

Glossary of terms

Here are some frequently used terms and acronyms you may come across in this magazine and elsewhere in healthcare.

A&E AI AIH	Accident and Emergency Artificial Intelligence Auto Immune Hepatitis	LFT LSM	Lateral Flow Test Liver Stiffness Measurement
ALD ALF	Alcoholic Liver Disease Acute Liver Failure	MASH	Metabolic dysfunction-Associated Steatohepatitis
APEX ARI	Advising on the Patient Experience Acute Respiratory Infection	MASLD	Metabolic dysfunction-Associated Steatotic Liver Disease (see also NAFLD below)
ARLD	Alcohol Related Liver Disease	MetALD	Metabolic dysfunction-associated Alcohol- related Liver Disease
BP	Blood Pressure	ML MRC	Machine Learning Medical Research Council
CCG CRESTA	Clinical Commissioning Group Clinics for Research and Service in Themed Assessments	MRHA	Medicines & Healthcare products Regulatory Agency
CQC	Care Quality Commission	MRI	Magnetic Resonance Imaging
CT	Computed Tomography	NAFLD NASH	Non-Alcoholic Fatty Liver Disease Non-Alcoholic Steatohepatitis
FLI	Fatty Liver Index	NICE	(now known as MASLD) National Institute for Health and
GHIC	Global Health Insurance Card		Care Excellence
GIT	Gastrointestinal Tract	NHS	National Health Service
GP	General Practitioner (doctor)	NHSBT NIHR	NHS Blood & Transplant National Institute for Health Research
HAV	Hepatitis A Virus	NSAID	Non-steroidal anti-inflammatory drug
HBV	Hepatitis B Virus	1107112	Tron otoroidal and innaminatory drug
HCC	Hepatocellular carcinoma	PALS	Patient Advice and Liaison Services
HCRG	Hepatobiliary Clinical Reference Group	PBC	Primary Biliary Cholangitis
HCV	Hepatitis C Virus	PHE	Public Health England
HDU	High Dependency Unit	PPE	Personal Protective Equipment
HE	Hepatic Encephalopathy	PPI/E	Patient and Public Involvement/Engagement
HEV HIV	Hepatitis E Virus Human immunodeficiency virus	PSC	Primary Sclerosing Cholangitis
HPB	Hepato-Pancreato-Biliary	100	Timary oddrosing ondangius
HRCT	High-Resolution CT	TED	technology, entertainment, design
		TX	Transplant
ICP	Integrated Care Plan	T2DM	Type 2 Diabetes
ICS	Integrated Care Scheme		
ICU	Intensive Care Unit		
ITU LFT	Intensive Therapy Unit Liver Function Test (now known as Liver		
LI I	Blood Tests)	(we update th	his glossary every issue)
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WELCOME TO THE AUTUMN 2025 ISSUE OF LIVERNEWS

The nights are drawing in unfortunately meaning that summer is behind us and autumn is here, along with your Autumn 2025 LIVErNEWS.

We've got advance notice of two medical talks coming up on pages 3 and 4 with an excellent briefing by Alf Bennett on page 7 on our last talk from 17th July.

On the subject of talks, how do you feel about resuming live meetings at the Freeman or another location? Please let me know - we stopped these at the start of the lockdown and I'm wondering whether now is the time to resume them? Any other ideas for meetings, Q&A sessions or get-togethers very welcome.

There are some brilliant articles in this issue from our team which will really get you thinking as well as some wonderful humour from supporters.

We've also got our usual features of course and we've found an excellent quiz for nurses and medics on page 36 - do test your knowledge and let us know what you think. On the subject of quizzes, those of you who are regular readers will note we're on to our 13th Barista Quiz on page 38. If you have a good memory and can remember the previous questions it means you now know 260 things! Quite an

achievement!

And... on the subject of achievements, our Great North Runners were out in force pounding the road to South Shields on Sept 7th - some early photos arrived before we went to press and you can see them on page 28 (well done everyone!). More next issue hopefully as well as some info on how to join our team for the 2026 run.

This is a larger issue than normal, please take you time reading it. You might like to pass it on to someone else to read when you're finished with it so please don't bin it. One in ten people have some form of liver disease so wherever you leave your LIVErNEWS there's sure to be someone who could benefit from reading it.

On page 8 is our updated guide to seeing your consultant. Things have changed over the past few years. This guide will help you get the most out of your consultation whether it's face to face in a clinic, online via a smartphone, a tablet or simply by telephone. Do read it, do share it, we all need to make the most of our overstretched NHS.

Please enjoy this issue and look after yourselves, best wishes,

John & the LIVErNORTH team

GUEST SPEAKER

Prof Stuart McPherson



BSc MB ChB MRCP MD FRCP Consultant Hepatologist Newcastle upon Tyne NHS FT

NHS liver Health checks – results from the national pilot

iii 16 Oct 2025 | 7.00pm | ZOOM

to get the link: info@livernorth.org.uk

ALL WELCOME (2 x CPD points for clinical staff)

GUEST SPEAKER

Mr Rohan Thakkar



MS DNB (Gen Surg) MRCS FRCS
Consultant HPB & Transplant Surgeon,
Newcastle upon Tyne NHS FT

Liver Transplantation in colorectal liver metastasis in the UK

7 Nov 2025 | 6.00pm | ZOOM

to get the link: info@livernorth.org.uk

ALL WELCOME (2 x CPD points for clinical staff)

WATCH ANY PREVIOUS TALK ON YOU TUBE - SEE THE Q&A



Liver Transplant for Neuroendocrine **Tumours**

to get the link:

info⊚livernorth.org.uk

Mr Stuart Robinson



28 Nov | 7.00pm | ZOOM

New Therapies for PBC + Q&A

to get the link: info@livernorth.org.uk ALL WELCOME (2 x CPD points for clinical sta

Nov 24

Prof D Jones

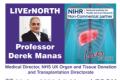




to get the link: info@livernorth.org.uk



Dr R Edwards



i 23 Jan 2025 | 7.00pm | ZOOM

UK Assessment and recovery centres - fact or science fiction?

to get the link: info@livernorth.org.uk ALL WELCOME (2 x CPD points for clinical staff)



R Howart & T Crane

TYPE THIS IN YOUR BROWSER: https://www.youtube.com/@livernorth7778/videos OR SCAN THIS QR CODE-

IF YOU WOULD LIKE US TO **EMAIL YOU THE LINK TO ANY TALK, PLEASE EMAIL US AT:**

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Catch up on our YouTube Channel

You can access our recorded talks on our YouTube channel: https://www.youtube.com/@livernorth7778/videos 40+ talks are currently available, all foc to watch.

scan here for the link



RECORDED BRIEFINGS, TALKS & WEBINARS

		Mr Obrant Dalain and	
July	2025	Mr Stuart Robinson	Liver Transplantation for Neoendocrine
			Tumours
April		Kate Pym	How AI is Shaping our World
Jan	2025	Professor Derek Manas	UK Assessment and Recovery Centres -
			Fact or Science Fiction?
Nov		Professor David Jones	New Therapies for PBC
Oct		Dr Rachel Edwards	Fibrosis Assessement in Alcohol Use Disorder
July	2024	Rachel Howarth &	Nutritional Considerations in Liver Disease
_		Tom Crame	
June	2024	Prof Helen Reeves	Liver Cancer. Choosing the right treatment for
			each patient
May	2024	Dr Helen Jarvis	Improving Detection and Management of Liver
			Disease in General Practice
March		Mr Rod Figueredo	Past, Present & Future of Liver Perfusion
Feb		Dr Jess Dyson	Update on Autoimmune Liver Disease
Jan		Mr Abdullah Malik	The Immune System, Surgery and HCC
Nov	2023	Cathy Beresford	Experiences of care in advanced liver
<u>.</u> .			disease
Oct		Professor Derek Mann	Liver Cancer Immunotherapy
August	2023	Dr Kate Hallsworth	Physical Activity and Exercise for NAFLD
			Patients
April	2023	Professor John Sayer.	Identification of a new inherited cause of
			liver & kidney disease'
March		Dr Stuart McPherson.	Progress towards Elimination of Hepatitis C
Dec		Mr Aiman Amer	ERAS - Enhanced Recovery After Surgery.
May		Professor David Jones	PBC - Is The Fog About to Clear?
March		Mr Colin Wilson	The Geordie Hospital TV series.
Sept		Mr Aiman Amer	A King's Fellow Returns
July	2021	Professor David Jones	PBC, The Vaccine and the
			Immunosuppressed
June		Organ Donor Team	The Organ Donation Journey
April	2021	Mr Colin Wilson	What's New in Transplantation?

Also many other talk/lecture videos dating back to 2015 and earlier.



Liver Transplant for Neuroendocrine Tumours (NETs) - Mr Stuart Robinson

LIVERNORTH talk 17th July 2025. Stuart was appointed as a consultant Hepato-Pancreato-Biliary (HPB)) surgeon at the Freeman hospital in 2018. He is a Clinical Lecturer in HPB surgery. His main interests lie in the treatment of liver and pancreatic cancer with a particular interest in the management of neuroendocrine tumours.

This fascinating and comprehensive talk on HPB tumours, including their identification, treatment plus related issues present and future, was so informative and thought provoking.

The talk commenced with a description of what Neuroendocrine tumours are. They can arise all over the body, for example, the thyroid, pancreas, liver and rectum. They are a diverse group of tumours in the way in which they behave from relatively indolent to highly aggressive. Tumours can graded as 1, 2 or 3 depending on the percentage of cells which are actively dividing by examining the cells under the microscope. Grade 1, 1-3% are dividing: grade 2, 3-20%are dividing and grade 3 where more than 20% are dividing. The majority of tumours seen are in the 1 or 2 grade category.

For the majority of these tumours, the way in which they present themselves can be vague, for example slight diarrhoea or facial flushing. This may result in the condition being picked up late. The use of the Metastases algorithm using MRI to show the range of treatments was outlined. Other treatments include the use of Somatostatin Analogues. These are drugs which can reduce and control

the high levels of hormones produced by NETs which can slow down and control the cancer. Such drugs have now become the first line of treatment.



Liver Transplant for Neuroendocrine Tumours

to get the link: info@livernorth.org.uk

Other treatment options including the use of Selective Internal Radioactive Therapy (SIRT) were covered. This is a way of giving radiotherapy treatment to cancer in the liver which cannot be removed by surgery. The criteria for the receipt of a liver transplant for Neuroendocrine tumours were outlined including the grade of tumour and the period of time for which the patient has had the disease. The data on the outcomes of liver transplants in terms of overall survival at different time intervals from transplantation is very encouraging. The long term benefits of liver transplants for hepatic metastases is significant. Overall survival and disease free survival following transplantation has significantly improved.

A Case Study was then presented pulling together all the issues previously discussed on how intricate the systems can be for identification of the disease followed by the development of the appropriate treatments options for the patient.

The talk concluded with a question and answer session.

Don't forget to view the full talk on YouTube! (Alf Bennett)

You and Your Consultant - Leaflet No 9, revised Aug 2025

What follows is the entire text from our leaflet No 9 which has been recently revised to enable patients and carers to make the best use of appointments with their consultant. These appointments can be either in person (at the clinic), virtual (online) or by telephone. Please feel free to share this information with others who may benefit. This leaflet is available from our website (http://www.livernorth.org.uk/pdfs/9YAYC.pdf) or we can post printed copies out to you if you contact us at: info@livernorth.org.uk.

Introduction

At some point during your care you are likely to have an appointment with a consultant in the outpatient department. These consultations are important opportunities to understand your condition and your treatment options.

Appointments may take place in person at the hospital, by telephone or online as a video consultation (virtual). All types of consultation are equally important and involve the same clinical discussions.

Due to the busy nature of outpatient clinics, each consultation is usually limited to 10 - 15 minutes. By preparing in advance, you can make the most of this time and ensure you get the information and support you need.



This leaflet explains how to get ready for your consultation.

What to Expect During Your Consultation

Your appointment will usually follow this structure:

- 1. Taking a history the consultant will ask about your symptoms and background.
- 2. Examination in person this may involve your abdomen or chest; online, the consultant may ask to observe visible symptoms.
- 3. Reviewing investigations such as blood tests or scans.
- 4. Discussion an explanation of your condition and what it means.
- 5. Treatment options looking at what may be helpful for you.
- 6. Planning ahead including any follow-up arrangements.
- 7. Answering your questions you'll have a chance to raise any concerns.

Having a family member or friend with you can be helpful, whether in person, on the telephone or at the online call, to support you and help remember what was said.

How to Prepare

Being prepared means more time can be spent discussing your condition and answering your questions.

Please have the following information ready:

☑ Contact Details

- Your name, address, date of birth
- Phone numbers for you and a next of kin
- A relative's or friend's contact details (especially if you're on the transplant list)

☑ A Short History of Your Symptoms

- What your symptoms are (e.g. pain, nausea, itching, jaundice)
- When they started and how they've changed
- When you last felt completely well
- If this is a follow-up, how you've been since your last visit

☑ Past Medical History

- Major illnesses or operations you've had and when
- You don't need to know all the medical terms just what you can recall

☑ Medications & Allergies

- A list of current medications and doses (or bring the medication with you)
- Any allergies you have

☑ Social Information

- Your occupation
- Alcohol intake, smoking habits, or drug use (past and present)

Additional Tips for Phone or Video Appointments

- Make sure you have a quiet, private space for the consultation where you won't be interrupted.
- Test your internet connection and device (computer, tablet, or smartphone) in advance.
- Have your phone nearby in case there are any problems connecting by video.
- Keep your notes, medication list, and any questions you have ready to hand.
- If possible, have a family member or friend join the call for support or to help you remember details.
- Join the call a few minutes early so you're ready when the consultant connects.
- Make sure your camera and microphone are working. Adjust lighting so the consultant can see you clearly.
- Be prepared to show any visible symptoms on camera if asked (for example swelling, jaundice).

Questions You May Want to Ask

• What is the name of my condition? What stage am I at?

- What does the future look like for me? Are there different outcomes depending on treatment and lifestyle?
- What side effects might I experience from my medication? Are there alternatives?
- Is my condition genetic or infectious? What does this mean for my family or those close to me?
- What can I do to help myself? Are there lifestyle changes or support groups that may help?
- What do all these medical terms and
- abbreviations mean? (ask for an explaination of anything unclear)
- Where can I get more information? Are there booklets or trusted websites?
- What should I do in an emergency? Who do I contact if things get worse?

Other Important Information

- Please avoid asking questions the consultant won't be able to answer (e.g. car parking, transport, catering). Speak to reception staff for these types of queries.
- If the clinic is running behind, it may be because another patient needed more time. Your consultant will also give you the time you need.
- If you're ever unhappy with your consultant, you can ask to see someone else. You have a legal right to choose your consultant or hospital. Find out more: https://www.nhs.uk/NHSEngland/patient-choice/Documents/patient-choice-leaflet.pdf

Final Tips

- Make a list of your questions beforehand
- Bring a notebook or have a way to take notes during the consultation
- Don't hesitate to ask for clarification if something isn't clear

Prepared by: LIVErNORTH – supporting patients with liver disease. Website: www.livernorth.org.uk

Some of the information contained in this leaflet may also appear elsewhere.

Acknowledgement:

We are very grateful to Mr Jeremy French FRCS, Consultant Hepato-biliary and Transplant Surgeon at the Freeman Hospital, Newcastle upon Tyne for writing this LIVErNORTH publication for the benefit of liver patients.

If you would like a copy (or copies) of this leaflet, please email us at info@livernorth.org.uk

stating how many you would like and where to send them.

The Donor Family Perspective

Organ donation provides the gift of life for transplant recipients when all goes well. And for donor families, the organ donation process can be of great help. Years ago when we discussed organ donation, my wife Lynn said the survivor may find some comfort from organ donation. I didn't fully understand quite what that could be but having been with Lynn during her organ donation journey, I now appreciate what she was intimating.

Organ donation meant several surgical teams all needed to be ready before Lynn would go to the operating theatre and I had precious time to be with Lynn to say my goodbyes. As a result, I have a lasting image of Lynn in bed, warm, free from pain, at rest. It was humbling seeing Lynn being so well cared for by the Organ Donation Specialist Nurses and all the ICU staff, who also looked after me with such kindness. What deeply impressed me was being with the Specialist Nurse looking after Lynn and liaising with medical teams for potential recipients, who made time to take our hand prints and plait a lock of Lynn's hair. I took huge assurance from the Consultant anaesthetist who explained every step of the process, understood our concerns as I voiced them, and who conducted the brain stem tests with such dignity. That helped me begin to come to terms with what had happened. And it was greatly comforting to know that a Specialist Nurse would be with Lynn in the operating theatre to care for her.

Lynn had had a massive brain haemorrhage, completely unexpected. I know the ICU staff would have been supportive and caring had we not opted for organ donation. But I'd have known Lynn would then be taking up scarce resources which would be put to better use for others. I was also excused having to agree to when life support should be turned off, spared the awfulness of that decision with the inevitable consequences. And I would not have had that precious time to be with Lynn which I look back on as providing the best possible and most fitting end for Lynn, given the appalling circumstances we faced, with the organ donation process bringing dignity to death.

The comfort I took from the organ donation journey helped me in writing my eulogy for Lynn and in coming to terms with my grief.

In my eulogy I included Lynn's organ donation journey and what it had meant for me, how appropriate organ donation felt when Lynn placed so much importance on the aphorism: from each according to ability; to each according to need. It had been a guiding principle throughout her 35 year nursing career and in her championing of social justice. Lynn no longer had any use for her healthily organs; she had made clear that if the circumstances were such, she wished to donate her organs; and she had been able to donate her organs for those in desperate need.

Lynn would have been so pleased to know that four people were provided with life enhancing opportunities. She'd have been touched to know that two recipients wrote to me. Both were fully restored to health and able to enjoy the things they loved doing: a 17 year old girl in desperate need of a liver transplant; and a 45 year old woman with kidney failure, able to be the mother to her 11 year old daughter, wife to her husband, back riding her horse and competing in eventing.



Lynn's bridge across Buttermere Dubbs, looking to Buttermere. The footbridge had been badly damaged in the winter storms and I was pleased to fund the replacement in Lynn's memory. (S.S)



Brain fog - a call to action

Researchers Darren Haywood, Susan Rossell and Nicholas Hart have recently published a short article on brain fog. This is called: 'Cutting through the fog: recognising brain fog as a significant public health concern.'

The authors describe their article as 'a call to action'. They have produced a list of key things that need to happen to improve care of people with brain fog. They are clear that, as the article title suggests, 'Brain fog must be recognised as a significant public health concern.' This is because of:

- the impact it has on people's quality of life,
- the demands it creates for healthcare, and
- the costs to the global economy (due to time off work and costs of healthcare).

The article stresses that a clear definition of brain fog needs to be developed. The authors point out that this should not just be based on experts' views. Importantly the views of people living with brain fog due to different conditions (like liver disease) should be considered too. The authors also state that people with experience of living with brain fog should be part of research teams along with healthcare professionals, scientists and policymakers.

In the article they call for assessment tools to be developed and tested to help improve assessment of brain fog. They emphasise that tools that currently exist also need to be thoroughly tested in different groups of people. One of the recently developed tools is called the Brain Fog Scale (for more on this see overleaf).

Not surprisingly, the authors highlight that more money should be provided for brain fog research. They say this is needed to: '...better understand brain fog, and develop and improve prevention, treatment and supportive care approaches.'

It is interesting to learn in the article that work is being done to prevent brain fog. This includes in people with cancer who are going to have treatments that might cause brain fog. It makes me wonder if people with liver disease are being given advice and support to reduce their risk of developing brain fog.

The authors emphasise that for progress to be made it is important to bring together knowledge about brain fog from different specialities. This should help provide more knowledge about what causes brain fog, how it can be prevented and treated and how best to support people who have it. They also call for guidelines on the management of brain fog that could be used in different countries.

The article was published in BMC Public Health. This is a UK-based peer-reviewed journal. If you would like to read the article, it is available online free of charge on the link below:

Haywood, D., Rossell, S.L. & Hart, N.H. Cutting through the fog: recognising brain fog as a significant public health concern. BMC Public Health 25, 1230 (2025). https://doi.org/10.1186/s12889-025-22525-6

Brain Fog Scale

A team of researchers (Agata Debowska and colleagues) have recently developed and tested a Brain Fog Scale. They designed this for use in research and in healthcare. They did the initial testing of the scale with university students. Some of these students had previously tested positive for COVID (which can cause brain fog).

This Brain Fog Scale contains 23 statements about different symptoms of brain fog that people might experience. To complete the scale, you identify how often you have had each of these symptoms in the last 2 weeks:

- never (0)
- rarely (1)
- occasionally (2)
- a lot of the time (3)
- nearly all of the time (4)

The scores given for the different answers are in brackets above. These range from 0 for 'never' to 4 for 'nearly all the time'.

These are the symptoms listed:

- 1. My thinking has been slow
- 2. I have felt mentally exhausted
- 3. I have felt fatigued
- 4. I have been easily distracted
- 5. I have found myself getting annoyed
- 6. I have felt sleepy
- 7. I have found it difficult to remember and understand new information
- 8. I have found myself forgetting certain words, such as the names of objects
- 9. I have found it difficult to think logically
- 10. I have found it difficult to concentrate
- 11. I couldn't think clearly
- 12. I have had a hard time finding the right words
- 13. I have found it difficult to organise my thoughts
- 14. I have felt like my mind's gone blank
- 15. I have found it difficult to understand words when reading

- 16. I have had a hard time understanding what others say
- 17. I have been daydreaming
- 18. I have felt spacey
- 19. I have felt confused
- 20. I have experienced thought blocking
- 21. I have felt lost
- 22. I have felt absent, as if I were living in my own world
- 23. My thoughts have been moving quickly

As the researchers say, there is still a lot of work to be done to develop this tool and test it out with different groups of patients to see how useful it is in assessing brain fog. Hopefully this and other assessment tools for brain fog will be tested with people who have liver disease.

Debowska, A., Boduszek, D., Ochman, M., Hrapkowicz, T., Gaweda, M., Pondel, A. & Horeczy, B. Brain Fog Scale (BFS): Scale development and validation. Personality and Individual Differences 216, 112427 (2024). https://doi.org/10.1016/j.paid.2023.112427

Personal experience of learning languages

Learning a language is sometimes suggested as a way of helping brain fog*. I had never considered trying this as I found languages difficult at school.

When people started moving to the UK due to the conflict in Ukraine, I persuaded myself that I should try to learn some Ukrainian. I had no idea when I committed to this that Ukrainian used different letters to English. On the recommendation of family and friends I used the Duolingo app. This provides short lessons on many different languages. I spent 5-10 minutes on the app every day. It was challenging but very interesting.

After about three weeks I noticed something. In my everyday life I seemed to be sharper mentally. I wasn't expecting this change, and I was surprised it happened so quickly. I spoke to somebody else who was learning Ukrainian, and they had noticed the same thing. I continued with Ukrainian for a year, then decided to try learning some Welsh. Again just 5-10 minutes a day. A few months later I noticed something else. I could for the first time in my life confidently tell left from right. I have no idea how these changes occurred. I just thought I would share my experience in case it helped someone else. (S O'D)

^{*}The Summer 2021 edition of LIVErNEWS (No 75, pages 22-24) contains a summary of a useful book by Dr Sabina Brennan entitled 'Beating brain fog. Your 30-day plan to think faster, sharper, better'.



2025 Charity Draw Tickets

If you receive LIVErNEWS by post, you'll also have received a book of 10 Charity Draw tickets along with a prepaid Freepost envelope.

- If you don't wish to buy the tickets, or if you'd prefer to purchase online, simply destroy the book.
- · Please do not return unsold tickets to us

Every ticket you buy helps us continue supporting liver patients and funding vital research.

- All ticket stubs and payments should be returned by 17th November 2025.
- Cheques should be made payable to LIVErNORTH.

It's quick and easy to buy your tickets online:

https://www.peoplesfundraising.com/.../livernorth-charity
Thank you for your support - and good luck in the draw!

Request for Assistance - please help if you can

Dear Team at Liver North,

I am reaching out to invite members of your organization to share their experiences and help shape the future of clinical trials for liver disease. My name is Reem AlSowaiegh, a PhD student at the Comprehensive Clinical Trials Unit, University College London (UCL). I am conducting a qualitative research study to understand how trials for cirrhosis can be made more accessible and patient-friendly.

I am seeking to interview experts by experience, specifically members of Liver North. The interviews will explore:

What participants see as the main obstacles to taking part in clinical trials. Suggestions to make participation easier and more appealing. Interviews are informal, confidential, and scheduled at a time convenient to participants via phone or video call. Ethical approval has been granted by UCL's ethics committee.

I would be grateful if Liver North could share this invitation with your members or connect me with interested individuals. I am happy to provide further information or speak by phone if needed.

Thank you very much for your time and consideration.

Kind regards,

Reem AlSowaiegh PhD Student, Comprehensive Clinical Trials Unit University College London (UCL)

Email: reem.alsowaiegh.22@ucl.ac.uk Phone: 07898 266044 / 00973 3355 3939

How to get information leaflets:

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4. Facebook pm us: https://www.facebook.com/livernorth/

5. Write to us: Freepost LIVERNORTH



Nice treat for us in August. Mr Ben Hesler, assistant manager at Enterprise Rent a Car presented us with a cheque for £1000! Ben knows the work of our charity and nominated us to receive a charitable donation from his organisation (little did we know it would be £1000!). Brilliant move Ben, many thanks from everyone at LIVErNORTH. Enterprise have supported us in the past and we are so grateful to the company for their continued support and their

understanding of the work we do for liver patients, their families, carers and funding research. This will certainly help...

SUPPORT LIVER PATIENTS AND FUND RESEARCH JOIN OUR LOTTERY - DETAILS ON PAGE 30

50% of income goes on prizes 50% goes to fund research & patient support

LIVErNORTH relies on donations and the generosity of our supporters. We are run entirely by unpaid volunteers.



Scam Emails - BE AWARE



Emails that seem genuine are being sent by criminals to trick you into giving them your bank details, personal information and/or passwords.

It's very difficult to know which emails are genuine and which are not. Generally, if they don't use your name or your role, be suspicious. Check where the email came from and see if the sender's address seems genuine. If you've had a genuine email before from the same company, look at their previous email address to see if it's the same. If in any doubt, delete it. If you want to stamp out this type of thing, forward the email to Action Fraud report@phishing.gov.uk] (then delete it!).

A Short History of Cruising

Anyone watching TV today will be aware of the increased numbers of programmes and advertisements on cruising. The adverts are particularly enticing. Just as an example, the one with lyrics, "somewhere beyond the sea, my love waits for me"......I will leave you to continue with rest. That tune will now be in my head for the rest of the day. But, where did this idea of cruising for pleasure really start?. Over 180 years ago, an advertisement appeared in the Shetland Journal which outlined both an imaginary cruise from Scotland to Iceland and as well as the possible delights of cruising the Mediterranean in winter. The publisher of the article was Arthur Anderson, who two years later co-founded the Peninsular Steam Company, which later became P&O. In 1844, P&O began offering tickets for Mediterranean cruises and the industry was born.

The Victorians quickly adapted to the change of using ships for pleasure rather than transport. The word "posh" is believed to have originated at this time, with premium tickets offering Port side cabins on the outward journey and Starboard side cabins sailing home. This was because on the voyage to India and the Far East the cabins on the port side got the morning sun and were cool at bedtime, while the starboard side got the afternoon sun and were still hot at bedtime. On the return trip the opposite was true. The cooler cabins were the more desirable and were reserved for the most important and richest passengers. Such tickets were

stamped P.O.S.H. In the 1920s, cruising became the latest trend for the wealthy as they travelled the world expecting the highest standards in food, accommodation and entertainment.

The 1930s saw fierce competition between the large shipping companies of the world. Ships were built of unprecedented luxury, comfort and glamour, each one striving to outdo the others. Ships such as the Queen Elizabeth and the Mauritania were launched at a time when the Blue Riband trophy for the swiftest crossing of the Atlantic became a matter of national pride. While the record was held by Cunard for many years, the record was finally held by the SS United States in 1952 with an average speed of 34.5 knots. The boom period for transatlantic cruise travel was the late 1940s and 1950s as tens of thousands of passengers were carried each year on the great liners. Then in June 1958, the first commercial iet aircraft flew transatlantic, so starting the irreversible change in transatlantic travel and cruising. For many years, it was still cheaper to cross by ship, but this changed with the introduction of the jumbo jet in 1970. Yes, surprisingly, this was over 55 years ago on January 22nd 1970. This development led to the sale of many ships for a fraction of their value resulting in many bankruptcies and ending the golden age of transatlantic cruising.

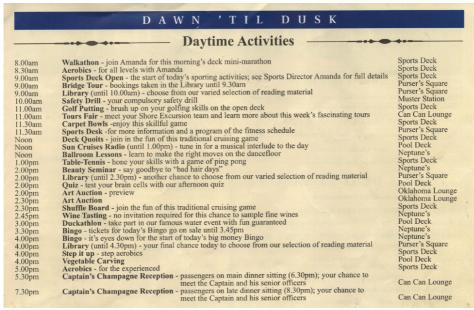
The companies left were forced to find

	TIMES	& TIDES
	Foo	d & Drink
Early Bird Coffee	LIDO CAFE	
Breakfast	LIDO CAFE	7.00am - 10.00am
Breakfast	RESTAURANT	7.30am - 9.30am
Elevenses	LIDO CAFE	11.00am - 11.30am
Lunch	RESTAURANT	
Lunch	LIDO CAFE	
Afternoon Tea	LIDO CAFE	4.00pm - 5.00pm
Alternative Dining	LIDO CAFE	6.30pm - 9.00pm
Dinner (main sitting)	RESTAURANT	6.30pm
Dinner (late sitting)	RESTAURANT	8.30pm
Midnight Buffet (Chocoho	lics) RESTAURANT	

new uses for their ships. This led to the growth of the Caribbean Cruise market and the concept of fly cruising, flying passengers direct to their port of embarkation. This was quickly followed by the expansion of cruise only and cruise and stay packages in the 1990s. Here is an extract from a 1990s cruise ship daily newsletter, with information to passengers (sorry, we should call them cruisers) on the catering and daily

activities.

Things have certainly changed since the 1990s, as the new luxury ships continue to improve facilities to enhance the cruising experience. There has been a movement away from the super liners to the huge cruise ships of today. Despite the potential disaster of COVID, the industry has recovered and grown. To the extent that many



popular destinations such as Barcelona and Venice are imposing reduced limit on the number of cruise ships which can visit.

The biggest liner in the 1940s was the RMS Queen Elizabeth with a gross tonnage of 83000+ tons and capable of carrying 2283 passengers. Today, the biggest cruise ship, which entered service in January 2024 is the aptly named the "Icon of the Seas" with a tonnage of 248,336 and capable of carrying 7600 passengers. This ship is so large it has eight so-called neighbourhoods including the Aquadome and Central Park. It even has an Aquatheatre and the whole dining area with multiple specialised restaurants occupying three whole decks. Certainly, a different experience to that shown in the information provided of the 1990s. The cruise industry continues to expanding rapidly. In fact, there will soon be bigger ship, when the new Royal Caribbean ship, the "Star of the Seas" enters service on August 31st with 20 decks. As of July 2025, 28 new cruise ships are on order each with an announced size of over 140,000 tons. A joint venture between TUI and Royal Caribbean will see a new class of 161,000 ton cruise ships developed for 2026 and beyond. There is obviously great business confidence in the future expansion of the cruise industry. This applies across the board from the bespoke smaller ships to the behemoths of today.



The world's largest cruise ship in 2025 is the Icon of the Seas, operated by Royal Caribbean International. It officially launched in January 2024 and remains the largest cruise ship by gross tonnage and passenger capacity.

Gross tonnage: 248,663, Length: 1,196 feet, Width: 219 feet, Passengers: 5,610 double occupancy.

The future looks bright for cruising. (AB)

Where Did That Come From? (common sayings)

- 1. In the 1400s a law was set forth in England that a man was allowed to beat his wife with a stick no thicker than his thumb.

 Hence we have 'the rule of thumb.'
- 2. Many years ago in Scotland, a new game was invented. It was ruled 'Gentlemen Only, Ladies Forbidden'... and thus the word GOLF entered into the English language.
- 3. Each king in a deck of playing cards represents a great king from history: Spades King David, Hearts Charlemagne, Clubs Alexander the Great, Diamonds Julius Caesar.
- 4. In Shakespeare's time, mattresses were secured on bed frames by ropes. When you pulled on the ropes the mattress tightened, making the bed firmer to sleep on. Hence the phrase... 'goodnight, sleep tight.'
- 5. It was the accepted practice in Babylon 4,000 years ago that for a month after the wedding, the bride's father would supply his son-in-law with all the mead he could drink.

Mead is a honey beer and because their calendar was lunar based, this period was called the honey month, which we know today as the honeymoon.

- 6. In English pubs, ale is ordered by pints and quarts... So in old England, when customers got unruly, the bartender would yell at them 'Mind your pints and quarts, and settle down.' It's where we get the phrase 'mind your P's and Q's'.
- 7. Many years ago in England, pub frequenters had a whistle baked into the rim or handle of their ceramic cups. When they needed a refill, they used the whistle to get some service.

'Wet your whistle' is the phrase inspired by this practice.

8. In 1696, William III of England introduced a property tax that required those living in houses with more than six windows to pay a levy. In order to avoid the tax, house owners would brick up all windows except six. (The Window Tax lasted until 1851, and older houses with bricked-up windows are still a common sight in the U.K.) As the bricked-up windows prevented some rooms from receiving any sunlight, the tax was referred to as 'daylight robbery'!

(Do you know the origins of any sayings? Please let us know and we'll publish them here. Ed)

LETTERS - email us or post to 'freepost livernorth'

Liver North,

On behalf of myself & family I would like to thank you so much for allowing me the accommodation at Beechwood House during my course of Radiotherapy. It would have been a marathon task to make a daily trip & the weather was not in our favour at that time. A special mention to John & Joan Bedlington who were so kind and helpful - true friends, thank you. Kind Regards,

V&AB, Cumbria

Hi LIVErNORTH,

I was wondering if you would consider this photo of my best friend Bertha she is a 4 year old Patterdale Terrier. In 2021 I lost my husband in April and my dog in August. I didn't want to face the world anymore. Bertha saved my life and helped me greatly.

Thank you, 1R, Gateshead



Insurance Matters: Hi, just to inform you:I received 7 quotes using PayingTooMuch
My best quote was from Insureme4 Diamond
£100s cheaper than other quotes and a diamond cover!
Regards,
D, Cramlington

Dear Joan,

Love the new 'coloured 'version of the newsletter. Please accept this cheque towards the cost of producing these welcome booklets. Keep well and thank you for all your efforts.

Yours MS Teesside Hi Joan,

Apologies I have been on leave and have just read the newsletter. It is brilliant and I have been engrossed in it and read it all the way through! It's so well written and the Holiday Woes made me laugh out loud. I am sure your readers thoroughly enjoy it - it's a fantastic read!

Wonderful stuff

Best wishes

JM, Newcastle

Why do we say 'slept like a baby'? Babies wake up every two hours crying. I want to sleep like my cat... 14 hours totally out of it, just the occasional shuffle or stretch.



MESSAGE IN A BOTTLE



Lions Clubs Message in a Bottle is a simple but effective way for people to keep their basic personal and medical details where they can be found in an emergency on a standard form and in a common location – the fridge.

Message in a Bottle helps emergency services personnel to save valuable time in identifying an individual very quickly and knowing if they have any allergies or take special medication.

Paramedics, police, fire-fighters and social services support Lions' life-saving initiative and know to look in the fridge when they see the Message in a Bottle stickers. The initiative provides

peace of mind that prompt and appropriate medical assistance can be provided, and next of kin / emergency contacts can be notified.

For further details and for the form for ordering Lions Message in a Bottle, type this into your browser:

https://lionsclubs.co/Public/message-in-a-bottle/

or phone the Lions on 0121 441 4544

THIS IS HAPPENING RIGHT HERE IN OUR OWN COUNTRY

We Must Stop This Immediately

Have you noticed that stairs are getting steeper. Groceries are heavier and everything is farther away. Yesterday I walked to the corner and I was dumbfounded to discover how long our street had become!

People are less considerate now. They speak in whispers all the time! If you ask them to speak up they just keep repeating themselves, endlessly mouthing the same silent message until they're red in the face! What do they think I am, a lip reader?

I also think they are much younger than I was at the same age. On the other hand, people my own age are so much older than I am. I ran into an old friend the other day and she has aged so much that she didn't even recognize me.

I got to thinking about the poor dear while I was combing my hair this morning, and in doing so, I glanced at my own reflection well, REALLY NOW - even mirrors are not made the way they used to be!

Another thing, everyone drives so fast these days! You're risking life and limb if you happen to pull onto the motorway in front of them. All I can say is, their brakes must wear out awfully fast, the way I see them screech and swerve in my rear view mirror.

Clothing manufacturers are less civilized these days. Why else would they suddenly start labelling a size10 or 12 dress as 18 or 20? Do they think no one notices? The people who make bathroom scales are pulling the same prank. Do they think I actually believe the number I see on that dial? HA! I would never let myself weigh that much! Just who do these people think they're fooling?

I'd like to call up someone in authority to report what's going on but the telephone company is in on the conspiracy too: they've printed the phone books in such small type that no one could ever find a number in there!

All I can do is pass along this warning: **WE ARE UNDER ATTACK!**

Unless something drastic happens, pretty soon everyone will have to suffer these awful indignities.

PLEASE PASS THIS ON TO EVERYONE YOU KNOW AS SOON AS POSSIBLE SO WE CAN GET THIS CONSPIRACY STOPPED!

PS: I am sending this to you in a larger font size, because something has happened to my computer's fonts - they are smaller than they once were.

More memories from our own Joyce Widdis (A proud Geordie now living in Kent)

You suddenly realise you're old...when they measure your height at hospital and you've lost an inch..

Convinced the nurse is standing on the scales behind you too when they weigh you, even though you've taken your teeth out, and are wearing your backless, strapless and flip flops (it's winter) so you weigh less and you step on as lightly as you can.

Your Grandchildren have turned you into a little Nana.. you're shrinking rapidly!

A questionnaire on your IPad requiring your date of birth, you scroll and you scroll and you scroll, me fingers worn out when I eventually find it! There's more to lift and dry under when you get out of the shower (sorry, too much information, I hope you've had your dinner)

You're constantly saying 'Pardon' ... subtitles are a must on the tele! Mind, I'm alreet with Geordie ..

We're going to bed now at the same time we would've been going out years ago..

... and I really know I've lost the plot (me sister too) when I love getting a folded over crisp or a double one in a bag of crisps..

How sad am I!! xx

BATTENING DOON THE HATCHES...

It's the first day of Autumn, well, that would be it then for me mam.. Zip up bootees taken out of the shoe cupboard next to the hearth (me dad called it 'Boot Hill') coal ordered for the coal hoose, flannelette, candy striped sheets taken out of the boiler cupboard (better than those nylon ones from Brentford Nylons that gave you an electric shock and made your hair stand on end like you'd been plugged in).

The army great coat, candlewick bedspread and eiderdown taken out of the bedding chest and Aztec blankets put on our bunk beds bought from the tally man, they never wore out, she still had them on the beds when I got married in the 70's! ...

Not forgetting her winceyette nighties and nylon beatnik knickers.. (remember these? - they were down to the knee - good for her 'Arthuritis').

Quotes of Winston Churchill

Churchill the British statesman, military leader and writer who was Prime Minister from 1940 to 1945 and again from 1951 to 1955 was famous for his many thoughts on all aspects of life. Despite the fact that he died sixty years ago, many are applicable to the modern world. Here are just a few examples:

On Politics,

"Democracy is the worst form of government – except for all the others that have been tried"

"Politics is the ability to foretell what is going to happen tomorrow, next month and next year and to have the ability afterwards to explain it didn't happen"

"There is no such thing as a good tax"

On himself,

"I am always ready to learn, although I do not always like being taught"



"I am fond of pigs. Dogs look up to us. Cats look down on us. Pigs treat us as equals"

On critics,

"A lie gets halfway around the world before the truth has a chance to get its pants on"

"History will be kind to me, for I intend to write it"

And finally on Life,

"Laughter can lighten even the heaviest burden"

"A pessimist sees the difficulty in every opportunity, an optimist sees the opportunity in every difficulty"

"If you are going through hell – keep going"

"We make a living by what we get, but we make a life by what we give"

Even at the end, he was he was still quoting...... His last words were, "I am bored with it all"

After such a life, what a finale!

Our Great North Runners 2025

Just a few pics of some of our 15 Great North Runners this year - some have run for us before and this year, we had a team from the fibrosis labs joining in to raise funds for us. From all accounts, everyone had a brilliant day and the weather wasn't unkind. More photos and facts in the next issue when they have had time to recover!

Well done everyone, we really appreciate your efforts. Look out for our 2026 places coming soon!





£250 prize winners this year:

168 drawn on 24/04/2025, from Carlisle 109 drawn on 17/07/25, from Northumberland 72 drawn on 01/09/25, from Lancs

FOUR MORE £250 DRAWS TO COME THIS YEAR & OUR £2500 JACKPOT

£2500 Jackpot Prize winner

TO BE DRAWN FOR CHRISTMAS 2025

Registered under the GAMBLING ACT 2005 with the city of Newcastle upon Tyne $\,$

LIVErNEWS No. 92 ~ Pg 28 ~ Autumn 2025



8 CASH PRIZES EACH YEAR

*1 JACKPOT of £2,500



* Seven prizes of £250

EVERY PENNY GOES TO PATIENT SUPPORT

199

No admin fees. No paid employees.

100% of your contribution helps others or goes straight into the prize pot

120

Drawn at our meetings throughout the year

174

Help us make life better for liver patients across the UK



77

JOIN NOW!

Fill in the form overleaf - it's quick, easy, and life-changing

LIVERNORTH Lottery application form Your contact details Name Address Postcode Telephone E-mail I confirm that I am over 16 Preferred payment method **BACS**: Account: LIVERNORTH Charities Account **Account no:** 71298290 **Sort code:** 53-61-24 **Ref:** (Your name) Post: Cheque payable to livernorth, minimum of 1 quarterly payment of £13. send to 'freepost LIVERNORTH' Standing order form (please complete the form below) Please pay to Nat West Bank, 2 Tavern Street, Ipswich, Suffolk IP1 3BD Account: LIVERNORTH Charities Account Account no: 71298290 Sort code: 53-61-24 Your bank/building society's details Bank/building society name Bank/building society address Postcode Account name Account No. Sort code Amount to be paid until further notice £52 annually quarterly on 1st Jan, 1st Apr, 1st Jul & 1st Oct Preferred first payment date (or ASAP) Signature Date

Post the form back to us in an envelope addressed to: 'freepost LIVERNORTH'

HELEN'S HOWLERS

Most of the funnies you see in these pages are sent from our friends and colleagues (like Billy Venus) or are freely circulating via the internet. We are constantly on the look out for more material so please send in anything you have or have heard whilst out and about. It doesn't have to be 'professional' – your witty observations on life are always welcome. If you're feeling a bit low - read on... As they say, laughter is the best medicine!

Thanks for this issue go to our many facebook friends, LIVERNORTH colleagues and 'the internet'.

WARNING - AWFUL JOKES, SOME UNSUITABLE FOR CHILDREN - YOU HAVE BEEN TOLD!

Never buy flowers from a monk. Only you can prevent florist friars.

Due to the hot weather forecast along the south coast this weekend, the local authorities have requested that people who are out and about wear light clothing and carry at least a litre of cold water.

They have also said it is also ok to go for a dip in the sea in Sussex and Hampshire although they wouldn't in Dorset!

My first girlfriend left me because I couldn't play leapfrog properly. I don't think I ever got over her.

I entered a competition the other month and today I found out I've won a year's supply of marmite yes...one jar.

I've just been reading about Bruce Lee's daughter, Simone. She works in mobile phones. Ed..Billy, you've outdone yourself this time - could be your worst joke ever.

I'm curious... did the guy that

started the knock knock jokes ever get the nobell peace prize?

Me looking at a barn full of feed: 'Who's all that for?' Farmer: 'The cattle eat it' Me: 'Wow, that's one hungry cat!'

To all the people who said it's OK to let your pet sleep on your bed, my goldfish is now dead.

Cowboys would put a lantern on their saddles so they could see their way home at night. It was an early version of saddle light navigation.

There's an online group for victims of tailgateing, I've been following them closely.

I own two shirts and some neck wear that used to belong to a guy who was in the Mamas & Papas. All the sleeves are Brown and the tie is Grey.

I have been banned by the local athletics club.

I have won the 10 k walking race 3

years running.

There's a display of medieval torture racks in our town tomorrow. I might pop along - just to stretch my legs.

My ex-girlfriend was the voice of the Speaking Clock. After we parted she wouldn't even give me the time of day.

I used to go out with a girl called Sue Denim, until I found out that it wasn't her real name.

My girlfriend asked me if I would like to have children one day. I said yes, OK, one day shouldn't be too bad but no longer than that.

A wealthy Arab was dying and needed a blood transfusion to save his life. His blood group was very rare and a call went out all over the world to try and find a donor. Eventually, a Scotsman was found who had the same blood group and he agreed to donate a unit of blood. It saved the Arab's life and the Arab gave him a new top spec BMW, jewels and cash. The Arab did OK for a while and then fell poorly again so the call for blood went out. The Scotsman immediately volunteered and donated another unit of blood. This time when the Arab recovered he

gave the Scotsman some flowers and a tin of Quality Street. The Scotsman was surprised at this and said to the Arab 'Thank you for these but when I gave you some blood before you gave me a new car, some jewels and cash. I don't want to seem ungrateful but why the change?' The Arab replied 'Aye laddie, ah ken ah did but noo ah've got Scottish blood in ma veins'.

Cars these days have too many gadgets. I tried to reverse, and it played a video of somebody getting run over by a car.

When I started as a bank robber I used to cover my face in filo pastry, chopped nuts and honey until the cashier pointed out it was actually 'balaclava'.

I cooked a Sunday Roast for Lionel Richie today. He asked once, twice, three times for gravy.

Just met this guy up the local hospital. He injured himself playing hide and seek, he's in ICU.

If Honor Blackman had married Richard Todd, would she have been lonely for the rest of her life?

When I add up how much I've spent on contortionist lessons I could kick myself!

Railway thief arrested again by Police, he's got a track record of these crimes.

My wife is fed up with me over my obsession with sausages. I said to her "how about I take you away for a few days to take our minds off this problem.? She agreed. A nice few days in Cumberland and Lincolnshire should do the trick.

Just in my local church, they asked me if I would like to join the Bell Ringers group, at the moment they are just showing me the ropes..

The cheek of it! Just caught someone pinching strawberries and raspberries out of my garden, caught him red handed.

How do so many people get simple sayings wrong? Answers on the back of a coastguard please. Tanks in advance.

KILT: it's what happened to the last person who called it a skirt!

I once dated a girl who broke up with me because I only have 8 toes. Yes, she was lack-toes intolerant.

I've started telling everyone about the benefits of eating dried grapes. it's all about raisin awareness. I've started investing in stocks: beef, vegetable, chicken. One day I hope to be a bouillianaire.

If you boil a funny bone, it becomes a laughing stock. Now that's humerus.

I accidentally rubbed ketchup in my eyes. Now I have Heinzsight.

Scientifically, a raven has 17 primary wing feathers; the big ones at the end of the wing are called pinion feathers. A crow has only 16. Therefore, the difference between a raven and a crow is only a matter of a pinion.

Singing in the shower is fine until you get soap in your mouth. Then it's a soap opera.

The biggest joke on mankind is that computers have started asking humans to prove that they are not robots!

I used to run a dating agency for chickens but it went out of business...I just couldn't make hens meet!

Terrible jokes as usual but do you like them? Let us know please and... How about a book of these jokes to raise funds? Good idea or not?

SOME PONDERINGS

My ducks are certainly not in a row. I don't even know where some of them are. And, I'm sure one of them is a pigeon

If a bottle of poison reaches its expiration date, is it more poisonous or is it no longer poisonous?

Which letter is silent in the word "Scent," the S or the C?

Do twins ever realize that one of them is unplanned?

Every time you clean something, you just make something else dirty.

The word "swims" upside-down is still "swims".

Over 100 years ago, everyone owned a horse and only the rich had cars. Today everyone has cars and only the rich own horses.

If people evolved from monkeys, why are monkeys still around?

Why is there a 'D' in fridge, but not in refrigerator?

I'm responsible for what I say, not for what you understand.

Common sense is like deodorant. The people who need it the most never use it.

My tolerance for idiots is extremely low

these days. I used to have some immunity built up, but obviously, there's a new strain out there.

It's not my age that bothers me - it's the side effects.

I'm not saying I'm old and worn out, but I make sure I'm nowhere near the curb on trash day.

As I watch this generation try and rewrite our history, I'm sure of one thing: it will be misspelled and have no punctuation.

As I've got older, people think I've become lazy. The truth is I'm just being more energy-efficient.

I haven't got anything done today. I've been in the Produce Department trying to open this stupid plastic bag.

I want to be 18 again and ruin my life differently. I have new ideas

I'm on two simultaneous diets. I wasn't getting enough food on one.

Hard to believe I once had a phone attached to a wall, and when it rang, I picked it up without knowing who was calling.

Have you any 'Points to Ponder?' please let us have them if you have - it's good to know if others feel the same way as you do.

Where has the LIVErNEWS been of late?



Well here is the latest update. The Summer Edition has been sampling some history and culture and we have been provided with the actual ticket as proof. As you can see, the NEWS has been visiting the Acropolis in Athens. The rocky outcrop stands at 490 feet above sea level. It is the site of several buildings of historical significance. The most famous of which is the

impressive Parthenon standing 45 feet high with a dimension of 98 X 63 feet.

The Acropolis has been inhabited as far back as the Neolithic period and through the ages has seen different temples and buildings constructed including the Parthenon. Numerous invasions have resulted in significant changes. The Parthenon was built in the 5th century BC and was dedicated to the goddess Athena giving thanks for the Greeks' victory over the Persians. Over the years, the building has seen many changes.



In the 6th century, it was converted into Christian church dedicated to the Virgin Mary. After the Ottoman conquest in the mid 15th century it became a Mosque. Then in the Morean War between the Ottoman Empire and the Republic of Venice, a bomb landed on the Parthenon which was being used a a munitions dump. The resulting explosion caused significant damage. In relatively modern times it is better known for the removal of the Elgin Marbles. The marble friezes were removed by the seventh Earl of Elgin from 1800 to 1805 and shipped to England. An action which is still very controversial to this day.

Many thanks for this input. If you see the LIVErNEWS out and about, whether local or abroad. Please send us a picture and some brief notes on the location.

NURSING QUIZ - what's right, what's wrong? Tick the box 🗹								
What is the normal resting heart rate	for	an adult?	1					
20 to 40 beats per minute	A	40 to 60 beats per minute	В					
60 to 100 beats per minute x		Over 100 beats per minute	D					
•		·						
A nurse is caring for a patient with N	1RSA	A, so wearing a gown and gloves. Wh	ien					
should they dispose of the gown and	d glov	ves to go care for another patient?	2					
In the hallway	A	In the current patient's room x	B					
In the break room	C	In the next patient's room before						
		touching them						
After receiving an antibiotic, a patier	nt is o	developing hives. What are they						
experiencing?			3					
Drug allergy x	A	Drug idiosyncrocasy	B					
Drug tolerance	(C)	Drug synergism	(D)					
Taran a sanata a san								
When should a nurse weigh a patient	$\overline{}$		4					
Right after eating	(A)	2 to 3 hours after eating	(B)					
At the same time every day x	C	Right when they wake up	D					
If a resident is suffering from chest pone?	oains,		5					
Call for immediate help	A	Offer support and reassurance	B					
Place them in a downright position		Remain and act calm						
and have them take small sips of wat	er. x							
When doing documentation patient relevant?	care,	which of the following qualities are	6					
Thoroughness	A	Accuracy	B					
Organization	C	All of the above x	D					
Face of the second seco	_							
Which of the following would be the	$\overline{}$		7					
Heat compression	(A)	Moist bandages	B					
Dry bandage pressure	C	Cold compression x	D					
How long should a nurse wait before they just finished a cold drink?	taki	ng a patient's temperature orally afte	er 8					
Immediately, as a cold drink would	A	3 to 5 minutes after drink was	В					
not affect an oral thermometer.		finished						
15 minutes after drink was finished	C	20 to 30 minutes after drink was	D					

What is t	he normal	internal bo	ody temper	rature?			9			
98.6°F (3			Á		(37.7°C)		В			
96.08°F	(35.6°C)		C	100.4°F (38°C)						
What is h	nypertensio	on a medic	al term for	?			10			
High bloo	High blood pressure x Aligh anxiety									
Tense mu	ıscles		C	High str	ess		D			
-					e, which of	f the follow				
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What is the last step in making a bed? Move the call light A Mitering the corners B										
			(A)				ed D			
Wash your hands. x Adjusting the height of the bed										
HOW DID YOU DO? CHECK YOUR SCORE HERE										
J:91	A :31	14: B	13: B	12: C	11: C	A:01	A :6			
3 :8	۷: D	G: D	2: C	7 ∶C	A :£	2: B	J:1			
	- -		VS No. 92 ~ I							

The Pub Quiz or if you prefer the Barista Café Quiz No 13

- 1. Which animal lives in a drey?
- 2. What decade did Concorde enter passenger service?
- 3. What is the tallest grass in the world which can grow up to 90cm a day?
- 4. What type of product is listed on the website Zoopla?
- 5. What nationality is the fictional detective Hercule Poirot?
- 6. Which US state is nicknamed the "Sunshine State"?
- 7. What Treaty ended World War I?
- 8. What metal is liquid at room temperature?
- 9. What term is used for a word whose spelling is the same forwards and backwards?
- 10. Which actor in known for the line, "I'll be back".
- 11. What term is used to describe a robot which is used to look and behave as a human?
- 12. It is published every month, but what does CPI stand for?
- 13. What is the name of the Al chatbot released by OpenAl in late 2022?
- 14. Which European country has the most islands?
- 15. What type of nuts are traditionally used in Pesto?
- 16. Which film features a ship called, "the Black Pearl"?
- 17. What is the oldest soap opera on UK TV?
- 18. In which heavy metal band was Ozzy Osbourne the lead singer?
- 19. Authentic Caviar is obtained from which fish?
- 20. What can you hold in your left hand but never in your right?

(Answers below) lerminator, way back in 1984. Your right hand. .02 10. Arnold Schwarzenegger in Sturgeon. .61 RISCK Sabbath. .81 Palindrome, for example level or Coronation Street. ٦٢. 8. Mercury. Pirates of the Caribbean. .91 .9191 Pine Muts .61 The Treaty of Versailles, signed in a million! Sweden, which has over a quarter of ٦ď. Florida. .9 tor generating human like text. 5. Belgium. 4. Houses. ChatGPT which is now widely known .51 Bamboo. details the current inflation Rate. Consumer Prices Index, which 2. The 1970s 15. Android Squirrel

How have you done? Up to 6 correct – Quiz Enthusiast, 8 – Quiz Hot Shot, 12 – Quiz Maestro, 16 - Quiz Supremo, 18 – Quiz Genius, 20 – Quiz Perfect – take a bow!.

UIOLI (Use It Or Lose It) AUTUMN 2025 - ISSUE 92

SUDOKU... With the kind permission of the creator (Wayne Gould of Pappocom). You don't need to do any arithmetic or be good at maths - all it takes is logic so please have a go - it will help to keep your brain active. Just fill in the missing numbers in every square, row & column using 1 to 9 without repeating any. There is strict copyright so they may not be redistributed in any way whatsoever although you can of course photocopy the page if you don't want to spoil your copy of LIVErNEWS. Good Luck!

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Insurance Matters - updated 15/6/2025

Supporters report having been able to get reasonably priced holiday cover here:

Able2travel	01483 806826
Age Co	0800 0328249
AVIVA	0345 0308715
Bib Insurance Brokers (www.bibinsurance.co.uk) Darlington	01325 353888
City Bond	0333 2070506
Churchill*	_0800 0326534
Direct Travel*	0330 8803600
Freedom ^	01223 446914
Leisure Care Insurance	0204 5994659
Post Office	0800 1387777
RIAS*	_0345 1655799
SAGA	_0800 0569200
Sainsbury's	_0345 3052623
Sladdin & Co Ltd. (brokers)	01422 362614
www.lnsurancewith.com_	_0333 0051066
www.miatravelinsurance.co.uk ^	0800 9993333
www.PayingTooMuch.com	_01243 784000
www.staysure.co.uk	_0333 0068033
https://www.world-first.co.uk/	_0345 9080161
https://www.freespirittravelinsurance.com/medical-conditions/liver/	02392 419080

^{*} not TX patients - please check with the others also.

Please help to keep this page current and useful by letting us know of your own experiences both good and bad. You can email us at info@livernorth.org.uk or drop us a line at our Freepost address 'freepost livernorth' no stamp necessary..

The latest version of this page is always available as a PDF file. Email us and ask for a copy: info@livernorth.org.uk

All our leaflets including No.16 'Travel Insurance for Liver Patients' are available to read online by scanning the QR code on the right with your smartphone.



[^] specifically includes cover for declared pre-existing medical conditions.

<u>Information Leaflets Available (read or download):</u>

- 1. Liver Patient Support
- 2. Accommodation for patients & families
- 3. Autoimmune Hepatitis
- 4. Alcohol and Liver Disease
- 5. Looking After Your Liver
- 6. Primary Biliary Cholangitis (PBC)
- 7. Coping With Stress
- 8. Primary Liver Cancer
- 9. You and Your Consultant
- 10. Primary Sclerosing Cholangitis (PSC)
- 11. Lifestyle and your Liver (MASLD/NAFLD)
- 12. Liver Disease
- 13. Skin Care for Liver Patients
- 14. Diet and Liver Disease
- 14a. Nutrition in Liver Disease
- 15. Hepatitis C
- 16. Travel Insurance for Liver Patients
- 17. Hepatitis E
- 18. Fatigue in Liver Patients/A Patient's Journey
- 19. Scanning a short guide (aka Understanding Tests)
- 20. Liver Cirrhosis Self Management Toolkit *
- 21. Exercise & Osteoporosis in Liver Patients
- 22. Hepatic Encephalopathy
- 23. Our Livers, Our Lives
- 25. Allowances (DLA & PIP)
- 26. Compensated Liver Cirrhosis
- 27. Hepatitis B
- 30. Wellness Walks several available***
- * only from your healthcare professional email for more information
- ** Patient & Carer art online only online.
- *** Printed copies available on request.

How to get information leaflets:

1. Website: http://www.livernorth.org.uk/pages/factsheet.htm

2. Email us: info@livernorth.org.uk

3. Phone/FAX: 0191 3702961

4. Facebook pm us: https://www.facebook.com/livernorth/

5. Write to us: Freepost LIVERNORTH







HELPLINE

If you have any concerns about liver disease and would like to talk to someone, please call any of the numbers below:

0191 3702961 **JOAN** 0735 9537737 0781 5071918 FIONA 0191 4131827

FOR ALCOHOL MISUSE CALL: PAUL 0778 4153587

Get free Liver Patient and Carer Support Information:

- Download from our website (www.livernorth.org.uk)
- Email us (info@livernorth.org.uk)
- Phone us (0191 3702961)
- Write to us at: freepost LIVERNORTH
- Message us (https://www.facebook.com/livernorth/)
- Ask to join our facebook LIVErNORTH MEMBER CHAT group
- Scan our website QR code here with your mobile phone



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