

Towards a world free from meningitis and septicaemia

Meningitis Research Foundation Annual Review 2001



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| Chairman and Chief Executive | ■ |
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Meningitis Research Foundation



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Not pictured:
David Moëd

Vision statement

Meningitis Research Foundation's vision is a world free from meningitis and septicaemia

Mission statement

- Meningitis Research Foundation fights death and disability from meningitis and septicaemia, and supports people affected by these diseases
- The Foundation funds vital scientific research into the prevention, detection and treatment of meningitis and septicaemia, raises awareness of the diseases, and offers support through in-depth information and befriending

Charitable objects

- The promotion of research into the causes and treatment of all forms of meningitis and associated infections
- Promoting the dissemination of knowledge gained by such research
- To advance the education of the public in the causes, treatment and prevention of meningitis and associated infections
- To help relieve the distress to individuals and families caused by death and damage through meningitis and associated infections

Chief Executive's message

Since I joined Meningitis Research Foundation, I have seen huge changes in the prevalence of meningitis and septicaemia, mirrored by changes within the Charity to enable us to meet the many challenges.



▲ Denise Vaughan

The main cause of meningitis and septicaemia in these islands – Group B meningococcal infection – is still rising. In the last year Group C continued to increase in people who have not been immunised, and W135, a previously rare form of the disease, also doubled over the previous year. Overall, thousands of people in the UK and Ireland have been affected. Meningitis and septicaemia can still kill a healthy person within hours of the appearance of the first symptoms, leaving many more with disabilities.

That is why Meningitis Research Foundation's aim to eradicate meningitis and septicaemia continues to be as important and relevant as ever. Some highlights of the last year include:

- financially supporting over 30 research projects, including 13 into the development of a Group B meningococcal vaccine
- adding 17 new research projects to the programme
- producing a new booklet for General Practitioners, endorsed by the British Medical Association and the Irish College of General Practitioners
- distributing a comprehensive resource for people recovering from meningitis and septicaemia, their families and appropriate medical professionals
- making all of our public and health sector information materials freely available to appropriate health professionals at key conferences
- continuing to use the award winning **Meningitis Baby Watch** and **Get it Sussed** resources as a focus for major campaigns
- recording and transmitting a new 30 second "infomercial" of signs and symptoms
- translating life-saving information into nine languages
- publicising new recommendations for vaccination for pilgrims to Mecca
- changing the Republic of Ireland helpline service to a LoCall tariff, and appointing a new Helpline Officer in Dublin
- increasing membership of the Foundation
- launching a nationwide Befriender Training Programme, to help those already affected by meningitis and septicaemia.

In the new financial year, Meningitis Research Foundation will maintain our programmes of work, and in particular will:

- allocate a further £1,500,000 to scientific research
- attend and organise appropriate conferences and exhibitions and ensure research outcomes are published in scientific journals to convey up-to-date information on the diseases
- work with ambulance personnel to ensure they have appropriate resources to handle new recommendations on meningococcal disease
- ensure that results emerging from our national study of meningococcal disease are communicated to appropriate health professionals
- extend the number of languages we produce information in and record audio tape versions
- produce a signs and symptoms video
- distribute the new booklet for GPs to all surgeries in the UK and Ireland
- build on the success of the Befriender Training Programme.

The support the Foundation has received from all sectors of the community during 2000/01 has been tremendous. I hope many more people will join us in the coming year to work together towards a world free from meningitis and septicaemia.

Chairman's message

This year has seen considerable progress towards Meningitis Research Foundation's vision of a world free from meningitis and septicaemia, but the fight is far from being won.



▲ Howard Bell

The Foundation's work during the year was conducted against the backdrop of the introduction of a vaccine against one form of meningitis and septicaemia – Group C meningococcal disease. The vaccine has had a dramatic effect on reducing the number of cases, resulting in young lives being saved.

However, the good news about Group C meningococcal disease has been offset by a rise in other forms of meningitis and septicaemia. Therefore, as well as spending more than ever before on vital research into prevention, detection and treatment, we have continued to emphasise, through our awareness programme, that meningitis and associated infections remain a potent and increasing threat to health.

During the year the Trustees increased direct charitable expenditure to £1,693,553 on the Foundation's research, awareness and support programmes, and in addition earmarked a further £420,000 for a provisionally approved research project to conduct a trial of a new treatment for meningitis and septicaemia.

Significant and exciting advances have been made in all aspects of the work. The innovative approaches that have been taken to achieve our charitable objects cost-effectively are detailed throughout this Review, and I hope you will find it interesting reading.

I became a member of the Foundation following the death of my only daughter, Amanda, a law student whose young life was full of happiness and promise, and it is because most of the Board of Trustees have themselves been affected by these diseases that we think it is so important to offer support where needed to our members, and give people opportunities to fight back in practical ways.

The fact that we are on the right track is brought home to us by the increasing backing we receive from the public, and by the awards that provide formal recognition for the work of the Charity. The Board of Trustees was delighted during the year when the Foundation won both the Patient Association of the Year and Launch of the Year for **Meningitis Baby Watch** at the prestigious Pharmaceutical Marketing Communiqué Awards, as well as being short-listed in the Charity Awards 2000 for Excellence in Charity Management.

The thousands of people who freely offer help, support, expertise and energy through philanthropy and volunteering to help make our vision a reality have made these awards possible. Our supporters remain idealistic, committed and determined in support of this cause, and on behalf of the Trustees of Meningitis Research Foundation, I thank each and every one of you.

Howard Bell

Denise Vaughan

Progress in Research

Meningitis Research Foundation supports a high quality and innovative research programme into the prevention, detection and treatment of meningitis and septicaemia with the ultimate goal of eradicating these diseases.

Prevention

- The development of effective vaccines providing universal protection represents the best prospect for preventing meningitis and septicaemia.
- Group B meningococcal disease, and other equally deadly forms of meningitis and septicaemia, are still not vaccine-preventable.
- The projects detailed below show some of the work into a vaccine for Group B meningococcal disease, and that prevention research is not just limited to vaccine development.

Could safe mimics of meningococcal sugars function as vaccine?

Royal Free Hospital, London.

The sugar-based toxin that meningococcal bacteria release into the bloodstream has potential as a vaccine. However, sugars don't make very good vaccines, while proteins do. The project aims to find proteins that are completely non-toxic, but which imitate the structure of this sugar-based toxin. A protein-based vaccine would have the potential to give long-term protection against Group B meningococcal meningitis and septicaemia.

Gathering evidence for national strategies in the UK and Republic of Ireland to prevent GBS, the leading cause of meningitis in newborn babies.

St George's Hospital Medical School, London.

Group B Streptococcal Disease (GBS) is the main cause of life-threatening meningitis, septicaemia and pneumonia in newborn babies. Many countries have strategies for preventing GBS, for example by giving antibiotics to high-risk mothers during labour. In the UK and Ireland, national strategies are sorely needed, but these must be evidence-based. This two-part project will provide the evidence base necessary. The research aims to have a real impact on the eventual reduction of GBS disease and ultimately save many young lives.

- Research expenditure has continued its year on year rise, with an extra £1,058,628 spent in 2000/01
- At the end of the financial year, the research programme consisted of 29 projects with a total value of £4,562,869
- Full summaries of all projects in the current programme are available at Meningitis Research Foundation's website www.meningitis.org, or by contacting any Foundation Office
- Findings from Meningitis Research Foundation funded projects were published in eight peer reviewed scientific journals during the year, and presentations made at 14 conferences worldwide

Detection

- Speedy identification of the cause of infection can enable doctors to make life-saving decisions about the treatment of individual patients.
- One example from our research programme illustrates some of the work that is being done to speed up identification.

Developing a new technique for rapid diagnosis of TB meningitis.

Cardiff Public Health Laboratory.

Although not a common cause of meningitis, tuberculosis infection is on the rise again. TB meningitis is even more difficult to diagnose than other types of meningitis because it is not sudden—its onset is subtle and gradual. Existing techniques for laboratory diagnosis of TB meningitis are slow—it can take weeks to get a result. This project aims to use DNA techniques to develop a rapid and sensitive test for TB meningitis.

Treatment

- The Foundation's research strategy aims at finding new therapies and optimising the treatment of patients with meningitis and septicaemia.
- Outcomes from the confidential enquiry shown below will inform all the Foundation's resources for health professionals and the public. Emerging findings from the study provided the basis for our new Guidance Notes for GPs.

Health care delivery and outcome: a confidential enquiry into meningococcal disease in children.

Imperial College School of Medicine at St Mary's Hospital and Royal College of Paediatrics and Child Health, London.

This is the first study of meningococcal disease in children that has attempted to define the pathway of the disease and determine critical stages at which recognition and treatment can change the course of the illness and save the life of a child. By collecting information from parents, GPs and hospitals, researchers are compiling a comprehensive picture of the way meningococcal disease is recognised. Strategies for informing the public about the signs and symptoms of the disease are also considered. The researchers aim to show which aspects of care are life-saving and which are associated with death and disability. This project has been supported by a grant from the Community Fund.



▲ Caroline Corless preparing samples at the PHLS Meningococcal Reference Unit in Manchester

Researchers are invited to submit proposals for either:

- project grants of up to £150,000 per annum for up to five years
- small project grants of up to £30,000 per annum for up to three years

Structured peer review is used to evaluate each research application according to principles set out by the Association of Medical Research Charities, using the following process:

1. Preliminary Proposal

2. Formal Application

3. Assessment by External Referees

- Over 250 internationally renowned experts act as external referees

4. Assessment by Scientific Advisory Panel, twice a year

- Members of the Scientific Advisory Panel are eminent scientists and clinicians, who freely give their time and expertise:

- Dr Michael J. Corbel BSc PhD DSc (Med) FIBiol MRCPPath (Chairman)

- Professor Harold Lambert MB BChir MD FRCP FRCPCH FRCPPath FFPHM RCP (Vice Chairman)

- Dr E. Graham Davies MA MB BChir FRCP MRCPCH

- Dr David Goldblatt MRCP PhD

- Professor Brian Greenwood FRS CBE FRCP

- Professor Donald J. Jeffries BSc MB BS FRCPPath (resigned May 2000)

- Dr Edward Kaczmarek MBBS Dip.Bact MRCPPath FRCPPath

- Professor Andrew Murphy MD DIMC HDOC DCH DOBs MICGP MRCP (appointed July 2000)

- Dr Mary Ramsay BSc MB BS MRCP MSc MFPHM

- Dr Andrew Riordan MD MRCP FRCPCH DTM&H (joining Panel in 2001/2)

- Professor Ian S. Roberts BSc PhD (appointed May 2000)

- Dr Peter Rudd MA MB BChir MD FRCP FRCPCH DCH (resigned March 2001)

- Dr Alistair P. J. Thomson MA MB BChir FRCP FRCPCH DCH DRCOG

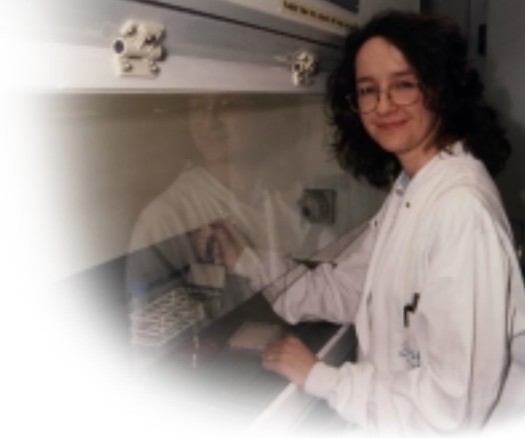
- Professor Peter Williams BSc PhD (joining Panel in 2001/2)

5. Recommendations from Scientific Advisory Panel to the Board of Trustees

6. Final Decision by the Board of Trustees on recommendation from the Panel.

- During 2000/01, seventeen new research projects were accepted onto the programme:

| Title | Location |
|--|--|
| Trial of Group B meningococcal vaccines in adolescents | PHLS, Communicable Surveillance Centre, London |
| Natural development of immunity to meningococcal bacteria | University of Bristol |
| How do meningococcal bacteria persist in the back of the nose and throat? A genetic study | University of Oxford |
| Study of meningococcal bacteria's antibody-buster: new possibilities for preventing or reducing damage from meningitis and septicaemia | University of Sheffield |
| Investigating the scientific basis for increased susceptibility to meningococcal disease after viral and other illnesses | University of Bristol |
| Does the new Men C vaccine work in premature babies when given with other infant immunisations? | Portsmouth Hospitals NHS Trust |
| Immunisation without needles? A potential new vaccine against pneumococcal meningitis | Brigham and Women's Hospital, Boston, USA |
| Natural development of immunity to pneumococcal bacteria | National Public Health Institute, Helsinki, Finland |
| Gathering evidence for national strategies to prevent meningitis and septicaemia in newborn babies in the UK and Ireland | St George's Hospital Medical School, London |
| A new generation of techniques for detailed identification of bacteria that cause meningitis and septicaemia | PHLS, Meningococcal Reference Unit, Manchester |
| Developing a new technique for rapid diagnosis of TB meningitis | Cardiff Public Health Laboratory |
| Why do some children develop more severe meningococcal disease than others? | Alderhey Children's Hospital, Liverpool |
| The crucial role of a natural messenger, TNF, in severe cases of meningococcal septicaemia – potential for new therapy to stop septicaemia | Imperial College School of Medicine at Hammersmith Hospital, London |
| New genetic factors in meningococcal disease: establishing a national DNA collection from patients | University of Sheffield and Meningococcal Reference Unit, Manchester |
| A trial of steroids and intramuscular injection of antibiotics in adults with bacterial meningitis | University of Malawi and Liverpool School of Tropical Medicine |
| A study of brain-cell damage in bacterial meningitis to identify new treatment strategies | University of Bern, Switzerland |
| How does pneumococcal meningitis trigger brain-cell death? | Humboldt University, Germany |



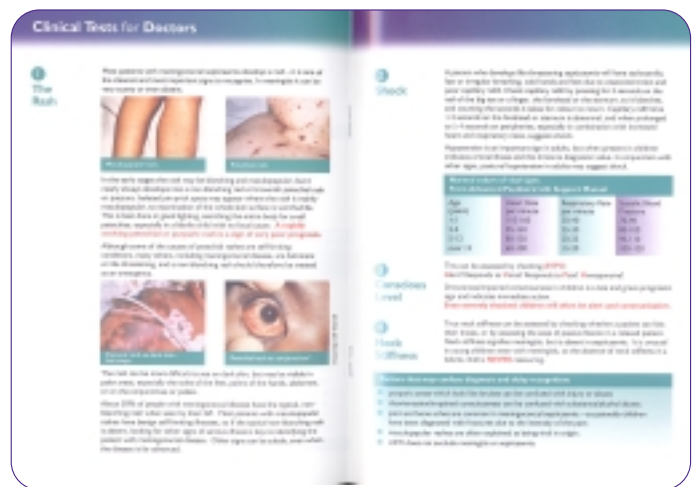
Increasing Awareness



Until all major forms of meningitis and septicaemia are preventable by vaccines, our awareness programme will continue to highlight the importance of prompt recognition of symptoms and early and effective treatment.

Communicating these messages effectively relies on the whole of the Foundation working together:

- Trustees and Staff** – developing cost-effective plans to keep people informed of the signs and symptoms and providing a 24 hour helpline service
- Health professionals** – endorsing and disseminating information and providing expert input into our wide range of awareness materials
- Members** – creating media interest by sharing their experiences of meningitis and septicaemia, playing a key role in distributing information and, along with other supporters of the Foundation, providing the finance
- Patrons** – giving their time and expertise freely



▲ Inside pages from the Foundation's new booklet for General Practitioners

By working together to achieve our vision of a world free from meningitis and septicaemia, in 2000/01 the Foundation:

Created a new TV "infomercial"

- Presented by GMTV doctor and Patron, Dr Hilary Jones
- Launched during the winter months when cases are at their height
- Emphasised the symptoms of meningitis and septicaemia and the speed with which they can take hold
- Sent to every TV station in the UK and Ireland
- Foundation members' assistance helped to produce both regional and national media coverage for the launch of the resource
- Produced an extraordinary response, with over 1,500 calls taken by the helpline team on the launch day alone
- Hundreds of subsequent airings resulted in millions of viewers receiving messages about the diseases and the Foundation's helpline

Completely revised our materials for GPs

- The findings of an ongoing Foundation funded research project, **Health care delivery and outcome: a confidential enquiry into meningococcal disease in children**, provided the impetus
- The research provided a constant stream of knowledge to inform our work, particularly highlighting key points to improve diagnosis and treatment
- Extensive feedback from experts and testing among GPs resulted in a booklet and easy reference wall chart
- Materials received British Medical Association and Irish College of General Practitioners endorsement prior to distribution to every GP practice in the UK and Ireland



Launched the 2000/01 Awareness Campaign

- Loftus Road, the home of Queens Park Rangers Football Club, was an apt location as one of their players, George Kulscar, had had viral meningitis
- George joined Foundation staff, members and trustees in not only raising awareness of **Meningitis Baby Watch** and **Get it Sussed**, but also to give his support to the launch of the Charity's translation of information into nine languages
- The awareness campaign was simultaneously launched at the Ethnic Minority Health Action Project in Glasgow and the Indian Community Centre in Belfast
- **Get it Sussed** - the Foundation's award winning resource specifically tailored for young adults
- **Get it Sussed** was distributed extensively to students at colleges and universities
- **Meningitis Baby Watch**, another award winning resource, was first launched in a campaign spearheaded by Patrons Victoria Beckham and Dr Hilary Jones, and aimed at parents and carers of babies and children who are too young to say how ill they may be feeling
- In 2000/01 **Meningitis Baby Watch** was distributed to all GP practices in the UK and public health nurses in Ireland



▲ Footballer George Kulscar and younger members of the Foundation at the launch of the awareness campaign

Provided information in languages other than English

- Promoted among health professionals and community workers
- Available primarily through the website www.meningitis.org in:
 - Arabic
 - Bengali (Sylheti)
 - Chinese (traditional)
 - Gujarati
 - Hindi
 - Punjabi
 - Somali
 - Urdu
 - Vietnamese
- The addition of these languages helped to ensure that, once again, the website was rated as the top meningitis site in the world by the independent, non-profit making Health on the Net Foundation out of over 1,000 sites
- Later in the year, the website translations became a vital vehicle for alerting people to a rare type of meningitis – W135 – which affected people travelling from the UK to Mecca for the Hajj pilgrimage and their families

Highlighting the Helpline

Meningitis Research Foundation's 24 hour helpline plays a vital role in raising public awareness of meningitis and septicaemia, and provides support for people affected.

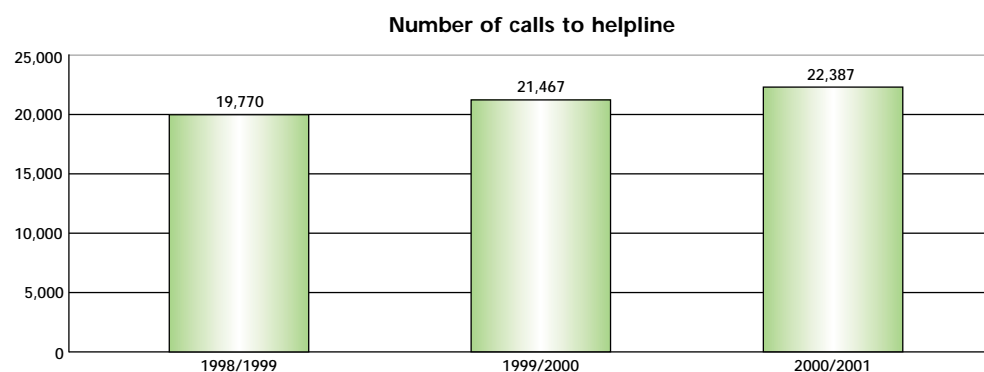
- During office hours the helpline is staffed by the Foundation's team of trained staff
- At all other times the helpline is staffed by qualified nurses
- All helpline staff and nurses receive on-going training and development, and work to guidelines set out in the Foundation's Helpline Manual
- Meningitis Research Foundation is a member of the Telephone Helplines Association and works to its high standards.



The 24 hour helpline:

- provides clear and accessible information on meningitis and septicaemia to the general public to help prevent death and disability resulting from these infections
- works with health professionals, schools and employers who are managing cases of meningitis and septicaemia to ensure that people get the information they need without causing unnecessary fears
- offers information, befriending and support to families affected by meningitis and septicaemia
- is provided as a *Freefone* service in the UK – 080 8800 3344. During the last year a *LoCall* phone tariff was introduced in the Republic of Ireland – 1890 41 33 44.

In 2000/2001, the Charity's helpline was, again, able to answer a record number of calls:



- Every person who calls the Foundation's helpline is also offered written information on meningitis and septicaemia. Packs are made up from the wide range of Foundation literature and tailored to the individual needs of the caller
- During 2000/01 the helpline was able to offer a new resource to callers, **Meningitis and Septicaemia: What Happens Next?**, a booklet about the after effects that can occur. Developed with an educational grant from Wyeth Vaccines, the booklet was produced in consultation with experts in a number of fields. Members of the Foundation made an outstanding contribution to this much needed resource, by providing case studies of their and their family's experiences of dealing with the physical, psychological and emotional consequences of the diseases. As well as being offered to callers to the helpline and Foundation members, the booklet was also widely circulated to health professionals.



▲ Member Annette Walker and her daughter Kiera



▲ From the new booklet **Meningitis and Septicaemia: What Happens Next?** A hearing test is important for people who have had meningitis and septicaemia

Working with Members



Over 3,700 individuals and families, almost all of whom have personal experience of meningitis and septicaemia, are members of Meningitis Research Foundation. They form the heart of the Charity.

Members support and are supported by the Foundation. As well as being active donors, they participate in the organisation's work by:

Sharing their experience of meningitis and septicaemia with others affected by the diseases

A three-year grant from Children in Need has enabled the Foundation to set up its National Befriender Training Programme. The programme provides a way for our members to give support to other people who have had similar experiences - often to those who have been more recently affected.

Jeni Tucker, whose daughter Kate died in October 1995 aged 31 of meningococcal meningitis and septicaemia, is one of many members who have taken part in the structured two-day training throughout the UK and Ireland.

Jeni says: "The training was so thorough and informative that it gave me much more confidence in talking to other mothers whose adult children have died, and has also helped me to cope with my own grief."

Actively participating in the Charity's research programme

One of the main ways that members support the Foundation's research programme is through the UK Meningitis Blood Survey.

With the aim of finding out whether there are inherited factors that can make some individuals or families more susceptible to meningococcal disease, the team at

St Mary's Hospital, Paddington rely on blood samples from members of affected families to provide the basis for their work. Since the start of this project, hundreds of members have become involved.

With the unusual situation that three generations have been affected by meningitis, Annette Walker and her family were prime candidates for the blood survey. Annette's mother Jean was the first to be affected. Annette and her brother Roy were taken ill in 1994 within a week of each other, and last year Annette's young daughter Kiera was diagnosed with meningitis.

Talking to the Media

Despite its undoubted benefits in reducing cases and saving lives, the introduction of the Group C meningococcal vaccine generated some adverse publicity. Members worked hand-in-hand with Foundation staff to provide a clearer understanding in the debate. The most persuasive and evocative argument came when member Marie Hilton wrote the following to *The Independent*:

Sir: Your article "Teenager's death raises fears over meningitis jabs" (7 June) illustrated vividly why parents might be concerned about the effects of meningitis C inoculation. I would like to redress the balance by illustrating, in the name of my son Simon, why the benefits of being immunised against meningitis C outweigh the small possibility of side effects.

I understand what it is like to spend a night extremely worried about a baby, my daughter, who is feverish and crying, in obvious pain, a few hours after having received her first inoculation.

However, I also know what it is like, after having spoken to doctors several times during the night and being reassured that my teenage son had only a simple viral illness, to see bruises forming on his skin in the early morning. I know what it is like to bundle him into the car with the help of a doctor constantly monitoring his falling blood pressure.

His father knows what it is like to drive his dangerously ill son to the hospital, fighting the morning rush-hour traffic, sometimes driving on the wrong side of the road, realising that every minute would count and hear his son say, when he helped him out the car, "I have meningitis don't I, Dad?"

I know what it is like to hear the paediatrician say, "He is very together, but he is desperately ill and I do not know how this is going to end." My son looked so frightened before being put on life support. I said to him, "I am going to stay with you all the time Simon" aware that this was probably the last time I would ever speak to him.

I know what it is like to hear the doctor say, "His heart has stopped"; to hear the doctor explain, "When he arrived at the hospital your son had no blood supply to any of his main organs." The meningococcal bacteria cause the blood vessels to leak, thereby making it difficult for the blood to reach vital organs. Simon died two hours after arriving at hospital.

There are no words to describe the horror of seeing your healthy, strong son overwhelmed by a disease which caused complete cardiovascular collapse in only 12 hours. Meningococcal disease is devastating. In some cases parents have put unwell children to bed with what they think is a viral illness only to find them dead in the morning. Meningococcal disease requires prompt treatment but it is difficult to recognise in its early stages. Many survivors are left with amputations, others with brain damage.

Today, I wish so much that my dilemma was about whether or not to have Simon vaccinated against this awful disease, rather than having to decide what to write as a fitting epitaph to a boy who said a few days before he died, "My life is just about perfect at the moment."

At the time of Simon's death in autumn 1998 the number of recorded cases of meningococcal disease was at its highest for 50 years. Simon died 11 months before an effective vaccine for the strain that killed him became widely available. Had he been vaccinated he would be alive today. When the vaccine was offered to my daughter, my choice to use it was not a difficult one.

Our members' contribution to the Foundation's work during the last year has, as ever, been vital. Their drive and commitment to the cause is typified by Vernon Jones when he says:

"In 1993 I lost my 15 year old son through meningococcal septicaemia. He was only ill for one day. Sadly, my wife died within two years. In that short period we joined forces to fight this crippling enemy. Now alone, I am still in the battle and ready for action whenever called. As long as I live, I am registered for fighting, hoping to see the battle won someday."

Developing Support

Over 98% of the funding for our vital work comes from voluntary donations. In 2000/01 even more individuals and organisations, from all over the UK and Ireland and from all sectors of the community, joined us to raise funds for our fight against meningitis and septicaemia.



▲ Organised by the Armagh Fund, 'jailbreakers' escape from behind bars as part of a series of events for the Foundation

Members, supporters and the community

We are very grateful for the increasing level of support that people give us, and constantly amazed and impressed with the range of fundraising activities that they organise and the fun they get out of the events.

In 2000/01 people:

- organised fundraising events – raffles, coffee mornings, discos, carnivals, quiz nights – the list is endless
- raised sponsorship money by participating in marathons and triathlons, white water rafting, jumping out of planes, flying vintage planes from London to Sydney, scaling mountains and hills, and swimming. If there are challenges which can raise money, our supporters are meeting them and thousands of others are backing them in their efforts
- gave us donations or joined one of our regular monthly giving schemes.

Students

Students are really important to the Foundation being in a higher risk group of contracting meningitis and septicaemia. But the relationship is a two-way street, with an increasing number of universities and their RAGs devising their own fundraising and awareness initiatives. They also joined with members and other volunteers in events such as London Loot – a yearly collection blitz on the underground and main line stations of London which raised £14,500, a whopping 48% increase on the previous year.

As ever, we are particularly indebted to our members, who directly raised the terrific sum of £612,727 during 2000/01. In addition, members contributed by donating gifts, volunteering their time and experience to help with appeals, and promoting awareness of meningitis, septicaemia and the work of the Charity:

- the Batty family donated a SEAT car as the top prize in the annual England and Wales raffle
- Ian Gregg and Paul Radcliffe undertook a mammoth walk from Blackpool to Bridlington, with the help of Patron Norman Pace
- members formed the backbone of the Foundation's participants in the annual fundraising trek – Munro Madness
- Francis Hughes organised the highly successful Caoimhe Hughes Memorial Golf Classic.

In May a fantastically successful Media Ball held at the Royal Lancaster Hotel, London and organised by Trustees Kim Taylor, Beverley Pace and Debi Warman raised over £58,000.

These were just a few examples of the many events and initiatives that our members were involved in on our behalf. We thank each and every one of you for your support.



▲ Patron Norman Pace, with members of the Foundation, at the start of the Blackpool to Bridlington walk

Corporates

We find that companies are becoming increasingly aware that their customers, staff, suppliers and retailers like to see them linking up with charities, particularly when the cause is directly relevant to them.

Meningitis and septicaemia are diseases of great concern to people of all ages. We are very grateful to the increasing number of companies of all sizes who have been willing to support our work and help us to increase awareness of these devastating diseases by:

- getting involved in sponsoring opportunities
- match funding their employees' efforts
- helping us to organise awareness and fundraising events
- organising their own events
- giving donations and gifts

The Foundation's link-up with domestic appliance manufacturers Dyson Ltd is a continuing success story that has proved to be beneficial to all parties. Highlights include:

- the launch of limited editions of the best selling Dyson DCO4 and DC05 vacuum cleaners, which included specially prepared symptoms information as part of the packaging and point-of-sale displays
- fundraising events and awareness events involving Dyson's retailers and Foundation members and supporters
- staff participating in a fundraising frenzy at the annual Dyson Day.

2000/01 saw Dyson and the Foundation on course to smash through the original £1million fundraising target, whilst greatly boosting recognition of the signs and symptoms of meningitis and septicaemia and the work of the Foundation.

In 2000, Abernethy Foods, suppliers to 180 Mace convenience stores throughout Scotland, chose the Foundation as their charity for a period of two years. Working hand in hand with our Scotland office, funds and awareness have been raised through:

- staff participating in sponsored whitewater rafting
- distribution of the Foundation's award winning **Baby Watch** material to every member of staff
- a collection point for customers in every store
- charity gala evenings
- golf days.

As well as Dyson and Abernethy Foods, many other companies have supported the Foundation during 2000/01. A few are listed here:

Ashgrove Conservatories, Aer Rianta, Amerada Hess Ltd, Associated British Ports, Barings Bank Dublin, Bass Ireland, Boots, Computer Associates plc, Daewoo, epbcommunications, Ericsson Ireland, Fishburn Hedges, GlaxoSmithKline, Guinness, Halifax Building Society, Huenna Kitchens, Microscience Ltd, John Wood Group plc, Nortel Networks, Northern Bank, Securicor, Safeway, Wyeth Vaccines.

Grant givers

Trusts, Foundations and statutory bodies continued to make a welcome contribution to Meningitis Research Foundation's work in 2000/01.

The Foundation was delighted to receive many generous donations from charitable trusts and other grant givers, including:

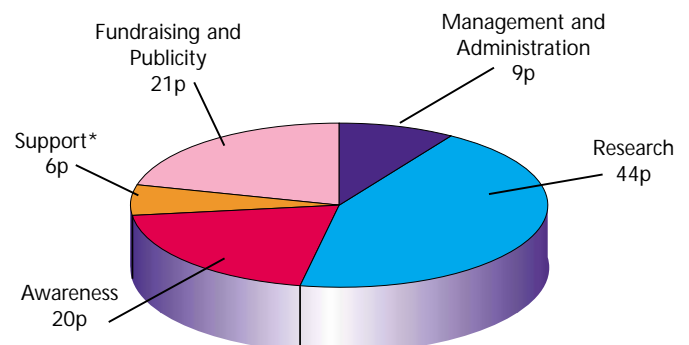
The Alice Faith Mittelman Foundation, C & A Charitable Trust, Freemasons Grand Charity, Heathcoat Trust, Madeline Mabey Trust, The Independent Order of the Oddfellows Manchester Unity Friendly Society, Peacock Trust, Scotbelge Trust, Waterhouse Trust and the Weisfield Foundation

- In England and Wales two Community Fund (formerly NLCB) grants continued in payment
- An extension of the grant from the Department of Health continued for the Medical Information Officer post
- The Scottish Executive and the Department of Health in Northern Ireland made grants in support of Information and Education work
- In the Republic of Ireland, the Department of Health made a grant in support of the helpline
- Other major grant givers include Children In Need and DHSS & PS Northern Ireland.

In addition,

- Lloyds TSB Foundation and Vodafone Group Charitable Trust funded helpline information packs
- The Lloyds TSB Foundation also supported the Information and Education Officer posts in Northern Ireland and Scotland.

How every £ is spent



* Following the commencement of the Befriender initiatives, it was decided that separate recognition for support for members be given from the information programme (both previously under the heading of Awareness), to give a clearer picture of the furtherance of the principal charitable objectives of the Charity.

Financial Summary

In 2000/01 the overall income of the Charity was £2,753,759, an excellent achievement in a year in which the good news about the vaccine against Group C meningococcal disease may have led many to think meningitis and septicaemia were eradicated.

The Trustees increased direct expenditure on vital scientific research, education and support programmes to £1,693,553. Tight control continued to be exercised over administrative expenditure and overheads, with only 9% of total expenditure in this category covering the administration of four offices in four different countries. It is the Foundation's policy to hold sufficient general reserves to cover six months running costs, and, from 2000/01, the Trustees' policy is to also include six months of research funding.

Balance Sheet (as at 31 March 2001)

| | 2001 | 2000 |
|---|-------------------|-------------------|
| Tangible Fixed Assets | 166,180 | 180,657 |
| Current Assets | | |
| Debtors | £205,968 | £247,545 |
| Short Term Deposits | £2,414,764 | £1,978,452 |
| Cash at Bank and in Hand | £166,332 | £137,603 |
| | £2,787,064 | £2,363,600 |
| Liabilities: Amounts falling due within one year | (£802,026) | (£731,675) |
| Net Current Assets | £1,985,038 | £1,631,925 |
| Net Assets | £2,151,218 | £1,812,582 |
| Funds | | |
| Unrestricted | £167,001 | £789,517 |
| Designated | £1,701,571 | £735,215 |
| Restricted | £282,646 | £287,850 |
| | £2,151,218 | £1,812,582 |

Income & Expenditure (year to 31 March 2001)

| | 2001 | 2000 |
|--|--------------------|--------------------|
| Income | Total Funds | Total Funds |
| Incoming Resources | | |
| Donations and Gifts | £1,905,020 | £2,031,170 |
| Grants Receivable | £138,283 | £170,232 |
| Legacies | £25,500 | £71,014 |
| Investment Income | £118,818 | £87,353 |
| Other income | £566,138 | £500,548 |
| Total Incoming Resources | £2,753,759 | £2,860,317 |
| Expenditure | | |
| Resources Expended | | |
| Direct Charitable Expenditure | £1,693,553 | £1,584,386 |
| Fundraising and Publicity | £505,105 | £395,349 |
| Management and Administration of the Charity | £216,465 | £192,556 |
| Total Resources Expended | £2,415,123 | £2,172,291 |

The financial summary on this page has been approved by the Charity's auditors, Acklands Limited, as being consistent with the full financial statements for the year ending 31 March 2001. In preparing the accounts, the Foundation followed the Statement of Recommended Practice (SORP) Accounting by Charities: October 1995. The accounts were approved by the Foundation's Trustees on 24 May 2001 and copies have been forwarded to the Charity Commission. Copies of the full financial accounts are available on request from the Foundation's registered office in Bristol.

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