**History of the Starship Renal Service**

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Starship's Paediatric Renal Unit grew out of the Princess Mary service, established by Max Morris in 1980. Max, who retired from Starship's renal department in April 2011, had first come to Auckland from Otago as a final-year medical student in 1969. After a renal fellowship in Vancouver, in 1978 he spent a year in London performing dialysis and transplants, and then almost another year as a research fellow. ‘I was very determined, ‘he recalls,’ that I would come back to Auckland trained equivalent to the adult guys ... it was very important that paediatricians not be seen as lesser trained than adult physicians.'

The fledgling renal unit was based in Ward 34 of the Princess Mary, where charge nurse Willie Ellenbroek built up both nephrology nursing and respiratory medicine. The unit began kidney transplants in 1980, but at a cautious pace, limited partly by experience, but also, as Max explains, by the age range that could safely be managed: 'We were not treating children under five initially.' Back then, too, the unit was only performing haemodialysis on children, rather than peritoneal dialysis (PD).

Max was eager to develop the peritoneal dialysis procedure in Auckland, having seen it work near-miracles on sick children in Vancouver: 'haemo was a pretty rough treatment in those days'.

Meanwhile, the unit honed its nursing skills, thanks in part to Max's urologist colleague Derek Rothwell. An adult urologist by training, Derek had a keen interest in paediatrics and did extra training in paediatric urology in London. He would put his surgical cases onto Ward 34 instead of the surgical ward -and so, Max explains, 'our nursing staff got very good at handling surgical cases'.

As the single paediatric nephrologist, Max worked flat-out, with weekend relief only from two other paediatricians. The closure of Ward 34 in 1989, and the departure of the specialised nursing staff, brought a setback. He received a good deal of help from the adult nephrology service, and Dr John Collins in particular. With the move to Starship the renal unit moved into two wards - the younger children's ward, and the adolescent ward. But still Max was working 'essentially solo' amid steadily increasing demand, as Auckland's population - and Starship's importance as a centre for tertiary services - grew apace.

At last help was on the horizon. William Wong had trained under Max in 1990 before heading to Australia and England for further nephrology training and experience. In 1995 he returned and specialised, though it took until 1997 for the hospital to offer him a post. His decision to stay had been by no means an obvious one. 'I'm very grateful to William,' admits Max. 'He could easily have pulled out and left, because there were other jobs being advertised in Australia and the UK. It was through his loyalty to New Zealand and to Starship - and maybe to me - that he stayed on and battled through.

From 1987 the unit had begun taking on children down to two years of age, and from the early to mid-199os it opened the door to infants. 'We were able to run a very tightly managed service over the next years,' explains Max, 'and it continued to grow.' Mortality, he adds, was 'very low, almost zero. Once we made a decision to manage a child's kidney disease the chance of them dying of it was very low, so we had a steady increase in numbers.'

With more patients, of course, came the need for more help. 'We desperately needed our own specialist nurse, because ... a lot of the day-to-day care and the teaching of patients is done by our nurses. Prior to the appointment of the first specialist nurse, that was done by ward staff or by adult nephrology nurses, particularly the dialysis nurses.'

'By 1997 we were able to appoint a half-time nurse [Nicky Ziegler] who spent some of her time down in Nephrology training our patients on peritoneal dialysis and doing some of the other work with our patients, and the rest working as a specialist ward nurse. She'd be assigned the kidney patients who were on the ward, and she would be a source of information for the other nurses on 26B, the specialty ward [which includes Nephrology along with four or five other subspecialty services].'

Today there are four consultants in the paediatric nephrology service, among a total staff of around 30. Tonya Kara joined the department as a fellow in 2003. Maria Stack joined in August 2011, following Max's retirement. Chanel Prestidge joined in December 2011. Alongside the consultants, renal nurse specialist Jane Ronaldson has worked closely with patients and their families since 2002. The wider team depends on the dedicated contribution s of a paediatric dietician, child psychologist, junior doctors , ward nursing staff, specialist social workers, school teachers and a paediatric pathologist, as well as both Starship and Auckland City Hospital surgical and radiology services.

Outreach

Another key role of the Renal Unit, as with so many departments at Starship, is taking its expertise into the regions to provide a networked service of specialist treatment. This became feasible only in 1997, two years after William joined the unit. ‘There was quite a bit of resistance from some regional centres to this idea of us offering to see some of the children with kidney problems,’ William admits. ‘Interestingly, our adult renal colleagues were quite receptive to the idea.’ But once some regions had accepted the offer, others followed. ‘We currently do about 32 outreach clinics a year, spread out between the four of us,’ says William.

Max likens the outreach arrangement to that of a spoked wheel, with Starship as the hub. ‘Once we’ve diagnosed a child here,’ he says, ‘once we’ve established them on their treatment, the idea is to return them to their home town and then their management can be co-managed with Starship and their local service.’