

**Addison's Disease  
Self-Help Group**

# **ANNUAL REPORT 2025**

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**Trustees Annual Report & Accounts for  
the Year ended 31 December 2025**



[www.addisonsdisease.org.uk](http://www.addisonsdisease.org.uk)  
Charity no. 1179825

# Contents

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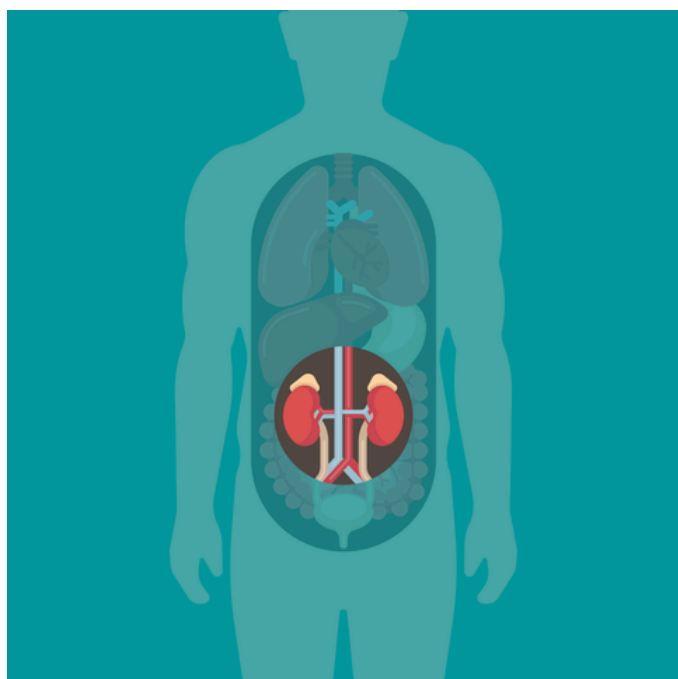
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# Who are we?



**The Addison's Self Help Group (ADSHG) is the leading UK charity specialising in supporting people with all forms of adrenal insufficiency, including Addison's disease, their families and the healthcare professionals working with them.**

Addison's disease (Primary adrenal insufficiency) is a rare endocrine condition where the adrenal glands (acorn sized glands that sit on top of the kidneys) stop functioning, no longer producing life-essential steroid hormones, most notably cortisol. It affects around 1:10,000 in the UK, of different ages and genders.



There are also two other types of adrenal insufficiency:

- Secondary adrenal insufficiency, caused by a problem with the pituitary gland in the brain, and
- Tertiary adrenal insufficiency which can occur in people who have taken long-term steroid medication for conditions such as asthma, and who stop their medication suddenly.

All forms of adrenal insufficiency affect production of steroid hormones by the adrenal gland, notably cortisol.

## TREATMENT & MANAGEMENT

Adrenal insufficiency is treated by the time-critical, daily replacement of steroid hormones in medication form (glucocorticoids). Patients are steroid-dependent.

## ADRENAL CRISIS

An inherent complication of all types of adrenal insufficiency is the risk of experiencing a life-threatening adrenal crisis, triggered by low cortisol levels. This occurs when the body is under physiological or extreme psychological stress and its need for cortisol outstrips replacement medication doses. It requires an increase in daily medication doses (Sick Day Rules) to provide additional cortisol.



Without sufficient steroid-hormone-replacement medication, all patients with adrenal insufficiency are at risk of a life-threatening adrenal crisis, requiring urgent administration of an emergency hydrocortisone injection, followed by medical monitoring and IV fluids.

Symptoms of adrenal crisis include extreme weakness, a significant drop in blood pressure, drowsiness or mental confusion. Treatment is time-critical but there are many obstacles to successfully drawing up and self-administering an emergency injection whilst acutely unwell. Deterioration in an adrenal crisis can be very fast and can affect even experienced patients.

**Each year, typically 8% of people with Addison's disease will have an adrenal crisis.**

**1 in 200 adrenal crises are fatal.**







# ACHIEVEMENTS & PERFORMANCE



# Our impact in 2025

ADDISON'S DISEASE SELF-HELP GROUP



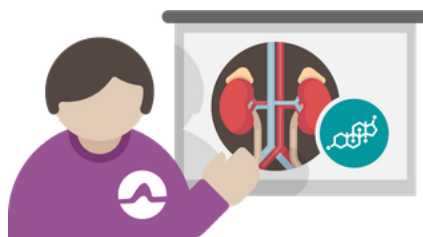
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Striving for a world where Addison's disease and adrenal insufficiency are recognised early and managed effectively so that anyone affected can live confidently and thrive.



13

AWARENESS STANDS



937

PARAMEDICS, EMTS & STUDENTS  
TRAINED IN ADRENAL CRISIS  
MANAGEMENT

1253



EMERGENCY  
INJECTION KITS  
SOLD



3

CONFERENCES  
ATTENDED

930

REGISTRATIONS FOR  
ADSHG MEMBER  
EVENTS & WEBINARS



190



GIVEN EMERGENCY  
INJECTION TRAINING



SOCIAL MEETINGS &  
ADDISON'S  
AFTERNOON TEAS

13

2489

MEMBERS SUPPORTED



15

RESEARCH  
PROJECTS  
SUPPORTED



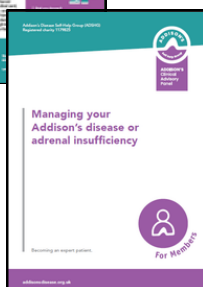
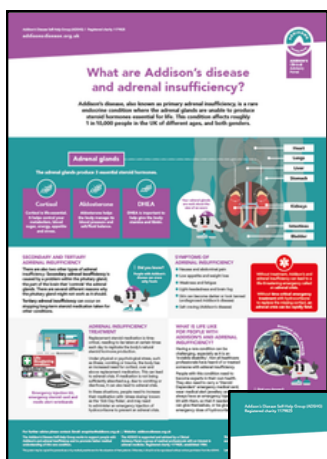
We had 3 main strands to our work in 2025: Support, Connect & Advance

## SUPPORT



*Providing resources and building a community that helps people self manage their condition and improve their quality of life.*

## Publications



Building on work in 2024, we have continued to prioritise updating our range of printed information booklets, aimed at both patient and healthcare professional audiences, to provide clinically up to date and reviewed information on topics such as:

- What are Addison's disease and adrenal insufficiency?
- Notes for Primary Care and A&E nurses
- Notes for Ward Nurses
- Managing Your Addison's disease or adrenal insufficiency
- When an employee has Addison's disease or adrenal insufficiency
- Diagnosis & Care of a patient with adrenal insufficiency (for GPs)

## Shop (<https://d42c94e0.myshopify.com>)

Our online shop has continued to go from strength to strength in 2025. Over 1096 orders were placed with our top products over the course of the year being:

- NHS Steroid Emergency cards
- Emergency Injection Instruction Leaflets
- Medic alert keyrings
- ADSHG Steroid Emergency Cards
- Small Emergency Injection Kits





## Member community

All members are given an account to join our online, member-only community. The wealth of information shared in our forums is testament to the generosity of our community, to use their experiences to help others. 2025 has seen a focus on how to simplify using the online community for first-time users.

“A person facing this life-changing diagnosis needs someone who's got your back, and up to date reliable information which is clinically verified. That's the ADSHG.”

Thank you to our volunteer 'Forum Buddies' for their support in keeping the online community informed, safe and accessible.

## Member emails, newsletters & magazines

We are never short of information to share with our members; from news and updates on our products and services and policy changes, to inspirational personal stories and opportunities to get involved in research. Our monthly member emails and bi-annual newsletters and magazines keep our members aware and prepared.



## Website & Social Media

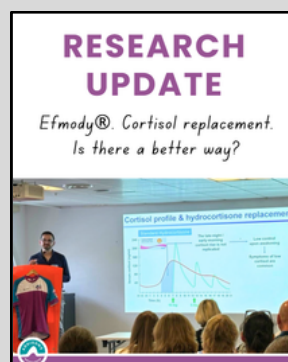


It is important to us that clinically accurate information is freely available to anyone affected by adrenal insufficiency. Our website is kept up to date with information to help support people from 'newly diagnosed' to 'expert patient'.

218,000 users benefitted from our webpages during 2025, with the US, UK and Canada being our most popular browsers. Our Sick Day Rules page continues to draw the most views (over 46,000 in 2025) leading us to develop a Sick Day Rules leaflet to launch in 2026 to help address the questions and uncertainty in the community.

“I’m so grateful for all the info and support from ADSHG because my GP knows very little about Addisons and was not convinced until my cortisol results came back. Am still waiting for my first endocrinologist appointment so ADSHG has been literally a life saver!

Social media helps us send information beyond our membership, to an engaged audience of over 37,000 followers across all platforms, all keen to learn and support each other. We keep our posts varied; to educate, to engage, to support and to inspire.





## CONNECT



*Making it possible for the voice of people with adrenal insufficiency, including Addison's disease, to influence, inform & improve the way the healthcare service delivers their care*

### Working with, and supporting, healthcare professionals



This year has seen the launch of our quarterly e-newsletter for healthcare professionals (HCPs): **ADSHG Connection**.

By engaging with HCPs at endocrinology medical conferences (British Endocrinology Society: Mar 25, Clinical Update: Nov 25 and British Society for Paediatric Endocrinology & Diabetes: Nov 25), we have attracted over 500 sign ups, allowing us to directly communicate the needs of our adrenal insufficiency community.

As hoped, our **Addison's Disease Day campaign** in 2025 saw us top 2024's engagement with 13 awareness stands in hospitals across the UK. We are so grateful to the endocrine teams that helped share their expertise with colleagues and the public alike.

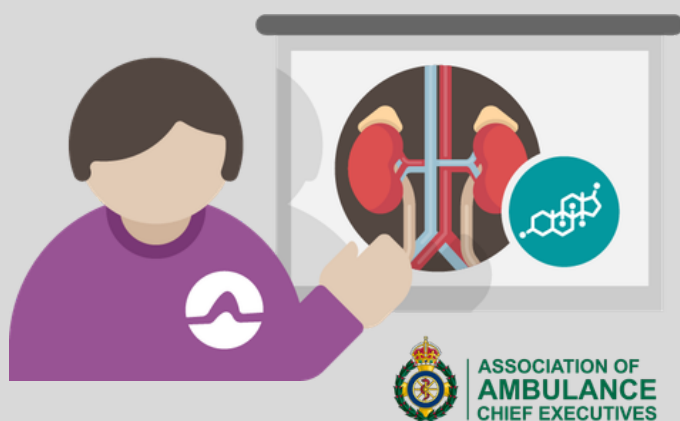


Shrewsbury & Telford NHS Trust



Royal United Hospitals Bath NHS Foundation Trust

## Awareness Training: 937 Paramedics, EMTs & students trained



We are so grateful to the support of the **Association of Ambulance Chief Executives (AACE)** for helping signpost Ambulance trusts across the UK to our free, online Adrenal Crisis Management Awareness Training sessions. Our clinically reviewed content, presented by people with lived experience, supports and brings to life, the Joint Royal Colleges Ambulance Liaison Committee (JRCALC) guidelines for adrenal insufficiency.

Feedback from attendees at our sessions, which are led by ADSHG staff Philippa and Chloe, as well as volunteers Alison and Jackie, have been beyond excellent, with an average rating of 9.6/10 from 323 respondents.

“

"Very good course. Very informative slides. Really good having people who have the condition taking the course, this offers invaluable insight. "

“

I loved the course content and found it extremely helpful as you all covered lots of information, from symptoms, treatments, linking it to JRCALC guidelines, and how to spot someone in an adrenal crisis. I now feel much more confident that I will be able to identify it on the road and know how to treat a patient.

“

"Very informative with personal stories. Its easy to read about signs and symptoms but having someone describe their own reactions and how they were diagnosed was really helpful"

## ADVANCE

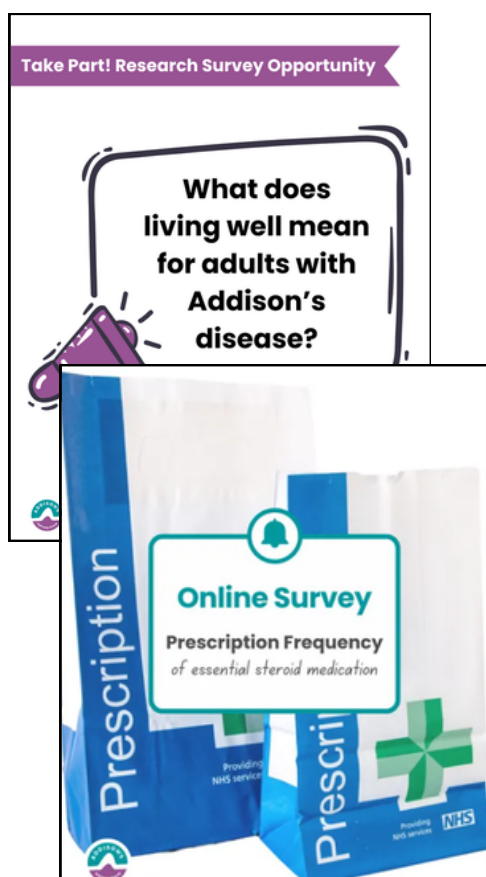


*Funding, contributing to, and promoting the development of new innovations and research to improve quality of life for all those with adrenal insufficiency.*

We continue to be actively involved in looking to advance the understanding and treatment of Addison's disease (AD) and adrenal insufficiency through:

- Funding and facilitating research (seed-funding)
- Disseminating information and best practice
- Raising awareness of AD/adrenal insufficiency across the healthcare community
- Providing training to GPs, paramedics and others critical to patient care and survival
- Informing and lobbying healthcare decision makers

Below are just a sample of the projects we have supported through member engagement, data collection and direct funding.



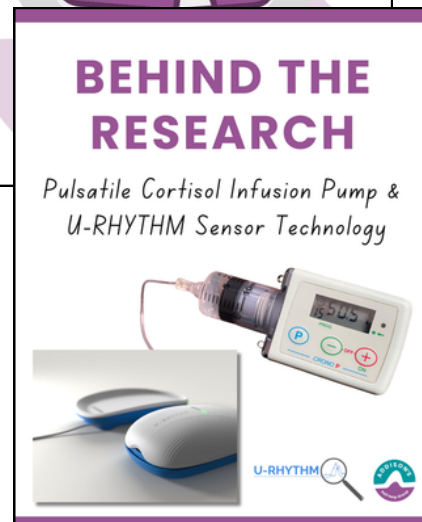
< Notes

**Pigmentation at diagnosis**

☐ Do you have autoimmune Addison's disease?

☐ Did your skin pigment (look tanned) before you were diagnosed?

☒ Please complete our short online survey.





## The Real Story – Improving Adrenal Crisis Management

As we planned last year, in 2025 we focused on adrenal crisis management and where it is today, over 5 years on from Patient Safety initiatives such as the National Steroid Emergency Card, and over a year on from the launch of the NICE Guidelines for the Identification and Management of Adrenal Insufficiency. We named the project 'The Real Story'.

Our initial goal has been to bring together (virtually) experts and stakeholders from across the UK: researchers and clinicians, Patient Support Groups, and people with lived experience.

By the end of 2025, we united a group of 30 people with an expertise or interest in adrenal crisis management in the UK, across clinical, patient, PSG and pharmaceutical industries as well as having MP interest. The group is picking up momentum in their achievements and in early 2026 the ADSHG, in collaboration with City St Georges, University of London, plan to launch a patient survey to collect detailed information on the patient experience of adrenal crisis.

We look forward to giving a progress report in 2026.

**CALL FOR EMERGENCY CARE PRACTITIONERS**  
Help improve care for life-threatening emergencies

**ADRENAL CRISIS is a rare but life-threatening emergency**  
By sharing your experience, you can help us improve how adrenal crisis is recognised and managed to save lives.

**ABOUT THE STUDY**  
This research explores adrenal crisis management in pre-hospital and emergency care settings in the UK. Please take part if you are registered with GMC, GMC or HCPC, and working in:  
• Ambulance services (paramedics)  
• A&E Emergency departments (medical doctors, nurses, advanced clinical practitioners, nurse practitioners)

**WHAT IS INVOLVED?**  
• Complete a short anonymous online survey (~ 10 minutes)  
• Optional post-survey 1:1 online interview (~ 30 minutes)  
Participants taking part in interviews will receive a £20 voucher as a thank you

➔ **Take part! Help shape emergency care practice**

Click this link or scan the QR code below:  
[https://cityunilondon.eu.qualtrics.com/jfe/form/SV\\_6W0j2CLPVTtCQ86](https://cityunilondon.eu.qualtrics.com/jfe/form/SV_6W0j2CLPVTtCQ86)

For more details contact:  
Heather Reid  
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**CITY ST GEORGES**  
UNIVERSITY OF LONDON

In collaboration with  
**ADDISON'S DISEASE SELF HELP GROUP (ADSHG)**

### Take part & share!

We are collaborating in a study aiming to **better understand how adrenal crises are recognised and managed in real-world emergency care settings (ambulance and A&E) across the UK.**


We are inviting you to contribute to the study or share it within your professional networks to help reach emergency care clinicians, including paramedics, nurses, and medical doctors.

The study, led by Dr Sofia Llahana, has received ethics approval from City St George's, University of London.

Thank you for your support in helping us reach emergency care professionals across the UK.

Survey link: [https://cityunilondon.eu.qualtrics.com/jfe/form/SV\\_6W0j2CLPVTtCQ86](https://cityunilondon.eu.qualtrics.com/jfe/form/SV_6W0j2CLPVTtCQ86)

Or scan the QR code:



[www.addisonsdisease.org.uk](https://cityunilondon.eu.qualtrics.com/jfe/form/SV_6W0j2CLPVTtCQ86)



**Share your experience of Adrenal Crisis to drive improvement**

*Support our study to understand what it is like to go through an adrenal crisis, how you recognise the symptoms, manage the crisis and seek emergency care.*

**Please take part if you:**

- Are aged **18** or over and receive **medical care in the UK**
- Have been **diagnosed with adrenal insufficiency** (any type)
- Have **experienced an adrenal crisis** in the UK, requiring emergency hydrocortisone administration.

**What is involved?**

**Stage 1:**  
An **anonymous online survey** (~ 20-25 minutes)

**Stage 2:**  
**1:1 online interview with consent** (~45 minutes). \*Interview participants will receive a £20 voucher, may close earlier

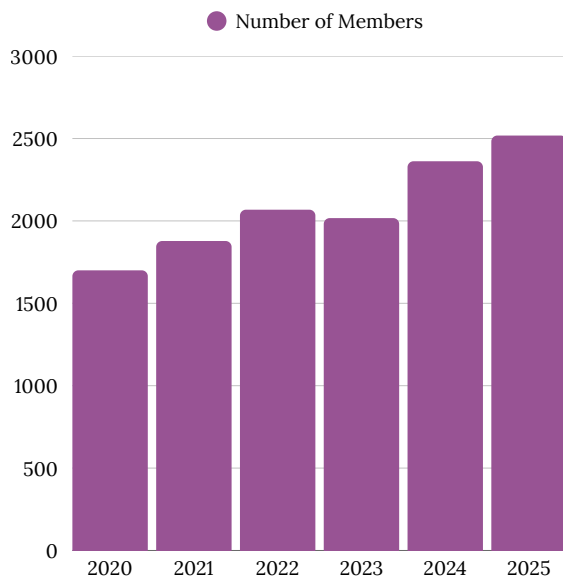



<https://tinyurl.com/survey-adrenal-crisis>    <https://tinyurl.com/interview-adrenal-crisis>

**www.addisonsdisease.org.uk**  
Charity no: 1179625

For more details contact:  
Dr Sofia Llahana  
adrenal.research@city.ac.uk

# Our Membership



Membership numbers have continued their slow but steady rise during 2025, with both digital and postal memberships paid memberships available (£33 and £35 respectively). We continue to offer up to 250 sponsored places to those who are unable to afford their subscription.

“**Belonging is strength.**

***Sponsor a Member Donor, 2025***

***Total of £2584 raised in campaign***



## Type of Membership

The majority of our members like to receive our news and updates through their front door (postal members)



## Gender

The majority of our members are female



## Age

The largest age group of our members is 55 - 70 with only one third being outside of this range.

## Member Benefits

- Access to our online member forum
- A member pack with a copy of all of our key leaflets
- An invitation to our annual member events with access to expert speaker
- Access to member only 'Social Meetings' when they are held regionally by volunteers
- News updates and information via our monthly member emails and bi-annual magazine & newsletters
- Shop discount codes
- A member vote at our annual AGM

# Support to suit everyone



We strive to provide resources and support that everyone affected by Addison's disease and adrenal insufficiency might need and look for.

Here we share just some of the comments left on our social media to show how the charity can impact lives in different ways.



Jane

This charity is a godsend to those of us with Adrenal Insufficiency, our friends and family. So much help and advice, all backed by medical professionals. The website is so very important as it contains advice for sufferers, our friends and family plus our GPs, dentists, and other health care professionals.



Jane

Thank you - this will no doubt be lifesaving work.

Thank you so much for the incredible work you all do to help support and educate those of us with Addison's disease and those who take care of us!! have had this disease for 38 years and I'm still learning from this site! You are all so appreciated! ❤️



Lashell

I don't know how I would make it through all my ups and downs with this disease without an encouraging group like this. Thank you all for sharing because you do understand and know what one goes through ❤️ ❤️ ❤️

hey, im not sure if u guys check ure messages but i just wanted to say thank u, ure page has helped my dad & me understand his condition more and how to help it, and the official website taught my mama how to administer a hydrocortisone injection, which very well saved my dads life, even though hes currently in the hospital on life support, that injection gave him a second chance, i cannot thank ure charity enough for helping families, friends & individuals with addisons & adrenal insufficiency, thank you endlessly



Daisy

The Self Help Group was absolutely invaluable when my partner was diagnosed 2 years ago. Can't recommend the website more!

where\_the\_wildflowers\_grow79 Fantastic webinar this evening. Thank you so much to [@raremindsuk](#) and [@addisonsdiseaseuk](#) for hosting. It is wonderful to feel seen and supported, and to come away with lots of useful and practical suggestions to support our wellbeing 💖



frauhaus1 Superb! Not something we ever want to need but the fact you are offering this shoes that time and again it is exactly what we are often faced with! Thank you for your wonderful work supporting us all x



# Progress against key Strategic Goals



Key Goals	Progress / Status
Invest in and Improve website navigation & usability	Website re-design project started Nov 2025. Projected completion June 26
Improve navigation & accessibility of Community Online Forum	Forum updates completed and 'How To' guides in development. Projected completion Q3 2026
Expand staffing resource to support Social Media	Social Media Assistant recruited (7hrs/week)
Review & update all printed leaflets	In progress. All existing leaflets have been reviewed post NICE Guidelines and re-designed with a focus on readability and accessibility. New leaflets ongoing
Promote direct interaction of members with Healthcare professionals	Rolling and expanding programme of member events, webinars and injection training events with balance of online and in-person events, and geographically varied venues (allowing as many people to engage as possible).
Grow Awareness of key audiences through direct training and provision of training resources	Paramedic Awareness Training ongoing, expanding (900+ trained in 2025) and well received. Projects in progress with Call Handlers and Carers/Care Homes. Sign ups to the HCP newsletter promoted via conferences.
Ongoing support of Healthcare Professionals, and Education of Primary Care and A&E staff	Rolling programmes. Publication of updated GP leaflet and collaboration with Pituitary Foundation to produce Adrenal Insufficiency Action Plan, both particularly targeting GPs. Plan to attend RCGP conference in 2026.
High level Influence as: Developing advocacy role as appropriate	Real Story project (adrenal crisis management) launched in 2025 - ongoing. Planned advocacy campaign around discontinuation of Hydrocortisone Sodium Phosphate in 2026



# Our Collaborations & Associations

**BMJ** Learning

**beacon**  
for rare diseases  
no rare journey alone

**National Voices**

**RARE DISEASE UK**

**ESPE** European Society for Paediatric Endocrinology

European Society of Endocrinology

**B-S-P-E-D**

Living with **cah**  
CAH Support Group. Registered Charity

**rareminds**

Mental Health for the Rare Disease Community

The Pituitary Foundation

**NHS**

England



**jrcalc**

**GENETIC ALLIANCE UK**



ASSOCIATION OF  
**AMBULANCE**  
CHIEF EXECUTIVES

**Specialised Healthcare Alliance**  
FOR EVERYONE WITH RARE AND COMPLEX CONDITIONS

**LEE'S LIGHT**  
ADDISON'S DISEASE AWARENESS

**WAPPO**  
World Alliance of Pituitary Organizations

**NICE** National Institute for Health and Care Excellence



International Adrenal Consortium



The Royal College of Emergency Medicine



Irish Endocrine Society



**Royal College of Physicians**

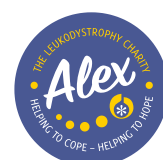


Society for Endocrinology



NORTHERN IRELAND  
RARE DISEASE  
PARTNERSHIP

**CITY**  
ST GEORGE'S  
UNIVERSITY OF LONDON



# Volunteers



We are thrilled to welcome some new volunteers to our team in 2025: helping with proof reading, awareness stands and literature reviews. We have some obvious stand out volunteers whom, it is not exaggerating to say, are part of the very core of the charity, and we owe them a huge debt of gratitude.

There are however, also so many people involved, in so many ways, that offer their time and their expertise to work with us to achieve the most we can for the Addison's and adrenal insufficiency community.

## So, to the...

- **Trustees:** for your loyalty, experience and strategic guidance
- **Conference Stand Dynamos:** Alison, Noel and Jennifer, for your enthusiasm, engagement, patience and diligence
- **Proof readers:** for your eye for detail and your kind feedback
- **Article and blog writers:** for your interest, eloquency, and honesty
- **Enquiries aka 'Ask Alison':** for your knowledge, empathy and dedication
- **Clinical Advisory Panel:** for your expertise, patience, and guidance
- **Awareness Stand Organisers:** for your energy, passion and motivation
- **Project volunteers / Consultants:** for your advice and expertise
- **Gratitude Team:** for your thoughtfulness and kindness
- **Events Support team:** for your support, energy and drive
- **Social Meeting hosts:** for your kindness and support of others

*Thank You!*





2025 has been an incredible year for fundraising, with our community coming together in inspiring ways to raise both vital funds and awareness. Chloe, our Community Fundraising Manager, has proudly supported our fundraisers throughout the year and introduced several new and recurring fundraising campaigns, helping bring people together and make an even greater impact.



## Steps for Addison's Awareness Campaign Launch

In February, we launched the 'Steps for Addison's Awareness' fundraising challenge. Participants took on a personalised step or distance goal throughout the month, symbolising the challenging journey faced by many people living with these rare conditions. Our team of 20 fundraisers raised over £7,000 for our charity across the month, culminating on Rare Disease Day (28 February).

## The London Landmarks Half Marathon (LLHM)

In April, we had the privilege of supporting our nine fundraisers who ran in the LLHM. These incredible runners raced past iconic landmarks such as Big Ben, St Paul's Cathedral and the Tower of London, raising over an impressive £8,400. Chloe attended the race alongside an ADSHG team of staff and volunteers, creating a truly supportive atmosphere at our charity cheer station.



## Addison's Afternoon Tea Campaign

2025 was the second year of our 'Addison's Afternoon Tea' campaign. Throughout May, eight tea parties were hosted by community members to raise awareness, funds and bring people with adrenal insufficiency together. Thanks to the dedication of our volunteers and hosts, these events were a huge success, raising an astounding £12,700.





## Small Charity Week Campaign Launch

From 23-30 June, we participated in our first matched-funding campaign with the Big Give. Our target was to raise £2,500 from our community, matched by another £2,500 from the champion sponsor, Global's Make Some Noise.

However, thanks to the generosity of our community, we raised over £9,500 in total! The success of this campaign has truly inspired us and we hope to take part in another matched-funding campaign in 2026.

## Sponsor a Member This September Campaign

In September, our 'Sponsor a Member This September' campaign invited donors to give £33 to fund a year's membership for someone who is unable to afford the membership fee. The campaign was another great success, raising funds to sponsor 73 charity memberships.

Each sponsored member will have full access to our digital membership, including forum access, a member pack and other exclusive member benefits.

“As an existing member I fully appreciate the value of this organisation. Happy to be able to help someone else benefit from this amazing support & resources.  
(Campaign Donor)

## Festive Fundraiser: Buy a Bauble Campaign

To wrap up an exciting year, we had our 'Buy a Bauble' campaign in December, where donors could add a virtual bauble to our Christmas tree to raise funds. The campaign raised an impressive £2,070, with 111 supporters participating.



This year, our incredible supporters organised everything from sponsored challenges and fundraising nights to bake sales and parties - each making a meaningful difference.

We are deeply grateful to all our fundraisers and donors, including our corporate donors, legacy donors and those who have given in memory of someone special.

Quite simply, none of our work would be possible without you all. Your generosity enables us to continue our vital work. Thank you for standing with us and we look forward to building on this success in 2026 and beyond.



# Corporate supporters



In 2025, our charity has been fortunate to receive support from a wide range of corporate organisations. The generosity of these businesses has enabled us to continue our vital work for our community.

Below, we are delighted to share a selection of the companies that have supported us this year:



As a small charity, corporate support makes a significant difference. We rely on the generosity of both individuals and organisations to sustain and grow our work. Whether through donations, pro bono support, volunteering, matched giving or payroll giving, every contribution strengthens our impact.

We would like to extend our sincere thanks to all our corporate supporters in 2025. Your input has been invaluable and we look forward to continuing our collaboration (and welcoming new supporters) in 2026. Together, we can make a difference.



# GOVERNANCE & STRUCTURE



# Statutory information



The Addison's Disease Self-Help Group (ADSHG) is a Charitable Incorporated Organization (CIO) registered with the Charity Commission for England and Wales as charity number 1179825 and CIO number CE015063. The charity was founded by Deana Kenward MBE in 1984. She remains a Patron of the charity.

Registered Office: ADSHG, 117 Kingsley Avenue, Rugby, CV21 4JZ

Email: [enquiries@addisons.org.uk](mailto:enquiries@addisons.org.uk)

Website: [www.addisonsdisease.org.uk](http://www.addisonsdisease.org.uk)

## **Constitution**

The charity is controlled by its governing document (constitution) which is available on our website. As stated, we exist to "promote the relief of persons with Addison's disease, in particular by the provision of support, information and communication for such persons, their families and carers and by such charitable means as the trustees determine."

## **Principal Bankers:**

CAF Bank Ltd

## **Independent Examiner:**

Andrew Churchill-Stone FCA DChA

Mercer Lewin Ltd Chartered Accountants

Botley Road, Oxford, OX2 OHP

## **Trustee Board:**

The charity is governed by an elected body of trustees consisting of not more than twelve and not less than three members. Each trustee is elected for a three-year term at an Annual General Meeting (AGM), or may be co-opted by existing trustees between AGMs. Meeting in person or virtually, with additional subgroup or single-item agenda meetings convened where needed, the trustees provide direction to the charity's executive team.

[www.addisonsdisease.org.uk](http://www.addisonsdisease.org.uk)

Charity no. 1179825

# Trustee Report



As Chair of Trustees, I am happy to report we have a well balanced Trustee body, bringing not only a wide range of Trustees with lived experience of Addison's Disease, but also large and small scale business experience blended with the expertise of specialist medics who are world leading in their knowledge of adrenal insufficiency. During 2025 we were sorry to say goodbye to Phil Kaye who retired from his position for reasons of ill health. We welcomed new trustees, Tom Barnes, Benjamin Ducaseau and Ryan Richardson. New trustees are warmly welcomed, onboarded both in terms of the responsibilities of a trustee role, and a comprehensive introduction to the charity.

I think the Trustee board and the Charity are in the best shape that I have seen the Charity in my seven years as a Trustee.

## dom hargreaves

CHAIRMAN

A blue ink signature of Dom Hargreaves.



Dom Hargreaves



Stuart Pinkerton



Robert McClements



Christine Walters



Alessandro Prete



Martin Hendry



Katie Harris



Lisa Shepherd



Tom Barnes



Benjamin Ducaseau



Ryan Richardson

# Statement of Trustee Responsibilities



The charity trustees are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the charity for that period.

In preparing the financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the applicable Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards have been followed, subject to any material departures that must be disclosed and explained in the financial statements; and
- prepare the financial statements on a going concern basis unless it is inappropriate to presume that the charity will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the applicable Charities (Accounts and Reports) Regulations 2008 and the provisions of the charity's constitution.

They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.



We continue to routinely monitor operational risks, financial risks, reputational risks, and legal risks such as data protection, regulatory, safeguarding and others.

Major risks which the charity faces on a regular basis are reviewed regularly by trustees. We have internal controls, policies and procedures to provide reasonable assurances against material misstatement or loss.

Other risks that are considered include, for example, cybersecurity and human resource risks.

## **Financial risk and controls**

Financial risks we need to monitor, manage or mitigate against include funding shortfalls, inadequate reserves, investment losses, and fraud. The Treasurer approves all spending or refers to other trustees where decisions need full board approval. Payments require dual authorisation. Reserve funds are retained in fixed term deposit based (no-risk) accounts. The charity's receipts and payments processes, book-keeping and annual statutory accounts are managed by contracted agencies. The charity maintains liability and indemnity insurances.

## **Clinical and scientific information quality**

The ADSHG is supported by an independent clinical panel of endocrinologists with an interest in adrenal medicine, known as the Clinical Advisory Panel (CAP).

We are indebted to our medical advisers for their pro bono support and advice.

The current CAP members (in no particular order) are Professor John Wass, Dr Alessandro Prete, Professor Wiebke Arlt, Professor Will Drake, Dr Steve Kell, Professor Simon Pearce, Stuart Pinkerton, Dr Georgina Russell, Lisa Shepherd RN, Dr Francesca Swords, Sam Westall, Dr Prethivan Gopalakrishnan, Dr Sofia Llahana and Matthew Heppel.

# Our Team



In 2025 the day-to-day running of the charity was carried out by a hard working and passionate team. Led by Cathy Thompson, Director, who joined the charity in May 2024, the staffing team has grown to be able to achieve more of their goals, and grow their engagement with members, the wider adrenal insufficiency community, and the clinicians that support them.

Each team member has a specialist skill set and experience in relation to their individual role, however there is inevitable cross over within a team of this size, and it is very much testament to the team pulling together, that they manage to achieve so much on limited resource.

“

*2025 has been an exciting and packed year for the operational team: we have defined our roles a little, and as a result, become more confident in them. We have pushed forwards together to expand our aspirations, and clarify our goals for the year, and are thrilled that we have been able to use our limited resources with such impact.*

*Although all of our team works remotely and nearly all of our team work part-time, we have a strong connection and a shared passion for working as hard as we can for the adrenal insufficiency community.*



Chloe Mezzetti  
Fundraising  
Manager



Charlotte Owst  
Social Media Assistant



Cathy Thompson  
Director



Thea Blunt  
Ops & Member Support



Alison Mainwaring  
Enquiries



Sophie Dziwinski  
Trusts & Grants



Philippa Sharman  
Comms & Health  
Liaison Mgr



# Our 2026 Wish List

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- To further develop our Adrenal Crisis Management training to Paramedics and Paramedic Students.
- To develop a website resource that is easy to navigate, clinically accurate and which helps people feel aware and prepared
- To offer members access to online webinars on a variety of subjects from Sick Day Rules to emotional and psychological well-being
- To continue to bring people together to drive improvements in effective Adrenal Crisis Management, improving patient safety.
- To increase the number of face-to-face member events and access to expert advice from healthcare professionals presenting
- To have more video and animated assets to engage people on social media
- To support improvements in therapeutic treatment programs for people with adrenal insufficiency, including Addison's disease.





# FINANCIAL REVIEW



# Treasurer's Finance Report



I'm pleased to present our annual accounts. Over the past year we have continued to refine our financial processes, resulting in clearer, more accurate reporting. The ADSHG has benefitted significantly from the restructuring of several key areas of the Charity. These changes have improved efficiency, reduced costs, and strengthened our long-term position. We have also been fortunate to have Cathy leading the organisation for the last 18 months; her leadership has brought positive progress across all areas of our work.

## Income

Our income was £389,162; an increase of £72,819 from 2024. The increase was due to multiple factors:

- We received a Gift Aid payment relating to donations from previous years, that had been due but not yet claimed.
- An increase in donations and fundraising was very welcoming. Although this is an important part of our income, it is probably the most vulnerable to cost of living and other issues. I must thank all our members and non-members who tirelessly raise money for the Charity and Chloe, our Community Fundraising Manager for her hard work to support them.
- Membership numbers have increased. We always endeavour to make the Charity an invaluable part of a member's life. It is always positive to see our membership renewals at a good level and membership retention is so important for any Charity. Your membership allows us to plan and build for the year and the future. Never think that it doesn't matter.
- Our shop has increased its sales. The shop has moved to a new system which has reduced costs and makes a more efficient, user friendly experience for members. We have also expanded our range of products.

## Expenditure and fund balances

Our expenditure was £333,115; an increase of £9,059.

Our expenditure increased mostly due to our wage bill increasing. This was due to the increase in our employed staffing (our hard working Communications & Health Liaison Manager, Philippa, now has some part-time support. Chloe moved her focus to her fundraising position and we employed a part-time Trust & Foundations manager.

Funding our member get-togethers is another important function of the Charity. Having attended most of the events, it's satisfying to talk to members about their experiences. I'm always moved by the number of members who have never met anyone else that has adrenal insufficiency. For them, these meetings are a potential lifesaver and for many, these gatherings are deeply meaningful and often life changing.

### **Primary purpose training**

Our trading activity helps us deliver against our charitable objects by providing resources to fund the support of people living with adrenal insufficiency, including Addison's Disease, and those who care for them. The shop is online only and focuses on sales of items that can be used by people with adrenal insufficiency, to manage their medications, deal with emergency situations, educate their family and friends, and handle interactions with their healthcare professionals.

### **Reserves Strategy**

During the period the charity will retain minimum unrestricted liquid reserves sufficient to meet normal operating costs including payroll for a minimum of six months, plus any projected winding up costs.

### **Financial position**

The Charity remains in a strong financial position, with reserves that provide against short term fluctuations in membership, donations, or fundraising income.

The Charity is there for the benefit of our members. All employees, volunteers, medical experts and trustees work tirelessly to make the Charity a success. Our volunteers, medical experts, and trustees attend the various meetings, with only minimal expenses – typically travel and accommodation reimbursed.

I am pleased with our financial performance this year. At the same time, it is essential that we continue to plan to safeguard the Charity's long-term health. Every member of our community plays a vital role in sustaining and strengthening ADSHG.

A handwritten signature in blue ink, appearing to read "Stuart Pinkerton", is positioned above the printed name.

**Stuart Pinkerton**

ADSHG TRUSTEE AND TREASURER

# Independent Examiners Report



I report to the charity trustees on my examination of the accounts of Addison's Disease Self Help Group (the Charity) for the year ended 31 December 2025.

**Responsibilities and basis of report:** As the charity trustees of the Charity you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the Act'). I report in respect of my examination of the Charity's accounts carried out under Section 145 of the Act and in carrying out my examination I have followed all applicable Directions given by the Charity Commission under Section 145(5)(b) of the Act.

**Independent examiner's statement** Since your charity's gross income exceeded £250,000 your examiner must be a member of a listed body. I can confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales, which is one of the listed bodies. I have completed my examination.

I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the Charity as required by Section 130 of the Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

**Andrew Churchill Stone** 

MERCER LEWIN CHARTERED ACCOUNTANTS, 6-7 CITIBASE NEW BARCLAY HOUSE,  
234 BOTLEY RD, OXFORD, OX2 OHP

# Statement of Financial Activities



## ADDISON'S DISEASE SELF HELP GROUP

### STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 DECEMBER 2025

	Notes	Unrestricted funds £	Designated Fund £	Restricted funds £	2025 Total funds £	2024 Total funds £
<b>INCOME AND ENDOWMENTS FROM</b>						
Donations and legacies		232,814	-	13,355	246,169	198,179
<b>Charitable activities</b>						
Shop sales income		64,186	-	-	64,186	39,741
Membership fee income		72,894	-	-	72,894	61,039
Other income		1,764	-	-	1,764	12,142
Investment income	2	<u>4,149</u>	<u>-</u>	<u>-</u>	<u>4,149</u>	<u>5,242</u>
<b>Total</b>		<u>375,807</u>	<u>-</u>	<u>13,355</u>	<u>389,162</u>	<u>316,343</u>
<b>EXPENDITURE ON Charitable activities</b>						
Supporting patients and families		62,416	-	-	62,416	72,508
Connecting healthcare professionals and patients		46,606	-	-	46,606	41,884
Advancing knowledge and understanding		59,197	-	-	59,197	43,320
Other project work		1,765	18,811	17,640	38,216	43,963
Shop costs		<u>57,391</u>	<u>-</u>	<u>-</u>	<u>57,391</u>	<u>43,375</u>
<b>Total expenditure on Charitable activities</b>		<u>227,375</u>	<u>18,811</u>	<u>17,640</u>	<u>263,826</u>	<u>245,050</u>
Cost of raising funds		51,970	-	-	51,970	60,285
Governance cost		<u>17,319</u>	<u>-</u>	<u>-</u>	<u>17,319</u>	<u>18,721</u>
<b>Total</b>		<u>296,664</u>	<u>18,811</u>	<u>17,640</u>	<u>333,115</u>	<u>324,056</u>
<b>NET INCOME/(EXPENDITURE)</b>		79,143	(18,811)	(4,285)	56,047	(7,713)
Transfers between funds	8	<u>(155,000)</u>	<u>155,000</u>	<u>-</u>	<u>-</u>	<u>-</u>
<b>Net movement in funds</b>		(75,857)	136,189	(4,285)	56,047	(7,713)
<b>RECONCILIATION OF FUNDS</b>						
Total funds brought forward		167,372	5,000	25,569	197,941	205,654
<b>TOTAL FUNDS CARRIED FORWARD</b>		<u>91,515</u>	<u>141,189</u>	<u>21,284</u>	<u>253,988</u>	<u>197,941</u>

# Balance Sheet



## ADDISON'S DISEASE SELF HELP GROUP

### BALANCE SHEET 31 DECEMBER 2025

	Notes	Unrestricted funds £	Designated Fund £	Restricted funds £	2025 Total funds £	2024 Total funds £
<b>CURRENT ASSETS</b>						
Stocks	5	8,275	-	-	8,275	8,491
Debtors	6	6,259	-	-	6,259	15,086
Cash at bank and in hand		<u>83,192</u>	<u>141,189</u>	<u>21,284</u>	<u>245,665</u>	<u>191,915</u>
		97,726	141,189	21,284	260,199	215,492
<b>CREDITORS</b>						
Amounts falling due within one year	7	(6,211)	-	-	(6,211)	(17,551)
		<u>91,515</u>	<u>141,189</u>	<u>21,284</u>	<u>253,988</u>	<u>197,941</u>
<b>NET CURRENT ASSETS</b>						
		<u>91,515</u>	<u>141,189</u>	<u>21,284</u>	<u>253,988</u>	<u>197,941</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>						
		<u>91,515</u>	<u>141,189</u>	<u>21,284</u>	<u>253,988</u>	<u>197,941</u>
<b>NET ASSETS</b>						
		<u>91,515</u>	<u>141,189</u>	<u>21,284</u>	<u>253,988</u>	<u>197,941</u>
<b>FUNDS</b>						
Unrestricted funds	8				232,704	172,372
Restricted funds					<u>21,284</u>	<u>25,569</u>
<b>TOTAL FUNDS</b>						
					<u>253,988</u>	<u>197,941</u>

These financial statements were approved by the board of trustees and authorised for issue on 9<sup>th</sup> May 2026, and were signed on it's behalf by:

Stuart Pinkerton, Trustee/Treasurer  
9<sup>th</sup> May 2026



## 1. ACCOUNTING POLICIES

### **BASIS OF PREPARING THE FINANCIAL STATEMENTS**

The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Charities Act 2011. The financial statements have been prepared under the historical cost convention, as modified by the revaluation of certain assets.

### **INCOME**

All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds, it is probable that the income will be received and the amount can be measured reliably.

### **EXPENDITURE**

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

### **TANGIBLE FIXED ASSETS**

No assets were purchased, depreciated or disposed of in this reporting period.

### **STOCKS**

Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

### **TAXATION**

The charity is exempt from tax on its charitable activities.

### **FUND ACCOUNTING**

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

### **PENSION COSTS AND OTHER POST-RETIREMENT BENEFITS**

The charity operates a defined contribution pension scheme. Contributions payable to the charity's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.



## 2. INVESTMENT INCOME

	2025 £	2024 £
Deposit account interest	<u>4,149</u>	<u>5,242</u>

## 3. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2025 nor for the year ended 31 December 2024.

### TRUSTEES' EXPENSES

Reimbursements totalling £830 were paid to trustees' to cover expenses paid by trustees' for the year ended 31 December 2025.

## 4. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted funds £	Designated Fund £	Restricted funds £	Total funds £
<b>INCOME AND ENDOWMENTS FROM</b>				
Donations and legacies	198,179	-	-	198,179
<b>Charitable activities</b>				
Shop sales income	39,741	-	-	39,741
Membership fee income	61,039	-	-	61,039
Other income	12,142	-	-	12,142
Investment income	<u>5,242</u>	<u>-</u>	<u>-</u>	<u>5,242</u>
<b>Total</b>	<u>316,343</u>	<u>-</u>	<u>-</u>	<u>316,343</u>
<b>EXPENDITURE ON</b>				
<b>Charitable activities</b>				
Supporting patients and families	72,508	-	-	72,508
Connecting healthcare professionals and patients	41,884	-	-	41,884
Advancing knowledge and understanding	35,820	-	7,500	43,320
Other project work	43,963	-	-	43,963
Shop costs	<u>43,375</u>	<u>-</u>	<u>-</u>	<u>43,375</u>
<b>Total expenditure on Charitable activities</b>	<u>237,550</u>	<u>-</u>	<u>7,500</u>	<u>245,050</u>
Cost of raising funds	60,285	-	-	60,285
Governance cost	<u>18,721</u>	<u>-</u>	<u>-</u>	<u>18,721</u>
<b>Total</b>	<u>316,556</u>	<u>-</u>	<u>7,500</u>	<u>324,056</u>
<b>NET INCOME/(EXPENDITURE)</b>	(213)	-	(7,500)	(7,713)
<b>Transfers between funds</b>	<u>(5,000)</u>	<u>5,000</u>	<u>-</u>	<u>-</u>
<b>Net movement in funds</b>	(5,213)	5,000	(7,500)	(7,713)
<b>RECONCILIATION OF FUNDS</b>				
Total funds brought forward	172,585	-	33,069	205,654



#### 4. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES - continued

	Unrestricted funds £	Designated Fund £	Restricted funds £	Total funds £
<b>TOTAL FUNDS CARRIED FORWARD</b>	<u>167,372</u>	<u>5,000</u>	<u>25,569</u>	<u>197,941</u>

#### 5. STOCKS

	2025 £	2024 £
Stocks	<u>8,275</u>	<u>8,491</u>

#### 6. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025 £	2024 £
Trade debtors	13	-
Prepayments and accrued income	<u>6,246</u>	<u>15,086</u>
	<u>6,259</u>	<u>15,086</u>

#### 7. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025 £	2024 £
Trade creditors	3,631	14,969
Other creditors	<u>2,580</u>	<u>2,582</u>
	<u>6,211</u>	<u>17,551</u>

#### 8. MOVEMENT IN FUNDS

	At 1/1/25 £	Net movement in funds £	Transfers between funds £	At 31/12/25 £
<b>Unrestricted funds</b>				
General fund	167,372	79,143	(155,000)	91,515
Addison's and Pituitary Ireland	5,000	-	-	5,000
Emergency Reserve Fund	-	-	110,000	110,000
Website Development Fund	-	(18,811)	35,000	16,189
Living With Addison's Fund	-	-	10,000	10,000
	<u>172,372</u>	<u>60,332</u>	<u>-</u>	<u>232,704</u>
<b>Restricted funds</b>				
Medical Research Fund	25,569	(17,640)	-	7,929
Hospital Saturday Fund Grant	-	2,000	-	2,000
The BIG Give	-	8,368	-	8,368
Neroscine Biosciences Fund	-	2,987	-	2,987
	<u>25,569</u>	<u>(4,285)</u>	<u>-</u>	<u>21,284</u>
<b>TOTAL FUNDS</b>	<u>197,941</u>	<u>56,047</u>	<u>-</u>	<u>253,988</u>

## 8. MOVEMENT IN FUNDS - continued

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
<b>Unrestricted funds</b>			
General fund	316,343	(316,556)	(213)
<b>Restricted funds</b>			
Medical Research Fund	-	(7,500)	(7,500)
<b>TOTAL FUNDS</b>	<u>316,343</u>	<u>(324,056)</u>	<u>(7,713)</u>

A current year 12 months and prior year 12 months combined position is as follows:

	At 1/1/24 £	Net movement in funds £	Transfers between funds £	At 31/12/25 £
<b>Unrestricted funds</b>				
General fund	172,585	78,930	(160,000)	91,515
Addison's and Pituitary Ireland	-	-	5,000	5,000
Emergency Reserve Fund	-	-	110,000	110,000
Website Development Fund	-	(18,811)	35,000	16,189
Living With Addison's Fund	-	-	10,000	10,000
	<u>172,585</u>	<u>60,119</u>	<u>-</u>	<u>232,704</u>
<b>Restricted funds</b>				
ADSHG Medical Research Fund	11,190	-	(11,190)	-
Addison's Ireland Fund	333	-	(333)	-
Endocrinology Travel Fund	64	-	(64)	-
Ronald Rogers - Gwent	633	-	(633)	-
RCGP module	5,000	-	(5,000)	-
Publications Review Reserve	1,900	-	(1,900)	-
Young and Newly Diagnosed Medical Research Reserve	210	-	(210)	-
Medical Research Fund	13,739	(25,140)	19,330	7,929
Hospital Saturday Fund Grant	-	2,000	-	2,000
The BIG Give	-	8,368	-	8,368
Neroscine Biosciences Fund	-	2,987	-	2,987
	<u>33,069</u>	<u>(11,785)</u>	<u>-</u>	<u>21,284</u>
<b>TOTAL FUNDS</b>	<u>205,654</u>	<u>48,334</u>	<u>-</u>	<u>253,988</u>

## 8. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
<b>Unrestricted funds</b>			
General fund	692,150	(613,220)	78,930
Website Development Fund	-	(18,811)	(18,811)
	692,150	(632,031)	60,119
<b>Restricted funds</b>			
Medical Research Fund	-	(25,140)	(25,140)
Hospital Saturday Fund Grant	2,000	-	2,000
The BIG Give	8,368	-	8,368
Neroscine Biosciences Fund	2,987	-	2,987
	13,355	(25,140)	(11,785)
<b>TOTAL FUNDS</b>	<b>705,505</b>	<b>(657,171)</b>	<b>48,334</b>

-The Medical Research Fund consists on monies donated to fund medical research and support medical professionals.

-The Hospital Saturday Fund Grant is designated (set aside by the trustees) to provide 5 x Paramedic Training Sessions in 2026.

-The BIG Give Fund is designated (set aside by the trustees) to provide 2 Member Get Togethers in 2026.

-The Neurocrine Biosciences fund is designated (set aside by the trustees) for the creation of updated emergency injection videos and the design and print of an information booklet for young people with adrenal insufficiency at Secondary School.

## 9. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 31 December 2025.

## 10. ADDITIONAL NOTES

i) The charity's core costs have been allocated based on staff activity as follows: Charitable activities 78% (Support 22%, Connect 22%, Advance 22%, Projects 10%, Shop 2%), Fundraising 20%, and Governance 2%.