

Newsletter of the American Parkinson Disease Association Greater St. Louis Chapter

Serving Missouri and Southern Illinois

IN THIS ISSUE

Willful or Stubborn Behavior?
It's Not Their Fault! 3
The Caregiver 4
Savoring Love 4
Letter from the President5
Research Opportunities to Explore
Focus on Fashion and Philanthropy6-8
What to Do When You Have PD and Need Hospital Care9
Tributes and Donations10-11
Optimism Events 12
Support Group Calendars13-14
Exercise Class Calendar 15
2015 GO! St. Louis 16



American Parkinson Disease Association

APDA Greater St. Louis Chapter

1415 Elbridge Payne Road, Suite 150 Chesterfield, Missouri 63017

314-362-3299 www.stlapda.org

OUR MISSION

Our mission is to enhance the quality of life for people with Parkinson disease, their families, and caregivers in our communities throughout Missouri and southern Illinois, and to provide funding for ongoing Parkinson research.



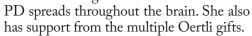
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This Year at APDA Center for Advanced Parkinson Research

I am delighted to provide this yearly update for the activities at the APDA Center for Advanced Parkinson Research at Washington University. We have had another excellent year of progress made possible by the support from the Greater St. Louis Chapter of the APDA and all our volunteers.

We have another new post-doctoral fellow this year, Dr. Jai Maiti, who completed his neurology residency at Washington University in 2013 and then completed one year of fellowship with the neuromuscle group. Fortunately, he caught the PD bug, and we captured him for our fellowship program with support from the APDA Chapter and a generous gift from

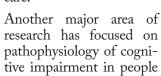
Jo and Fred Oertli. Dr. Maiti has begun working with Drs. Meghan Campbell and Scott Norris on neuroimaging studies related to cognitive changes that can occur in Parkinson Disease (PD). Dr. Tritia Yamasaki continues as a second-year fellow in Movement Disorders, and she has been working with Dr. Marc Diamond to investigate how



We also have a new faculty member, Dr. Brent Wright. He completed neurology residency and fellowship training in Movement Disorders at the Neurological Institute at Columbia University in New York. He will be involved in all aspects of care of people with PD, including our deep brain stimulation (DBS) program. We are delighted to have recruited him and look forward to working with Dr. Wright.

Investigation of DBS has been a major area of our research activities. We continue our studies on the effects of aiming the stimulation at different parts of the subthalamic nucleus (STN). Drs. Eisenstein and Black have led our team to a new, more accurate approach to mapping responses to DBS across different parts of the STN. This helps identify targets for benefit and minimizes side effects of DBS. Drs. Eisenstein, Hershey and others recently published an article describing how DBS can cause changes in mood, but these changes in mood depend upon previous illnesses that the person may

have had prior to DBS. In addition, Drs. Willis and Racette have published a recent study demonstrating disparities in how DBS is made available to different ethnic groups, despite having identical medical coverage through Medicare.



with PD. Recall that people with Alzheimer's disease (AD) have two abnormal proteins in their brains - tau and A-beta amyloid, whereas those with PD and thinking problems have abnormal alpha-synuclein with or without abnormal A-beta amyloid. Previous research has focused on determining differences and similarities between the causes of thinking problems in PD versus AD. This past year, we demonstrated that the distribution of A-beta amyloid has a different distribution in people with PD compared to those with Alzheimer's disease. This is more evidence that thinking problems that occur in people with PD are not usually due to co-existing AD. We also found that the amount of alpha-synuclein in spinal fluid correlates with A-beta

APDA GREATER ST. LOUIS CHAPTER

Deborah Dalin Guyer, MA, Executive Director guyerd@neuro.wustl.edu Sarah Schmerber, OTD/S Graduate student intern

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Disclaimer: The information and reference material contained herein concerning research being done in the field of Parkinson disease and answers to readers' questions are solely for the information of the reader. It should not be used for treatment purposes, rather for discussion with the patient's own physician.

This Year at APDA Center for Advanced Parkinson Research

continued from front page

in people with PD but not in people without PD. We just submitted a manuscript describing the relationship between MRI-measured functions of specific brain networks and the amount of alpha-synuclein in only the spinal fluid of people with PD. These findings suggest that alpha-synuclein deposition, rather than a deficiency of dopamine, is likely a key player in the disruption of such brain networks. Much of our work has revealed that dementia with PD is associated with abnormal cortical deposition of alpha-synuclein with or without abnormal A-beta but, in contrast to Alzheimer's disease, substantial contributions from tau do not play a role. We still need volunteers to participate in this study.

Dr. Earhart and her team continue to be incredibly productive, with multiple studies published this past year on various exercise and rehabilitation strategies to treat people with PD. Her studies range from ongoing dance therapy to using MRI scanning methods to investigate how various rehabilitation strategies affect the function of brain networks. Other work has included assessing metrics to predict falls, effects of DBS on gait, development of rehabilitation strategies to improve gait, and effects of community-based dance and exercise programs to reduce symptoms and mechanisms underlying freezing in PD.

We have made major progress in development and validation of neuroimaging measures of PD severity. Such measures are critical to determine whether any treatment can slow disease progression. Our findings prove that most of the molecular imaging (PET or SPECT scanning) measures of dopamine neurons to quantify PD progression accurately reflect only the degree of severity in early stages of PD. In another paper, we describe that PET measures aimed at a different part of the brain do not have this limitation and may be beneficial for following progression of PD. We continue to develop new radiotracers to measure different components of the dopamine pathways and related chemical messengers. This is particularly important as more information is revealing that some problems in PD may be due to defects in other systems and not caused by a deficiency of brain dopamine.

Finally, we made progress in development of a medication that has potential to slow PD progression. This work has been done in collaboration with Dr. Laura Dugan at the University of California in San Diego. She discovered a new drug called carboxyfullerene and we have completed a 10 year study to determine its effects in an animal model of PD. This study demonstrates that carboxyfullerene has potential to slow damage to the dopamine producing nerve cells that degenerate in PD. There are still many steps to determine whether this will be an effective treatment for people with PD and will require several years of study. We are now in the process of applying for grants to help us determine the precise manner in which this drug works, and then to seek FDA approval to do a study in humans. Of course, it is possible that this may not work in people with PD. Progress requires hard, steady work, so continue to be patient with this line of research.

These are just a few of the highlights of our research team's efforts. All of these studies have been made possible by the support that the APDA Greater St. Louis Chapter and the APDA Center for Advanced Parkinson Research grant have provided. Many people contribute to this work including Drs. Racette, Kotzbauer, Campbell, Hershey, Criswell, Cairns, Black, Eisenstein, Tian, Karimi, Norris, Ushe, Earhart, Foster, Zu, Xu, and Moerlein. Others in the group include Johanna Hartlein, Susan Donovan, Susan Loftin, and Hugh Flores.

Volunteers and caregivers make this research possible. Chapter support remains critical for us to make this progress. We hope that the Chapter will continue to support our APDA Center for Advanced Parkinson Research at Washington University. We need to keep working together to bring better treatments to people and families affected by PD. Many thanks go to Debbie Guyer, Executive Director of the APDA Chapter and Coordinator of the APDA Information and Referral Service, for all of her efforts, and to Susan Donovan, the administrative director of our APDA Center for Advanced Parkinson Research. Debbie and Susan have done incredibly effective jobs.

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Willful or Stubborn Behavior? It's Not Their Fault!

Paul Short, PhD, Licensed Neuropsychologist, Baltimore, MD. He is a member of the International Neuropsychological Society, the American Psychological Association, and an associate member of the American Academy of Clinical Neuropsychologists.



Paul Short, PhD

or the family, one of the most frustrating aspects of advancing Parkinson disease is apathy. In spite of our best efforts to motivate, direct, cajole and beg our loved one to practice speech or physical therapy exercises, go to the gym, resume old hobbies, call old friends, engage in pleasant conversation, or just get out of the house, we have no effect on their behavior.

truly

It is easy to feel they are being purposefully stubborn, indifferent, or resistant because they don't seem to care any

longer. Although they don't appear particularly sad, we might believe they are depressed because we hear mood disorders are so common among men and women with PD. However, treatment with antidepressant medication psychotherapy have done little to help. If anything, our loved ones seem to have experienced such a deep loss of emotion they don't seem to be feeling anything. There just seems to be something we should be able to do to help this person somehow re-engage in life and when we can't, it starts to feel like it is all their fault.

It isn't. Our loved one's connection to the world has permanently changed as a result of the PD. Their personality is completely different from an earlier time in their life and they have no control over the change.

Perhaps the biggest obstacle to

understanding apathy in PD is that we are using a colloquial definition for our description of a neurological state. I use the more appropriate term, like abulia, in place of apathy, it becomes easier to recognize that our loved one's outward presentation is the result of brain changes that have permanently altered the personality we once understood.

Abulia is commonly seen when neurological insult has occurred to the frontal and basal ganglia regions of the brain or the circuitry linking them. This type of damage is common with advanced Parkinson's and a host of other neurological disorders such as stroke or Alzheimer's. These areas are involved with initiative, planning and motivation, and dopamine plays a large role in how they function. When these pathways experience disruption, a person will begin to appear more passive, lack volition, be slower to initiate or respond conversationally, and exhibit constricted conversational content when they do speak. By comparison, neurologically intact individuals may show a wide individual variance to their levels of motivation, spontaneity, and emotional responsiveness, but these functions are never completely absent.

Although we are not neuroscientists, we all recognize that ultimately who we are and how we react to the world is somehow based in the brain. However, it is easy to forget that the integrity of brain functions is what allows each of us to engage in all the activities that constitute our "personality." The "me" those around us perceive can change when through no fault of our own, we have somehow lost some degree of neurological integrity through PD, an auto accident, or some other mishap to the brain.

> Of all the work I do with families touched by PD, I believe this to be the area in which I have the greatest impact. Paradoxically, this is because there is no way to treat the abulia medically. Effective treatment relies on helping the family cope with the permanence of the condition, beginning with focused interventions to limit frustration, anger and blame. Once family members appreciate that it is impossible

to force a person into doing what neurological compromise prohibits, it becomes possible to use behavior modification strategies to intervene many previously contentious

> situations. As most people are not trained for behavior modification, professional guidance and coaching can be very helpful.

Functionally, I think it is helpful that families not work too hard at teasing out motives for apathy and focus instead on the fact that neurological change is causing

personality change. Loss of motivation and initiative is easier to understand when it is viewed in the context of worsening PD rather than willful or stubborn behavior.

To view Dr. Short's keynote address, Your Face is Familiar-Do I Know You? from the Family Conference on October 26, visit our website, www.stlapda.org.

The Caregiver

Robin Felch

The following poem was written by the daughter of a Parkinson person to honor her father, who cares for her mother.

watch him when he doesn't know I am looking.

He helps her to the bathroom and in the bathroom. Those things, that for so many years she did so automatically.

He blow dries her hair and then straightens it with a flat iron — him, with the hands of a Logger. He holds her when she needs it.

He massages her body when the Parkinson's threatens to take over more completely, him, with the hands of a Logger.

Sometimes, the pain in her body is so great that it consumes her and he can do nothing but sit with her until it subsides.

He gets up with her during the night - sometimes 5 or 6 times - to the bathroom, or to roll her over or to put the covers back on....neither one gets much sleep.

He helps her get dressed each day and sometimes loses his patience trying to find that matching shoe among the basket of 50.

He helps her get ready for bed at the end of the day. Another day living with Parkinson's.

Sometimes, when he holds her and says he loves her, I have to turn my head so that no one sees my tears.

Sometimes he sighs, very deeply, From a deep place of sadness. Some days are harder than others.

Sometimes, when he doesn't know I am watching, I see that faraway look in his eyes and the incredible sadness that consumes him and then he collects himself and moves into the next moment.

Sometimes, she looks at him and realizes all that he does for her

It frustrates her that he needs to and yet she is so grateful for all that he does.

Some days Parkinson's is worse than others. Some days it rears its ugly head and challenges us all.

My dad — the Caregiver ... my mom, the one we all fight for and with. ■

Savoring Love

Eileen Kinsella

Grief and love companion one another deeply in day-to-day life dealing with chronic illness. In the years I kept my mother in my care, the maze of medical issues, appointments with doctors, therapies, diet and nutrition worked with constant reference to my ability to perceptively assess how she might be feeling.

The opportunity to love a spouse, parent, child, or loved one, without qualification or reservation, is truly special. Dropping into the timeless present where tasks of daily living are the most basic comfort care, there is an immense opening to the power of love itself. Tending to meals and staying connected to family and friends become inner bridges to what is most important in life, loving and being loved.

My mother was diagnosed with non-classic Diffuse Lewy Body Disease. Once a lively, talkative person who loved people, she became more and more quiet, less expressive in her final years of life. It was in those last years that we shared some of the most treasured times.

As I observed others meeting her for the first time, I felt blessed to have known her when she did not use a wheelchair, when she spoke with colorful descriptive language and was full of energy. Over time, I came to appreciate that amidst my sense of loss of who my mother once was, she was still someone I had known my whole life, someone I knew in a deep and unique way. As I listened closely to the unspoken, wordless language of our being together, what emerged was an understanding that she was in yet another era of her life, bringing to it all of her life experiences, making discernments and choices in the present.

Because my mother did not speak much, I searched for ways to reach her. Trying to tempt her appetite, I bought raspberries out of season for Sunday breakfast and served them all by themselves, heaped in a bowl with a dash of cream. Always frugal and mindful of seasonal fruits and vegetables, she said, "RASPBERRIES in the fall?!" For a brief moment, she was animated. I was thrilled to have her know that someone cared, someone still remembered what foods she liked, someone was spoiling her. And that someone was me, which made me feel full of the joy of loving and being loved.

Knowing my mother loved the outdoors, we sat outside for a little time each day in all seasons. In spring and summer, we would find a sun patch or dappled shade to sit in.

we would find a sun patch or dappled shade to sit in. When it got cold, she would sit bundled up with a soft blanket all around her to sniff the crisp air and look up at the stars in the night sky. In the fall, I would let the leaves pile up in the back yard so we could wheel the chair through them, the leaves rustling and whooshing with their dusty dry scent.

Her favorite soda was Diet Coke served from the soda machine over crushed ice. Tiny as she was, she did not need a diet soft drink, or any soft drink, but she loved the crushed ice and the familiar taste, so it was on "the list." We learned which grocery

stores nearby still had fountain sodas and driving in the car on hot afternoons, would stop for one.

Little by little we found a rhythm of being together in the car on the way to appointments, in elevators and offices, in quietude in the evening. After being discharged from the hospital emergency room, we might picnic in the car just for fun, to do something out of routine. It was fun to learn how grocery stores have pick-up food in individual portions for all kinds of tastes.

Slowly, I let go of hurried time. I let go of needing to know. I embraced feeling the fullness of love. Together we rested in the tender most inner reaches of our hearts. In this place was ongoing life review, along with all the emotions that come with

diminished strength, physical frailty, loss of identity as a person with a career, loss of place in the community at large. As we shed more and more of what was no longer needed, we met ourselves, mother and daughter, companions on a journey to wholeness. There in the inner reaches of our hearts, we found the permission to love fully with our whole being.

When we receive a diagnosis, it is only the beginning of a journey to making ourselves whole. It is a threshold to a land of new belonging. My time with my mother enriched and deepened me in ways that move me to speak to others going through the unique challenges of living with long term progressive symptoms.

Letter From the President

David Dankmyer, JD, LL.M., President, Greater St. Louis Chapter



Davie Dankmye

The holidays are approaching. It is a time for friends and family, and it is a time for giving. This includes those in the Parkinson community, like one of our St. Louis residents and Parkinsonians, Edna, who recently sustained an injury from a fall. With the help we provided through in-home care assistance, she is able to continue to live independently and engage in weekly exercise classes. She and many others depend on our Chapter for patient services and conducting promising research.

As of today, about 1.5 million individuals in this country alone have Parkinson disease. And each year more

than 132,000 individuals in this country are told "you have Parkinson disease." Receiving the diagnosis of Parkinson's is a life-altering moment for everyone: the individual receiving it, their care partner and family members. That is why it is sometimes referred to as a family disease.

However, thanks to your past generous donations to the American Parkinson Disease Association, Greater St. Louis Chapter, we have improved the quality of life for people with Parkinson disease—and their care partners and family members. In addition, your donations continue to fund the ongoing search for causes and a cure for Parkinson disease.

Want to know how your partnership makes a difference?

- In the last four years, our Chapter has provided nearly \$1.3 million for research (50%) and patient services (50%).
- Our Chapter serves more than 10,000 people with Parkinson disease, care partners and medical professionals each year from our new Parkinson Community Resource Center
- Our Chapter has facilitated the hiring of additional physicians (fellowship positions) dedicated to caring for people with Parkinson disease and conducting important research to find the cure for Parkinson disease.

We need your support as we continue to serve the expanding Parkinson community in Missouri and Southern Illinois. Your contribution will allow us to continue our community mission.

Thank you for your help. Best wishes for a happy holiday!

Research Opportunities to Explore

Exercise Study

Dr. Gammon Earhart, Professor of Physical Therapy at Washington University School of Medicine, is conducting an exercise study for people with Parkinson disease. Dr. Earhart and her colleagues are interested in seeing how exercise can be used to change things like walking, balance and brain activity. This study has participants coming in for one hour twice a week for three months to do stretching exercises. The classes are held near the Barnes-Jewish Hospital campus and parking is provided. Participants will come in for a physical evaluation and an MRI before and after three months of exercising. We also ask them to come back three months after completing the study for a physical evaluation. If you are interested, please call Martha at 314-386-1458 or email at hesslerm@wusm.wustl.edu.

Early Parkinson Disease Study

Dr. Brad Racette at Washington University School of Medicine is participating in a research study investigating a medication for Parkinson disease (PD). The purpose of this study is to test the effectiveness of an investigational drug, isradipine, in patients who are not yet in need of symptomatic therapy for PD. Isradipine is a medication approved by the U.S. Food and Drug Administration Agency (FDA) for the treatment of high blood pressure, but it has not been approved for the treatment of PD. Isradipine has been shown to slow the progression of PD by protecting dopaminergic neurons in animal models.

This study plans to enroll newly diagnosed PD patients not yet in need of symptomatic therapy. Participants will be assigned

continued on page 9



19th Annual Fashion Show

A Picture of Success!

Over 400 people joined us in the Versailles Ballroom at the Westport Sheraton Chalet on October 13, 2014, to support the APDA annual auction, luncheon, and fashion show. They happily took their seats after shopping for wonderful baskets, restaurant gift certificates, and one-of-a-kind items during the silent auction.

/im Hudson joined Kevin Steincross (Fox 2 KTVI-TV) as co-emcees, and they kept the commentary running and amusing. Dr. Joel Perlmutter spoke enthusiastically of the progress being made for people with Parkinson's and the promising research being conducted at Washington University School of Medicine. He also expressed his gratitude for APDA funding fellowships for promising young scientists such as Mwiza Ushe and Scott Norris, who later joined the staff and encouraged the guests to continue their support for patient services, programming, and research. Debbie Guyer, Executive Director, discussed the importance of research and recognized all the sponsors and volunteers for their time and effort putting together the fashion show. Honorary Co-Chair Lynda Wiens spoke on behalf of herself and her husband, Dr. Bob Wiens, about the impact that the APDA has had on their family.

The event was a huge success, raising nearly \$120,000 to support our mission, and we could not have done it without the help of our tireless volunteers. Lynda Wiens, Auction Chairperson, is the woman behind the creative and beautiful baskets. Our support groups, exercise classes, and fashion show committee secured wonderful items for the auction, and Lynda assembled them into enticing displays. Congratulations and deep appreciation go to our Fashion Show Committee members who went from shop to shop, restaurant to restaurant, collecting items and gift cards for the silent auction.

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Fashion Show Co-chairpersons Sherrie Rieves and Kathy Wunderlich gathered a lovely group of models and brought fresh ideas to the show. The guests were treated to fashions by new and returning local boutiques including Cha, Dandelions, Details Women's Boutique, Distinctions, Paperdolls, and Savvi Formalwear. A round of applause goes to our 32 models and boutique owners and designers who selected fashions from off their racks and fit our models for the show.

The Tremble Clefs, a singing group comprised of people with Parkinson disease, sang multiple numbers and provided entertainment for the event. The Tremble Clefs were led by music therapist extraordinaire, Linda McNair, MT-BC, and accompanied by Sandy Baldwin. Our guests each enjoyed receiving favors of cookies in the shape of dress forms created by Candis Theodoro of CT Cookie Treats.

A heartfelt thanks to all the volunteers, bankers, and runners who made sure the event progressed smoothly. Special recognition was given to our intern, Sarah Schmerber, who is spending the final semester of her Occupational Therapy Doctoral program learning about nonprofit charities. For many years now, volunteers from Elsevier come to help with the auction as their day of giving back to the community. We also had many APDA volunteers who help with our programs, assisting the staff before, during, and after the event. Thanks to all who attended the event - we hope you had a great time. For a complete viewing of all the photography taken by and courtesy of Carrie Zukoski and Zach Dalin, and video production by Larry Balsamo of Video Views, visit www. stlapda.org.

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Lancia Frozen Yogurt Lazy River Grill Llywelyn's Pub Mama Toscano's McArthur's Bakery Mia Sorella Milagro Modern Mexican Modesto Tapas Nadoz Café & Catering Naked Vine Napoli 2 Nippon Tei Japanese Restaurant & Sushi Bar Oceano Bistro P.F. Chang's China Bistro PW Pizza Pappy's Smokehouse Party Pastry Shop Paul Manno's Café Paul Mineo's Trattoria Peel Wood Fired Pizza Penn Station East Coast Subs-Fenton Pi Pizzeria Poptions! Popcorn Potbelly Sandwich Shop Prasino St. Charles Ricardo's Rich & Charlie's Restaurant Sarah's Cake Shop Schneithorst's Restaurant & Bar Sugo's Spaghetteria Talayna's The Blue Owl Restaurant & Bakery The Cheesecake Factory The Egg & I The Fountain on Locust The Melting Pot of Town & Country The Original Pancake House The Pasta House Co. The Tavern Kitchen & Bar

Kenrick's Catering

Kreis' Restaurant

The Wolf Three Flags Tavern

Trattoria Branica Truffles Veritas Gateway to Food & Wine

Vin de Set Rooftop Bar & Bistro Vitale's Bakery WildSmoke Smokehouse & Bar

Ya Ya's Eurocafe Zia's On The Hill

What to Do When You Have PD and Need Hospital Care

Allison W. Willis, MD, MSCl, Assistant Professor of Neurology, Assistant Professor of Biostatistics and Epidemiology Senior Fellow, Leonard Davis Institute Senior Scholar, Center for Clinical Epidemiology and Biostatistics University of Pennsylvania School of Medicine.



Allison Willis

Older adults who are diagnosed with Parkinson Disease (PD) are likely to be hospitalized, just like the general older adult population in this country. However, research suggests that having a diagnosis of PD may present some unique challenges when hospital care is needed. Whether the hospitalization is emergent or elective, here are suggestions for getting well when you also have PD.

Avoid a hospitalization! APDA funded research shows that individuals with Parkinson disease are hospitalized for

common medical conditions such as heart failure, infection or just like the general population. A *sudden* change in your medication benefit, energy level or clarity of thinking is not usually due to progression of PD, but to a new problem (such as an infection). Shortness of breath, sweating, fatigue, pain and confusion are also symptoms that should be discussed right away with your doctor. In addition to discussing new/sudden symptoms with both doctors, follow up regularly (yearly or more often) with your primary care physician, your gynecologist for preventative care, and other specialists if necessary to make sure your non-PD medical illnesses are under control. New treatments that can help you feel better, longer, are coming down the pipeline every year, but you have to be healthy enough to take them!

2 Get the right medications at the right time. If you do need hospitalization, your medication history will be very important. As mentioned above, most PD patients are admitted to the hospital for something other than PD; therefore, you need to do your part to make sure that you get your PD medications as close to your home schedule as possible. The first step to having a smooth medication transition is to have an established medication routine at home. If you fail to take your medications at the same time every day at home, you won't have a good sense of how you feel when the medication is on board, and when it isn't. Second, let the hospital physicians and nurses know the actual times that you take your PD meds, not the number of times per day. Don't say, "I take 300 milligrams of levodopa three times a day;" instead say, "I take 300 milligrams of levodopa at 7am, 12pm and 5pm." Hospitals work on a 24- hour medication

schedule; therefore "three times daily" means "7am, 3pm, and 11pm." Finally, if your PD medications are not coming on time and the delay makes you feel uncomfortable, speak up (nicely)! For elective surgeries, devise a plan of attack with your surgeon, in their office, before you schedule the surgery. Allow for follow-up communication between your surgeon and PD physician.

3 No wrong medications! By now, you have all seen the outstanding APDA-supported literature that lists those medications that should be avoided when you have PD because they can worsen PD symptoms or interact with PD medications. These lists are available on the STL-APDA website in an easy-to-print leaflet that you can keep in your wallet or purse with your medication list: http://stlapda.org/news/medications-to-avoid-or-use-with-caution. Request a medication wallet card!

4 Involve a specialist in your care. APDA supported research has shown that neurologist's involvement in PD care reduces hip fractures, PD- related hospitalizations and health-care costs and improves survival. More recently, we also found that having a neurologist involved in your care after your first hospitalization for a PD- related issue reduced your chances of being admitted again for that same problem. And yet, only about 50% of older adults diagnosed with PD receive care from a neurologist. Efforts are under way to make it easier to access a neurologist for people who live in remote areas, but sometimes you must advocate for yourself and your loved ones.

Although a diagnosis of Parkinson disease brings with it many life changes, the continued dedication of physician, patient, research and advocacy groups will continue to ease the burden until we find a cure.

Research Opportunities to Explore

continued from page 5

randomly to receive either the active study drug or a pill that looks like the study drug but has no active ingredients (placebo).

To pre-qualify for this study, the participant must:

- Have a diagnosis of PD of less than 3 years.
- Be at least 30 years old at the time of diagnosis.
- Not be taking dopaminergic therapy at the time of study enrollment.
- Not be pregnant, lactating or intend to become pregnant during the course of the study.
- Further restrictions apply

Participation will last approximately 36 months and include 12 office visits and 4 phone calls. For more information, please contact Karen McDonell at 314-747-0514 or mcdonellk@neuro.wustl.edu.

For other study information, please visit www.STEADYPD3. com or www.ClinicalTrials.gov.

Parkinson Disease and Troublesome Dyskinesias (involuntary jerking/twisting)

Dr. Susan Criswell at Washington University School of Medicine is participating in a research study using an investigational medication for Parkinson disease (PD). The purpose is to test the safety and effectiveness of amantadine HCI Extended Release Capsules in patients who have troublesome levodopa induced dyskinesias (involuntary jerking and twisting). Amantadine IR (Immediate Release) is currently approved by the FDA for the treatment of PD.

continued on page 11

Tributes & Donations 7/1/14 - 9/30/14

Tributes are a wonderful way to acknowledge the memory of a beloved person as well as honor those who mean so much to you. Tribute envelopes can be obtained from the Center at 314-362-3299. Contributions can be made directly on the APDA Greater St. Louis Chapter website, www.stlapda.org.

Honoring

Earl Adkison Ned & Michele Doelling

P. Dennis Barks Sarah & Daniel Barks

Speedy and full recovery of Mary Buck Chesterfield Support Group Debbie Guyer

50th wedding anniversary Mr. & Mrs. Daniel Bindler Sue & Phil Schreiber

Terry Conner Lynne Conner

Recovery of William W. Delaschmit Amylee Hellwig Carl & Doris Midgett Sue Reeves

Your Award from Webster University Eileen Edelman Jerry & Pam Brown

Wedding Anniversary of Jimmie & Bonnie Élder Bonnie Elder

Birthday of Bill Erdman Christy Hayes

40th birthday of Todd Farber Phil & Sue Schreiber

Birthday of Bill Gerth III Bill & Erika Gerth

75th birthday of **Steven Goldfarb**Sue and Phil Schreiber

Engagement of Michael Goldsticker & Sarah Boyce Larry & Andi Goldsticker

The birthday of Debbie Guver Marc Schreiber

Speedy recovery of Larry Hartstein Randee Fendelman

50th wedding anniversary Mary & Chuck Hughes Julia & Cecil Baldwin Patricia Butler Uriel & Reba Carlton Joe & Marlene Crane Holly Dudley Alan & Janet Finke Jeffrey & Melody Gadl Les & Deanna Hudson Marion Lueckenotte Robert & Rita Mock Charles & Nancy Riley Mr. & Mrs. R.J. Shryock

Doris Squires Ernest & Carol Taylor Larry & June Wagner Dianne Wolfmeier Jane Wyatt

50th wedding anniversary Dr. & Mrs. Morris Joftus Art & Fran Poger

Walk/Run Team Kinkade Robert & Catherine Booker

Jeanie Lorne Concord Village Lions Community Services Foundation

Birthday of Nat Kessler Gert Hulbert

Kathryn McDaniels Julie Rhoads

Linda McNair Charles Manley & Kimberly Perry

Mary Phillips Anonymous

Special birthday of Jeff Sandler Gert Hulbert

Anniversary of Sylvan & uth Sandler Ğert Hulbert

Mike Scheller Charles Manley & Kimberly Perry

Speedy recovery of Phil Schreiber Karl & Debbie Guyer

Bonnie Sherrill Sandy Schrock

Martin Shrader Judith & Stephen Ellenburg Judy Ugalde

Speedy recovery of Mrs. Herman Špade Pam & Jerry Brown

Linda Stites Renee Stites

Birth of Kennedy Marie Thierath Stan & Donna Wilensky Terri Taylor Bob & Ďonna Cohen

Speedy recovery of Stan Wilensky Karl & Debbie Guyer

Remembering

Steve Bassman Sharna Kohner

Gerry Berg Sharna Kohner James Broaddus, Sr. Charles & Mary Sharp

Bill Bruchhauser Janie Walter

Russell Buehlhorn Sandy Steppig

Barbara J. Burns Sam Burns

Loyce Campbell Katheia Corrigan

Esther Chambers Ryan & Carol Jones

Jose Chavez Tom Casserly Jerry O'Guin Tabitha Perkins Lenore Wills

Bob Cohen Fran & Sid Axelbaum

James K. Coleman Denis P. Repa

Domenic (Dan) Cusanelli Bernice Barnaby Geraldine Finazzo Kelly Webb-Little Pat MacKeen Elizabeth Newbern Robert & Sandra Polanc Ruth & Don Solomon Mark & Susan Suardi William & Carmen Webb Dr. Jae & Chi Yang

Edmond Daffron Helen M. Daffron

Harry & Lillian Dalin Debbie & Karl Guyer

Robert Dealey Marie Dealey

W. F. Diiulio Brian Diiulio

Nat Dubman Brian Diiulio

Greg Eveloff Sherry Wolff

Father of Robin Feder Gail & Larry Glenn

Mary "Marie" Fey Daniel & Rhonda Cole Anthony & Anna Daus Laura Hillerman Alisha Holdener Frank Jakovic Vince & Julie Lindwedel Chris Marchioro Bill & Jane Muich Robert & Maureen Muich Ginny Pruetzel Linda Reinheimer Angelo & Dolores Vlaich

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Edwin Levis, Jr. Rita G. Levis

Roger Ling Wilma Villinger

Ralph Lowenbaum III Dolores Weinstein

Dominic Martise Roxanne & Dennis Lepper

continued from previous page

Norman McFarland Missy & Doug Miller

Loretta Miller Terri Hosto Jeffrey & Miriam Rich

Barry Muchnick Jerry & Pam Brown

Patricia Nigro Jean H. Byron

Dorothy Jean Olliges Dick & Margie Zimmerman

James Peterson Marty Eckert Leo Éllison The Friday Swingers Golf Florence Hoey Terri Hosto Mary Murphy-Overmann Jim & Judy Nelson Hank & Joan Schlichter

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Rita & Barry Worth

Sister of Jo Ann Sandler Fran & Sid Axelbaum

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Valerian Simanek Lynne Conner

Myrtle Spirtas Jill Stein

Mrs. Robert Stolz Jill Stein

Saralee Suratt Pam & Jerry Brown

Emma Lou Thompson Gary Underwood

Marilyn Trentman Kerry & Tom Marsh

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Father of Bonnie Zwibelman Gail & Larry Glenn

Norma Ziegenhorn Jim & Barb Kienstra Don Ziegenhorn

General Gifts up to \$99

David & Bernita Abel Adepero Adewale Shameem Ahmed Nancy Anderson Atlas Roofing Co. Bill & Ada Billings Regis & Louise Blutas Allen & Gayle Brouk Dick & Nancy Chin Rich Distler Lou Fassi Norman V. Giovannini Richard & Jeanette Glaenzer Dan Goff Edith Kapfensteiner Charles & Pat Kloepfer Ruth A. Langhauser David Michael Lansdown John T. Laws Sanford & Dass Lebman Jerome & Elizabeth Lester Christel Maassen Nancy McKellar

Char Ann Meloney Richard Miller John & Jane Polansky Kerry & Carol Price Charlie & Jan Rohn Ed & Sandy Scherry Patrick & Janice Scott Seniors Helping Seniors Lynn Smith Beverly Spindler Marcia & John Thompson David Wiese

General Gifts \$100 - \$499

William & Kathryn Allen Bill & Nancy Anderson Bill & Ada Billings Preston & Stella Bouie Tom Bruno Joe Burnett Robert Coulter Patsy & David Dalton Don & Diane Donlon Grace L. Evans Patricia Foster Erika & Bill Gerth, Jr. Michael Horrell David Michael Lansdown Dale & Norma Plank Martin Shrader & Jean Cindy & David Smalley St. Joan of Arc Athletic Association Tom & Laura Traber Erin Voegtli Don Welge

General Gifts \$500 - \$999

Burt & Pat Mandel Dayton & LeAnn Mudd\

General Gifts \$1,000 - \$9,999

Bahr Foundation Tom & Charlotte Benton Michael & Nancy Klein Sima & Philip Needleman Southern IL PD Supp. Gr.

Research Opportunities to Explore

continued from page 9

This study will test the safety and effectiveness of amantadine HCI extended release capsules to determine if they can reduce levodopa-induced dyskinesias for PD patients. We want to find out what effects, good and/or bad, it has on you and your Parkinson disease.

To pre-qualify for this study, the participant must:

- Be 30-85 years old
- Be diagnosed with idiopathic Parkinson disease
- Be taking levodopa at least 3 times per day, for at least the last 30 days
- Be experiencing levodopa induced troublesome dyskinesias
- Not have taken amantadine within the last 30 days
- Have no history of Deep Brain Stimulation (DBS)
- Additional criteria apply

Participation will last approximately 29 weeks and includes 11 office visits. At the end of this study, you may have the option to transition to the EASE LID 2 Study, which is a long-term open label study of the same drug, lasting approximately 57 weeks and includes 9 office visits. The study drug is administered in a capsule form, which you swallow, taken at bedtime.

For more information, please contact Karen McDonell at 314-747-0514 or mcdonellk@neuro.wustl.edu.



These groups with a Parkinson connection conducted successful fundraising events, and we wanted to showcase their efforts to inspire you to consider small ways you can increase awareness and help generate funds to ease the burden and find a cure for Parkinson's. Take the challenge and host your own Optimism event. We will all benefit from your individual efforts.

A Casual Day Campaign at the KBM Group Health Services in Chesterfield

Employees at the KBM Group Health Services in Chesterfield participated in a quarter-long campaign to raise funds for Parkinson disease, in honor of the owner's father-in-law who is battling the disease. Donations were collected for a period of 13 weeks, as employees purchased the privilege



of dressing down on casual Fridays by making a donation to support the Parkinson's community. Almost \$2,500 was raised during this quarter, proving that dressing down never felt so good (both physically and emotionally)!



Knights of Columbus Journey for Charity

Bob Weber participated for the first time in the Knights of Columbus Journey for Charity Tractor Cruise. Bob's wife, Carol, facilitates our Washington, MO, Support Group. Bob collected \$843 during this 30-mile tractor cruise which begins in St. Claire, MO and ends in Washington, MO. This is the eighth year for such an event and Bob's first year participating. Each tractor owner chooses a favorite charity, and Bob chose to collect for the American Parkinson Disease Association and we're awfully glad he did! CONGRATULATIONS on a job well done. We hope to see Bob back in the tractor cruise next year, raising more money to further our mission of easing the burden and finding a cure.

Bob Weber

Pie in the Face

The Belleville Township High School District No. 201 contributed \$136 as a donation from faculty and staff members at Belleville Township High School East. The money was collected in response to a pie challenge from their friend and former colleague, Dale Zink. Dale recently informed his friends that he had been diagnosed with Parkinson Disease and is already hard at work raising funds to further the mission of improving quality of life for individuals with Parkinson disease while researchers are hard at work finding a cure.



Jack Strosnider, Debbie Guver, Zach Belew, Jeanie Lorne

Concord Village Lions Club

Zach Belyew from the Concord Village Lions Club presented a check to Jeanie Lorne of Garden Villas South Retirement Community for her efforts at their annual golf tournament. Jeanie immediately "paid it forward" by asking Jack Strosnider, South Side Support Group facilitator, and Debbie Guyer, Executive Director of the Greater St. Louis Chapter, to accept this check to be used for funding the Parkinson Support Groups in our community. Working together in partnership with Delmar Gardens Family and the Concord Village Lions Club, we graciously accepted this \$1,500 gift and applaud their efforts and generosity.



Missouri Support Group Calendar

Sponsored by the American Parkinson Disease Association, Greater St. Louis Chapter

Our support groups meet once a month or as noted. Support group day and time may change periodically. For current updates on support groups and exercise classes, check our website, www.stlapda.org, or call the APDA Information & Referral Center or the facilitator. Information that has changed since the last **LiNK** appears in **bold**.

City	County	Meeting Site	Day of Meeting	Time	Leader(s)	Phone
Ballwin	St. Louis	Meramec Bluffs Care Center 40 Meramec Trails Dr., Activities Rm.	4th Tuesday	2:00 PM	Gayle Truesdell	636-923-2364
Cape Girardeau	Cape Girardeau	Cape Girardeau Public Library 711 N Clark Street, Oscar Hirsch Room	3rd Monday	6:00 PM	Desma Reno, RN, MSN	573-651-2939
Chesterfield	St. Louis	APDA Community Resource Center 1415 Elbridge Payne, Suite 150	1st Tuesday	10:30 AM	Mary Buck Nancy Rapp	636-532-6504 636-537-3761
Chesterfield	St. Louis	For Caregivers Only APDA Community Resource Center 1415 Elbridge Payne, Suite 150	2nd Monday	10:30 AM	Dee Jay Hubbard	314-362-3299
Columbia	Boone	Lenoir Community Center 1 Hourigan Drive	1st Thursday	4:00 PM	Patsy & David Dalton Doris Heuer	573-356-6036
Creve Coeur	St. Louis	Pre/Post-DBS Group Missouri Baptist Medical Center 3015 N. Ballas, Main Parking Garage 4th fl. CLI Rm. 419	3rd Tuesday	6:30 PM	Joe Vernon	314-614-0182
Creve Coeur	St. Louis	Young Onset Living and Working with PD Missouri Baptist Medical Center 3015 N. Ballas, Main Parking Garage 4th fl., CLI Rm. 419	3rd Tuesday	6:30 PM	Doug Schroeder	314-306-4516
Festus/ Crystal City	Jefferson	Disability Resource Association 130 Brandon Wallace Way	3rd Tuesday	1:00 PM	Penny Roth Sara Dee	636-931-7696 x129
Florissant	St. Louis	Garden Villas North 4505 Parker Rd.	4th Thursday	11:00 AM	Nancy Robb	314-869-5296
Jefferson City	Cole	Capital Regional Medical Center SW Campus, Cafeteria	3rd Wednesday	3:00 PM	Jennifer Urich, PT	573-632-5440
Joplin	Jasper	Byers United Methodist Church 1730 S. Byers, Gymnasium	Every Monday	3:00 PM	Nancy Dunaway	417-623-5560
Kansas City	Jackson	VA Medical Center 4801 Linwood Blvd. Hall of Heroes Room	3rd Tuesday	11:00 AM	Jesus Torres Nikki C. Caraveo, RN, BSN, CNRN	816-861-4700 x56765
Kirkwood	St. Louis	Kirkwood United Methodist Church 201 W. Adams, Room 201	4th Tuesday	7:15 PM	Terri Hosto, MSW, LCSW	314-286-2418
Ladue	St. Louis	The Gatesworth 1 McKnight Place	2nd Wednesday	1:00 PM	Maureen Neusel, BSW	314-372-2369
Lake Ozark	Camden	Lake Ozark Christian Church 1560 Bagnell Dam Blvd.	3rd Thursday	Noon	Patsy Dalton David Dalton	573-356-6036 573-434-4569
Poplar Bluff	Butler	Poplar Bluff Regional Medical Center 3100 Oak Grove Rd. Ground Floor Education Room 3	2nd Monday	6:00 PM	Charles Hibler register with Beryl or Dana	573-785-6222 855-444-7276 573-776-9355
Rolla	Phelps	Phelps County Regional Medical Center, Pulaski Room, 1000 W. 10th St.	4th Thursday	2:30 PM	Sarah Robinson	573-201-7300
South St. Louis	St. Louis	Garden Villas South 13457 Tesson Ferry Rd.	2nd Wednesday	10:00 AM	Jack Strosnider	314-846-5919





Missouri Support Group Calendar

City	County	Meeting Site	Day of Meeting	Time	Leader(s)	Phone
Springfield	Greene	Mercy Hospital 1235 E. Cherokee	2nd Thursday	2:00 PM	Randi Newsom, RN, BSN	417-820-3157
St. Peters	St. Charles	Spencer Road Library 427 Spencer Rd., Room 259	1st Tuesday	1:00 PM	Sherrie Rieves Ann Ritter, RN	636-926-3722
Ste. Genevieve	Ste. Genevieve	Ste. Genevieve County Mem. Hospital Education Conf. Room, Hwy. 61 & 32	2nd Wednesday	10:00 AM	Jean Griffard, RN	573-543-2162
Trenton	Grundy	Royal Inn 1410 E. 9th Street	1st Thursday	10:00 AM	Novy & Mary Ellen Foland Gloria Koon	660-357-2283 660-485-6558
Washington	Franklin	Washington Public Library 410 Lafayette Avenue	2nd Monday	6:30 PM	Carol Weber	314-713-4820
Webster Groves	St. Louis	Bethesda Institute 8175 Big Bend Blvd., Suite 210	Last Friday	10:30 AM	Laurel Willis, BSW	314-373-7036



Illinois Support Group Calendar

Our support groups meet once a month or as noted. Support group day and time may change periodically. For current updates on support groups and exercise classes, check our website, **www.stlapda.org**, or call the APDA Information & Referral Center or the facilitator. Information that has changed since the last **LiNK** appears in bold.

City	County	Meeting Site	Day of Meeting	Time	Leader(s)	Phone
Alton	Madison	Senior Services Plus 2603 N. Rodgers Ave.	2nd Tuesday	9:30 AM	Kim Campbell	618-465-3298 x146
Belleville	St. Clair	Southwestern Illinois College (PSOP) 201 N. Church St., Rm 106	2nd Monday	1:30 PM	Jodi Gardner	618-234-4410 x7031
Carbondale	Jackson	Southern IL Healthcare Headquarters University Mall	1st Wednesday	1:00 PM	Bill Hamilton, M.D.	618-549-7507
Champaign	Champaign	Savoy United Methodist Church 3002 W. Old Church Road	Every Monday	10:00 AM	Charles Rohn Chuck Arbuckle	217-549-6167 217-586-3100
Decatur	Macon	Westminster Presbyterian Church 1360 West Main Street	3rd Thursday	1:30 PM	John Kileen	217-620-8702
Glen Carbon	Madison	The Senior Community Center 157 N. Main St.	3rd Wednesday	10:30 AM	Nancy Goodson Rich Rogier Jeanette Kowalski	618-670-7707 618-288-3297 618-288-9843
Jacksonville	Morgan	Passavant Area Hospital 1600 W. Walnut–Meeting Room 2	1st Wednesday AprJune, AugSept.	6:00 PM	Karen Ladd	217-243-4904
Mattoon	Coles	First General Baptist Church 708 S. 9th St.	Last Tuesday	1:30 PM	Roy and Kay Johnson	217-268-4428
McLeansboro	Hamilton	Heritage Woods – Fox Meadows 605 S. Marshall Ave., Dining Room	1st Wednesday	1:00 PM	Paula K. Mason	618-643-3868
Springfield	Sangamon	St. John's Rehab. @ Fit Club South 3631 S. 6th. Street #C	3rd Sunday	2:00 PM	Wendy White- Mitter, RN	217-544-6464 x47756

LINK November 2014 Volume 28, Issue 4



Exercise Classes

The APDA now offers 13 exercise classes that meet weekly in the Greater St. Louis area. Exercise is essential to managing Parkinson symptoms and slowing the progression of the disease. Our patient services funding comes from donations and is limited, so we encourage those who wish to attend multiple classes to make a \$5 per week donation. This minimal donation helps us to defray the cost of the classes which run around \$10 per person to cover the instructors' salaries, room rentals, and equipment. This donation request is on an honor system, and we don't turn anyone away from attending as many classes as they choose. To make a donation for exercise classes, use the blue envelope in your newsletter and note that it is for exercise class. Many people choose to pay quarterly to reduce the number of checks they write each month. Any amount you can contribute is used exclusively for our patient services to keep these programs free or at little cost to our patients.

Our exercise classes meet once a week or otherwise as noted. Information that has changed since the last **LiNK** appears in **bold**. Attend one class per week at no charge, or for \$20/month attend as many classes as you want. No RSVPs are required. Check our website, **www.stlapda.org**, or call to find out any changes since publication.

City	County	Meeting Site	Day of Meeting	Time	Leader(s)	Phone
Clayton	St. Louis	The Center of Clayton 50 Gay Ave., Mind/Body Room	Wednesday & Friday	2:00 PM	Mike Scheller, PTA	314-289-4202
Chesterfield	St. Louis	St. Luke's Deslodge Outpatient Center 121 St. Luke's Center Drive Conference Rooms 1 & 2	Monday	10:00 AM	Sarah Farnell, OT	314-205-6934
Chesterfield	St. Louis	Friendship Village 15201 Olive Blvd. Friendship Hall-Door #5	Tuesday	1:30 PM	Jessica Andrews	636-733-0180 x7719
Chesterfield	St. Louis	Tai Chi APDA Community Resource Center 1415 Elbridge Payne, Suite 150	Wednesday or Friday	10:00 AM 11:30 AM	Craig Miller	314-362-3299
Creve Coeur	St. Louis	Aquatic Exercise Rainbow Village 1240 Dautel Lane	Fall Session Oct. 6–Dec. 12	1:00 PM Tuesdays	Brenda Neumann	636-896-0999 x21
Florissant	St. Louis	Garden Villas North 4505 Parker Rd.	Tuesday	10:00 AM	Bobby Lautenschleger, PTA	314-355-6100
Joplin	Jasper	United Methodist Church 1730 Byers Ave.	Monday	2:15 PM	Nancy Dunaway	417-623-5560
Kirkwood	St. Louis	RehabCare 439 S. Kirkwood Rd., Ste.200 Park in rear	Thursday	1:00 PM	Brandon Takacs	618-971-5477
Ladue	St. Louis	Tremble Clefs Singing Salem United Methodist 1200 S. Lindbergh Blvd. Lower Level Choir Room	Saturday	1:30 PM	Linda McNair & Linda Morton	314-362-3299
South St. Louis County	St. Louis	Garden Villas South 13457 Tesson Ferry Rd.	Monday	11:30 AM	Mike Scheller, PTA	314-289-4202
St. Peters	St. Charles	Barnes-Jewish St. Peters Hospital Healthwise Center 6 Jungermann Circle	Every Tuesday except 1st Tuesday	11:00 AM	Holly Evans, COTA	636-916-9650
St. Peters	St. Charles	Aquatic Exercise St. Charles YMCA 3900 Shady Springs Ln.	Fall Session Oct. 6–Dec. 12	2:00 PM Thursdays	Brenda Neumann	636-896-0999 x21
Lake Ozark	Camden	Lake Ozark Christian Church 1560 Bagnell Dam Blvd.	Monday	4:00 PM	Alice Hammel, RN	573-964-6534

APDA-Greater St. Louis Chapter

November 2014 LiNK



Help us manage our expenses by letting us know when you move, if you want to be removed from the mailing list, or if you'd rather receive an electronic version. Just call 314-362-3299 or email guyerd@neuro. wustl.edu to let us know! Thank you in advance for helping us spend our resources wisely!

Thank you for raising your voice.
Thank you for creating awareness.
Thank you for your gifts of financial support.
Thank you for your gift of time.
Thank you for influencing change.
Thank you for advancing research.
Thank you to those who provide care.
Thank you to those who fight and don't let this disease define them.

This is a time for reflection and thanksgiving, but the words "thank you" cannot fully express how grateful we truly are. In addition to our words, please let our unyielding actions of providing care and support and our relentless quest to advance research serve as a sincere wholehearted "thank you."

Washington University School of Medicine American Parkinson Disease Association Campus Box 8111 660 S. Euclid Ave. St. Louis, MO 63110 Address Service Requested

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Join Team APDA at the 2015 GO! St. Louis Marathon

e are excited to announce that our chapter of the American Parkinson Disease Association (APDA) has once again been chosen as an official charity for the 2015 GO! St. Louis Marathon & Family Fitness Weekend. GO! St. Louis will take place the weekend of April 11-12, and will include a marathon, marathon relay, half-marathon, mature mile for adults 60+, and children's fun runs. Last year we raised \$61,440, which placed APDA clearly as the top fundraising charity from among all the organizations participating last year and was almost four times our premiere year fundraising goal! Our goal for 2015 is to raise \$100,000. One hundred percent of funds raised support Parkinson research nationally and the APDA Information and Referral Centers in host institutions, such as the one at Washington University Medical School, across the country.

Help us raise awareness for Parkinson disease by joining Team APDA and participating in one of the GO! St. Louis events as a walker or runner.



As a Team APDA participant, you will receive:

- Free race registration.
- Team t-shirt.
- Discount shopping day at Big River Running.

In exchange, team members are asked to raise a minimum of \$250 per individual or \$1,000 for a family of up to 6 members.

If you're interested in participating or volunteering in the GO! St. Louis on April 11-12, 2015, please contact Deborah

Guyer or Sarah Schmerber at 314-362-3299 or guyerd@neuro.wustl.edu. Stay tuned to our website www.stlapda.org or Facebook page www.facebook.com/APDAGreaterStLouisChapter for more information and updates.

Save The Dates 2015

April 11-12

2015 GO! St. Louis Marathon & Family Fitness Weekend.

April 19

PEP Meeting with Dr. Mohammed Hassan, University of Connecticut

May 18

APDA Golf Classic in Memory of Jack Buck

October 12

APDA annual Auction, Luncheon, Fashion Show