. Thank you for taking part in the HPN Awareness Week Challenge.



Jenny

Jenny was an utter champion and wore the PN backpack over a weekend to see how it would affect her personal life.

Here's what she shared with us about the experience:

You need to plan ahead and be organised - she initially forgot the PN bag and remembered only halfway to her destination!!

Spontaneity is hard - she had the opportunity to stay at friend's place and quickly realised how difficult this situation would be if she really had to connect up to PN - not much space to work with, nowhere for her bag to hang while infusing and having to factor in a whole bunch of things she'd never considered before

Hand washing facilities are woefully inadequate when you are out and about if you needed to access your line.

A massive thank you to all those who took on the HPN challenge to walk a day in a HPNer's shoes during HPN awareness week 2026, and to Baxter Health Care for loaning us the equipment to make the HPN immersive experience possible. We have learned so much from your experiences and have gained deeper appreciation of the challenges and victories the people we support on HPN live with on a daily basis.



Dr Merrilyn Banks

Next up on our 'a day in the life' HPN challenge - Dr Merrilyn Banks, fearless leader (aka Director) of the Dietetics and Foodservice department here at RBWH has taken up the challenge.

As a seasoned hiker she says the heavy-ish backpack is no problem for her. Fair enough.

Having her lunch interrupted by the notification "your PN delivery has arrived" is a new challenge though!



The fabulous Becs

The fabulous Becs is one of three dietitians at #RBWH dietetics and foodservices department who has taken up the challenge to walk in the shoes of a HPNer for this #hpnawarenessweek.

We can't wait to hear their thoughts and learnings from this immersive experience.

Becs has done a great job today and really leaned into what it's like to have an IV infusion running and interrupting her day.

She discovered:

"The backpack is heavy! That's my gym for the day"

"It's hard to know how best to manage it [the backpack and cords] when I need to go to bathroom!"

Closing the loop on yesterday's challenge by Becs, true to her word she went to the gym as usual but with her PN bag in tow. I understand she got challenged by the gym manager about it and bringing it into the gym, giving her further insight into the real-life challenges HPNers can experience as they go about their day.



#hpnawarenessweek week morning tea has become an annual event at RBWH. This year we focussed on HPN instead of the medical nutrition therapy aspects of intestinal failure management.









As always, the resources provided by @pndownunder are a hit with the team at dietetics and foodservices - a great way to learn about life on #hpn.



Thanks @pndownunder for all the support you provide clinicians during #hpnawarenessweek!

Thank you Royal Brisbane Women's Hospital Specialist Nutrition Support Team for supporting HPN Awareness Week.

Gold Coast University Hospital (GCUH) HPN Awareness Week 2026

Putting ourselves in our patients' shoes.

To mark Home Parenteral Nutrition (HPN) Awareness Week 2026, members of our team took part in an HPN Experience Day, wearing backpacks containing an IV pump and 2L of nutrition fluid for 12 hours to better understand the challenges faced by patients who rely on this life-saving treatment.

HPN provides nutrition and hydration directly into the bloodstream for people without a functioning gastrointestinal system. While essential, it comes with significant challenges, requiring strict sterile procedures, lengthy connection and disconnection processes, and constant management of equipment during everyday activities.

"The IV tubing was intrusive in daily activities, and the time taken to connect and disconnect while maintaining sterility was a challenge," Nurse Navigator Melanie said.

"It was a difficult day overall and now we have even more respect for what our patients go through."

A big thank you to Baxter and Parenteral Nutrition Down Under (PNDU) for helping make the experience possible.



A Rare Diet. A Remarkable Community.

This year, Baxter proudly supported PNDU and HPN Awareness Week across Australia and New Zealand. It was our most well-attended HPN Awareness Week yet, bringing a record number of patients, families, carers and healthcare professionals together to celebrate the HPN community and build greater understanding of life on Home Parenteral Nutrition.

More than 70 people participated in "Behind the Bag" tours across Baxter compounding sites in Toongabbie, Coorparoo, Brunswick, Auckland and Christchurch. The tours offered a rare opportunity for patients and families to see the care, expertise and precision involved in preparing Home PN therapy—and, just as importantly, to meet the people behind their PN bags.

These visits gave our compounding teams a valuable opportunity to connect directly with the patients and families who depend on Home PN. Listening to their experiences helped bring a personal perspective to the precision, care and attention involved in every preparation. It was a powerful reminder that behind every PN bag is an individual whose daily life is supported by the team's expertise and dedication.

The week also highlighted the power of lived experience. In Christchurch, a local HPN patient shared her story of travelling overseas while managing HPN. At Toongabbie, Thomas Wong from Sydney Children's Hospitals Network presented on multidisciplinary, family-centred care.

Across Queensland, Victoria and Western Australia, healthcare professionals participated in the "Day in the Life" challenge, wearing infusion pumps and equipment to gain greater insight into the realities of living with HPN.

Awareness Week also coincided with support for the opening of a new Home PN service at Wagga Wagga Hospital in collaboration with the Royal Prince Alfred Intestinal Failure Team, helping expand access to specialist care closer to home.

Better access. Stronger partnerships. Care closer to home.

During HPN Awareness Week 2026, over two days in Wagga Wagga, it was inspiring to see the launch of a new Home PN Clinic supported by collaboration between local clinicians, the RPA Home PN team and patients themselves.

The most memorable moment was hearing from the first local patient transitioning their care to Wagga Wagga—a powerful example of how health services can evolve to meet patients where they are.

The Baxter team were proud to be part of such an important step forward for regional care.

The record attendance and enthusiasm seen across ANZ made HPN Awareness Week 2026 our most successful yet. A sincere thank you to PNDU, patients, families, carers, healthcare professionals and Baxter teams for sharing their time, stories and expertise—and for reminding us that every PN bag represents a person, a family and the possibility of living life beyond therapy.

HPN: A Rare Diet. A Remarkable Community.



Brunswick Victoria



Christchurch New Zealand
Hanna & Felicia



Toongabbie Sydney



PNDU President Chris






Reception

SEEKING VOLUNTEERS for a research project

<u>Editor's Note</u>: The following 3 articles represent a wonderful opportunity for HPNers and carers to take part in 3 different surveys regarding different aspects of living life with Home Parenteral Nutrition. Research, and thus improvement in outcomes, is only able to be done if there are participants, so please get involved!

The University of Sydney is conducting a research project led by Professor Sharon Carey to explore the nutrition needs and preferred treatment options of people who experience gastrointestinal symptoms affecting oral nutrition intake alongside a diagnosis of:

• Ehlers-Danlos Syndrome (EDS)

• Postural Orthostatic Tachycardia Syndrome (POTS)

• Mast Cell Activation Syndrome (MCAS)

The study also seeks insights from health professionals who provide care to people with these conditions.

Who Can Participate

People with lived experience: Adults aged 18 years or older who have gastrointestinal symptoms impacting nutrition intake, together with a diagnosis of EDS, POTS and/or MCAS.

Health professionals: Clinicians with experience supporting people with the above conditions and symptoms.

What Participation Involves

• A short 5-minute survey about your background and experience.

• A follow-up conversation with a member of the research team to answer any questions.

• If you choose to take part, a 60-minute online interview discussing your experiences,

knowledge, and perspectives on nutrition care and gastrointestinal symptom management.

• Interviews are audio-recorded with your consent.

• There is no financial reimbursement for participation.

How to Express Interest

For more information and to express your interest:

https://redcap.sydney.edu.au/surveys/?s=JAYE4EXXY3RLY97L

For further information, please contact: Professor Sharon Carey Discipline of Nutrition and Dietetics, School of Nursing Faculty of Medicine and Health, University of Sydney Email:

sharon.carey@sydney.edu.au Phone: +61 2 9515 7863

Ethics approval

This project has been approved by the University of Sydney Human Research Ethics Committee (HREC) 2026/HE001102.

SEEKING PEOPLE WITH LIVED EXPERIENCE & HEALTH PROFESSIONALS



Help us understand the needs and preferred nutrition treatment options of:

- People diagnosed with Ehlers-Danlos Syndrome (EDS), Postural Orthostatic Tachycardia Syndrome (POTS) and/or Mast Cell ACtivation Syndrome (MCAS), suffering gsatrointestinal symptoms that impact oral nutrition intake.
- That of health professionals with experience treating these symptoms/diagnoses

WHAT'S INVOLVED?

5-minute survey
about your demographics and condition

2-5 minute call
to discuss any questions you may have

60 minute online meeting
to explore your experiences and condition

Scan the QR code for more information:

This study has been approved by The University of Sydney Human Research Ethics Committee (HREC) 2026/HE001102

https://redcap.sydney.edu.au/surveys/?s=JAYE4EXXY3RLY97L

National Survey Investigating Financial Distress in People Living with Intestinal Failure

We need your help!

In 2025, through a survey targeting a small group of HPNers, we found that the average spend per person, per year on HPN associated costs is AUD $6,000 (Breen et al. 2025)*. After speaking to the wonderful PNDU consumer group at the AuSPEN 2024 conference, we decided to make the survey bigger and try to capture the HPN costs around the country. We plan to use the information gathered to highlight gaps in funding and financial support for people on HPN, and to better support our patients.

What do we need?

We need your help to form a small group of consumers to re-develop the survey to capture the important information you want to see. You are invited into Phase 1 of the study because, with your lived experience, your expertise in the matter of financial burden will contribute significantly to the development of the survey.

Who can take part?

We invite all people, and carers of people, receiving HPN for 3 months or more, who are interested in contributing to the re-development of the survey to join the consumer group.

What's involved?

The study has four stages including 2x 1-hour online workshops. You will be paid for your time and effort!

How do I find out more?

Visit the link to find out more about the study: https://redcap.slhd.nsw.gov.au/surveys/?s=PK44CDEYEFLYHP3R

If you have any questions or would like more information, please contact Maddi Breen, the coordinating principal investigator, on 02 9515 8053 or Maddison.Breen@health.nsw.gov.au.

Thank you for your help!

This study has been approved by the Ethics Review Committee (RPAH Zone) of the Sydney Local Health District. Any person with concerns or complaints about the conduct of this study should contact the Executive Officer on 02 9515 6766 or SLHD-RPAEthics@health.nsw.gov.au and quote protocol number X26-0187.

* Breen M, Lin Q, Beyer L, Cunich M, Carey S. Economic impact of intestinal failure from a patient perspective - A pilot study. Intest Fail N Y N. 2025;6:100070.

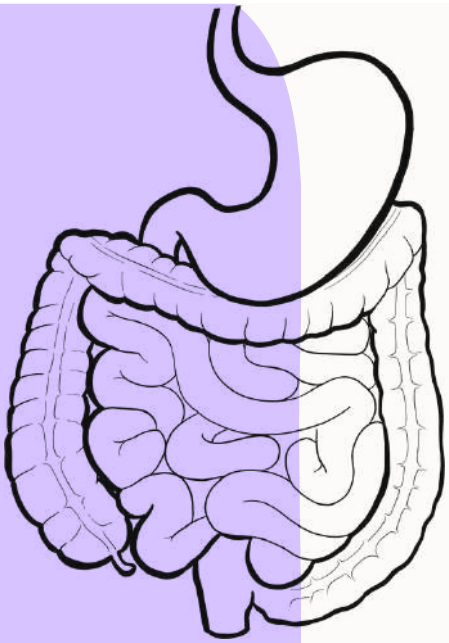
Invitation for consumers

Are you interested in contributing to the re-development of a survey exploring the costs associated with HPN?

Would you like to help advocate for better funding in the HPN community?

Register your interest in joining the team today

A National Survey Investigating Financial Distress in People Receiving Home Parenteral Nutrition: Phase 1



We would love to hear from you!

We are looking for people receiving home parenteral nutrition and/or their carers to take part in a ***consumer co-design team to re-develop a financial costing survey.***

If you, or your loved one you care for, have been receiving HPN for more than 3 months and you are interested in contributing to this body of work please scan the QR code below.

All the information you provide will be confidential. Participation is voluntary. You will be paid for your time.

Scan the code to access the participant information sheet.

What do we need from you?

You will be asked to complete a 5 minute survey to ensure you are eligible to join the team.

Once you have joined the team, two consecutive consumer workshops will be hosted online, each lasting approx. 1 hour.

We will have brief email communication about the final survey before distribution.

For more information, please contact Maddi Breen at maddison.breen@health.nsw.gov.au

This study has been approved by the Ethics Review Committee (RPAH Zone) of the Sydney Local Health District. Any person with concerns or complaints about the conduct of this study should contact the Executive Officer on 02 9515 6766 or SLHD-RPAEthics@health.nsw.gov.au and quote protocol number X26-0187 . Note this body of work is for a research project.

Version 2, dated 03/06/2026



We are pleased to announce the launch of Survey 1 for the Nutrition Care for Critically Ill Adults James Lind Alliance (JLA) Priority Setting Partnership (PSP)

This project aims to identify and prioritise the most important unanswered questions about nutrition care during and after critical illness. By bringing together the perspectives of patients, family members, carers, and healthcare professionals, we hope to establish research priorities that reflect the issues that matter most to those with lived and professional experience.

Survey Link: https://redcap.helix.monash.edu/surveys/?s=NPE9NXR8XLKA8DLP

Input from PNDU members is invaluable and will help shape future nutrition care research and improve care for critically ill adults. No specialist research experience is required, and the survey should take approximately 10 to 15 minutes to complete.

If you would like further information about the project, please visit

JLA website: https://www.jla.nihr.ac.uk/nutrition-care-critically-ill-adults-australia

Contact us at nutrient@monash.edu

Thank you for your support in helping us engage a broad range of stakeholders and ensure that future nutrition care research addresses the priorities of patients, families, carers, and healthcare professionals.

Australian Gastro Week (AGW) 2026 Gastroenterological Society Australia (GESA)

By Chris, PNDU President

I welcomed GESA's invitation to attend Australian Gastro Week in Perth, from Friday 28 to Monday 31 August. The conference provided PNDU with an opportunity to engage with clinicians and industry partners and share our information resources. Our longstanding relationships with professional societies, industry partners and clinicians enable us to connect HPNers with one another. I extend my thanks to the clinicians who visited our stand to discuss PNDU's ongoing support for the HPN community. The conference also provided an opportunity to renew connections with industry partners, including Joanne and her team from Takeda. Industry support assists PNDU in fulfilling its mission to support, research and inform consumers, carers and providers of Home Parenteral Nutrition for Intestinal Failure across Australia and New Zealand. Our stand was favourably positioned between the Crohn's and Colitis Australia and Crohn's and Colitis Cure. We valued the opportunity to engage with other not-for-profit organisations addressing similar gut and liver health issues, including reconnecting with Sarah from AusEE.

At AGW 2026, GESA CEO Claire invited not-for-profit organisations to participate in the "partnering for better gut and liver health workshop". The workshop convened CEOs from leading not-for-profit consumer organisations and GESA for an in-person discussion on strengthening collaboration in gut and liver health. GESA recognises the essential role of consumer organisations in incorporating consumer perspectives into decision-making, public information and advocacy. As the peak professional body for gastroenterology and hepatology, GESA convened this initial meeting to gain a deeper understanding of not-for-profit perspectives and begin integrating its medical expertise with consumer insights to inform ongoing discussions and future learning.

PNDU looks forward to further strengthening its relationship with GESA and participating in future workshops.









Thank You

PNDU is very grateful for the support given by the donors listed below. We wish to thank the following for their generous gift. Total donations $9,246.

Fresenius Kabi $3,000

Takeda $5,000

J. Lee

M. Joshi

S. Thong

Membership for Aussie and Kiwi HPNers and carers:

We welcome all Aussie and Kiwi HPNers (ie those living at home on Home Parenteral Nutrition) and carers to become PNDU members. To become a member, we invite you to go to our website Membership page.

Benefits:

- Access to all areas of our website, including Members Only pages (Travel, Kiddies Korner, Pharmacy Scripts, Hints & Tips, Clinical Info and more ...).
- Access to one or both of our private on-line groups (email and Facebook), connecting you with a wonderful network of support from other HPNers and carers.
- Receive news/information on HPN-related issues.
- Opportunity to contribute to PNDU Inc.'s work in raising awareness of HPN and supporting HPN research.

For HPN clinicians, industry employees, overseas HPNers, carers and those just interested:

We also welcome others to join PNDU as members, giving you access to all pages of our website, receipt of our newsletter Dripline and other HPN-related news, as well as opportunity to contribute to PNDU Inc.'s work in raising awareness of HPN and supporting HPN research. To join, please go to our website Membership page.

Donations

If you would like to support the work of PNDU, we would welcome your donation, no matter how big or small. Please go to the Donate page on our website for PayPal and Direct Deposit details.

All donations over $2 made to PNDU in Australia are tax deductible!

For our New Zealand supporters, PNDU has partnered with IPANEMA, to make supporting PNDU from NZ easy! Tax deductible donations to PNDU can be made by NZ based companies to IPANEMA, while individuals in NZ making a donation to PNDU through IPANEMA may claim a tax credit for their donations*. IPANEMA will pass on to PNDU 100% of such funds. (*This is general information only, please see your accountant for specific advice about your financial rights and obligations.)

Donating via direct deposit
Please provide your name as a reference. If you require an acknowledgement/receipt of your donation, please email us at contactpndu@gmail.com.

Australia ($AUD) Bank: Westpac Account Name: **PNDU Inc.** BSB: 032 056 A/C No.: 482 738	**NEW ZEALAND: ($NZD):** Bank: ANZ Account name: IPANEMA A/c No: 06 0273 0308799 00 Please include reference "PNDU" IPANEMA (Charities Commission Registration CC21178) is a NZ charity

Management Committee Members

President - Chris
Vice-President - Gillian
Secretary/Public Officer - Miranda
Treasurer - Position not filled
Dripline Editor - Gillian
Committee Members - Julia and Mariann
Volunteer - Rachelle

Contact Us

Parenteral Nutrition Down Under Inc. ABN 49742201085
contactpndu@gmail.com | www.pndu.org
Registered address: 128 Rainbow Street, Randwick NSW 2031, AUSTRALIA
PNDU Inc.'s privacy policy is available on our website
www.pndu.org

DISCLAIMER: PNDU has made every reasonable effort to ensure that the content of this newsletter is accurate, but accepts no responsibility for any errors or omissions. The views expressed are not necessarily those of PNDU and no reference to any product or service is intended as a recommendation or endorsement. You should always seek advice from your own team of healthcare professionals in relation to your specific needs/treatment.
Designer: MBE Hurstville