

IN THIS ISSUE

We Are Grateful For You	1
What "Big Data" Tells Us about Prodromal PD	3
Unintentional Weight Loss	4-5
New Year, New You – You Can Change!	6-7
Tributes And Donations	8-11
Parkinson Prom	11
Inaugural Midwest Parkinson Congress Receives Rave Reviews!	12-13
Hope in Motion - Optimism Walk	14
That's A Winner!	14
Optimism Events	15
While Emerging Science Unfolds – Another Point of View	15
The Knotty Problem of Cognition and Disability Claims	16
Support Group Calendars	17-18
Exercise Class Calendar	19
Website Notice	20
Upcoming Events	20



GREATER ST. LOUIS CHAPTER

Strength in optimism. Hope in progress.

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Check out our Facebook page at www.facebook.com/APDAGreaterStLouisChapter



Our Twitter feed at [@APDASTLouis](https://twitter.com/APDASTLouis)



And our Youtube channel at [Youtube.com/APDAGreaterStLouisChapter](https://www.youtube.com/APDAGreaterStLouisChapter)



OUR MISSION

Every day, we provide the support, education and research that will help everyone impacted by Parkinson disease live life to the fullest.

WE ARE GRATEFUL FOR YOU

DEBBIE GUYER, EXECUTIVE DIRECTOR, GREATER ST. LOUIS CHAPTER



I was seeking new ways to express my gratitude to you and came across these two thoughts: *Gratitude can transform common days into thanksgivings, turn routine jobs into joy, and change ordinary opportunities into blessings. Gratitude turns what we have into enough.*

If you supported the Greater St. Louis Chapter of the American Parkinson Disease Association (APDA) in 2017, we are most grateful for your generosity. As we turned

the calendar page from December to January, we concluded our annual year-end giving campaign having collected over \$95,200 in gifts from 350 donors who believe in our ability to provide the support, education and research that will help everyone impacted by Parkinson disease live life to the fullest each and every day. That is the mission of the APDA, and we invite you to visit the Resource Center to pick up valuable literature, participate in monthly support groups, join us for weekly exercise classes taught by trained professionals who know and understand Parkinson disease, learn about clinical trials, or visit with the professional staff who are all eager to assist you. It has truly been an impactful 2017,

and as we look back with gratitude, we look forward with hope and excitement for 2018.

Because of donors' generous support, we were able to add another part-time Wellness Program Coordinator to our staff, Amanda Landsbaum, MS, OTR/L. She is eager to continue our positive partnerships with local universities and expand our programming to meet even more of your needs. The Greater St. Louis Chapter is excited to announce five unique opportunities to add to your

continued on next page

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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.

WE ARE GRATEFUL FOR YOU

CONTINUED FROM PAGE 1

calendars this year. The following is a brief description of some of these special programs starting this year.

COGNITIVE STIMULATION THERAPY GROUP

The Cognitive Stimulation Therapy (CST) Group is designed to address social and communication aspects to improve quality of life for those with thinking or memory difficulties. This is under the direction of graduate speech therapy students from the Department of Communication Sciences & Disorders at Saint Louis University and APDA staff, and is slated to begin in February.

COMMUNICATION GROUP

We will offer a multi-week group designed to explore new tools and strategies focused on increasing communication abilities for individuals with Parkinson disease (PD) who may have limited verbal expression skills as their disease progresses. This will also be in partnership with graduate speech therapy students from the Department of Communication Sciences & Disorders at Saint Louis University.

TECHNOLOGY TO ASSIST PEOPLE LIVING WITH PD

An educational in-service highlighting technology and devices that can make life easier will focus on methods to assist with using a computer, tablet and cell phone, and provide information regarding other devices to assist with daily life tasks. This session will take place in April and is being presented by Maryville University Occupational Therapy graduate students.

WELLNESS COURSE

In the spring, we will once again offer our six-week Wellness Course that focuses on a different topic each week, providing education and support for people living with Parkinson's and their care partners on how to effectively

manage living with PD.

CARE PARTNER SUPPORT AND SOCIAL ACTIVITIES

Throughout the year we will be adding programming created to give care partners a break, as we know the impact that Parkinson's has on families. This will include "take-a-break" days, along with establishing care partner groups that will participate in regular social outings.

YOUNG-ONSET PROGRAMMING

We are working to develop programs for individuals diagnosed with young-onset PD, as those numbers are also growing. This special programming will be accessible to individuals who are working and have young families. We are partnering with Washington University Occupational Therapy graduate students who will first research the needs of the young-onset population, and then recommend evidence-based programming that can be implemented by our experienced staff.

We thank you again and again for enabling us to add valuable personnel and unique programming. These programs are only possible through the support received throughout the year at our fundraising events such as the annual Golf Classic, Optimism Walk, Speaker Series and our year-end campaign. It allows us to meet the needs of an ever-growing population of individuals and families impacted by Parkinson disease.



If you would like more information about any of these programs or to register, please contact Amanda at 636.778.3377 or by email: alandsbaum@apdaparkinson.org.

WHAT “BIG DATA” TELLS US ABOUT PRODROMAL PD



BRAD A. RACETTE, MD, FAAN, ROBERT ALLAN FINKE PROFESSOR AND EXECUTIVE VICE CHAIRMAN OF NEUROLOGY, WASHINGTON UNIVERSITY SCHOOL OF MEDICINE

As people with Parkinson’s (and their care partners) know, there are currently no medications that slow the progression of Parkinson disease (PD). This is not for lack of trying. Since the late 1980s, there have been dozens of attempts to slow the progression of PD in “neuroprotection” clinical trials. There is growing concern that one reason for the failure of medications to slow PD progression is that once people with PD

are symptomatic enough to present to the doctor, it may be more difficult to detect a drug’s disease-modifying effect. Nearly all PD neuroprotective clinical trials are conducted in people who are newly diagnosed and untreated. This represents a very short window in a person with PD’s disease and may not be sufficiently long enough to identify a disease-

modifying effect. These failures have led to a substantial investment by the National Institutes of Health and numerous PD foundations to study the period of time before people develop motor symptoms of PD, the prodromal period. The prodromal period is the phase during which people often have non-motor symptoms of PD but have not yet come to medical attention. This period may include up to 10-20 years prior to onset of motor symptoms of PD and could represent a period during which medications might be more likely to be effective in slowing or preventing motor onset.

Over the last few years, our laboratory has conducted several studies investigating prodromal PD, and some of the initial results led by Dr. Susan Searles Nielsen were published in the journal *Neurology* in late 2017. The primary goal of these studies was to use administrative health data from Medicare to develop a predictive model to help identify people with a high risk of developing PD. To conduct this study, we obtained all medical claims data on both 89,790 people with PD (diagnosed

included 536 diagnosis and procedure codes and demonstrated how different people with PD were from the general Medicare population. For example, people with PD were much less likely to have cardiovascular disease or diabetes but more likely to experience some form of trauma, depression, sleep disturbance or urinary dysfunction than the general population. Overall, the predictive model performed quite well and allowed us to identify with high accuracy those with PD

from those without PD.

In the process of developing the predictive model, we identified some interesting trends in the data. One particularly important trend was the tendency of people with prodromal PD to have a fall, traumatic brain injury or other type of trauma during their prodromal period. This work



in 2009) and 118,095 controls (selected from the general population of Medicare beneficiaries) for the years 2004-2009. These claims included diagnoses given to and procedures performed on Medicare beneficiaries. We used these data to develop a statistical model, essentially an equation, which allowed us to calculate the likelihood of someone being diagnosed with PD over the following five years. The diagnosis and procedure codes in the model were those most strongly associated with being diagnosed with PD and those that could be associated with a higher or lower risk of PD. The final predictive model

was led by Dr. Alejandra Camacho-Soto and published in *Annals of Neurology*. Even five years prior to diagnosis, people with prodromal PD were more likely to have a traumatic brain injury than the general Medicare population. In fact, in the year prior to diagnosis, there was a dramatic surge in traumatic brain injuries. Throughout the five years studied, many of the traumatic brain injuries could be attributed to falls. This finding is important because many studies have suggested brain trauma increases risk of developing PD, whereas our study demonstrates that an association between PD and traumatic

continued on page 16



UNINTENTIONAL WEIGHT LOSS

KATHRYNNE HOLDEN, MS, RD (RETIRED) IS THE AUTHOR OF *EAT WELL, STAY WELL WITH PARKINSON'S DISEASE* AND *COOK WELL, STAY WELL WITH PARKINSON'S DISEASE*. VISIT HER WEBSITE, nutritionucanlivewith.com, FOR MORE PARKINSON-RELATED NUTRITION INFORMATION.

Have you experienced changes in weight since being diagnosed with Parkinson disease? It is common for people with PD to lose weight. Changes in weight can affect overall health. Being underweight means you can lose muscle mass and strength, causing you to be more prone to osteoporosis and infection. Maintaining a healthy weight is key to living well with PD.

Many studies have shown that people with Parkinson disease (PD) lose weight, sometimes a critical amount of weight. Slow and steady weight loss is a known feature of PD. Many people believe that weight loss is a natural part of aging, but losing a significant amount of weight without trying—particularly if it's significant or persistent—can pose a serious health concern for many people with PD and can have a deleterious effect on ability to function and on quality of life. A variety of physical, psychological and social conditions (along with age-related changes) can lead to weight loss, but there may be no identifiable cause for up to one-quarter of individuals. Depression and dementia have been shown to contribute to unintentional weight loss. In some cases, depression causes lack of appetite and desire to eat. Motor symptoms like tremor, slowness and stiffness, and complications of treatment such as dyskinesia can make eating difficult. Other people cannot eat quickly enough to finish meals in a normal amount of time. Embarrassed by their slow eating, some people stop eating before they have had enough. In still other instances, people with PD report their appetite is good, they enjoy eating, and yet continue to lose

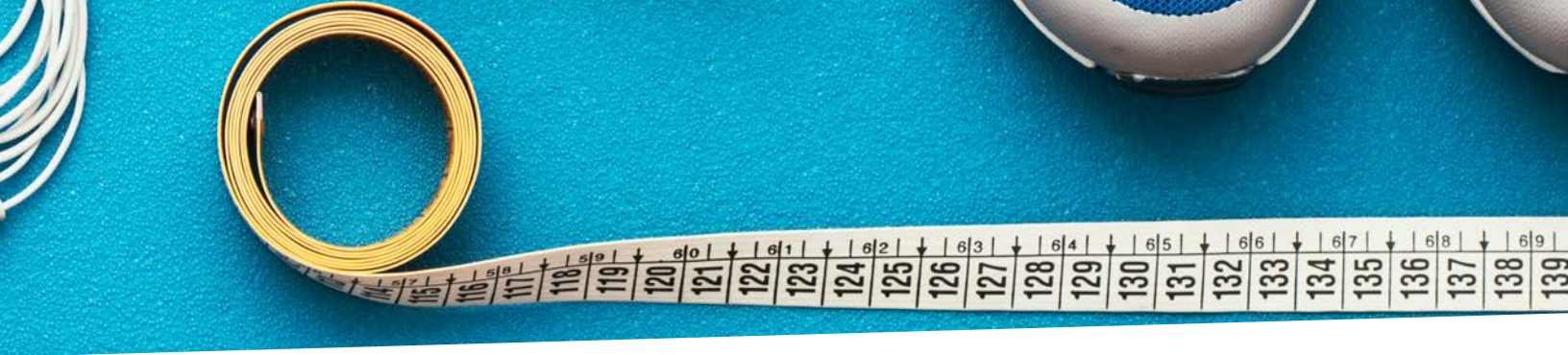
weight. Often this weight loss is gradual, taking place over a period of several years. Other times, weight loss can be quite sudden, occurring over a period of a few months or even weeks. Several important physiological changes can predispose a person with Parkinson's to weight loss, such as declining chemosensory function (smell and taste), reduced efficiency in chewing and slowed gastric emptying. Some PD medications cause nausea, which suppresses appetite. Medication use and polypharmacy can interfere with taste or cause nausea and should not be overlooked as a cause for unintentional weight loss.

Unplanned weight loss should never be taken lightly. Unintentional weight loss is defined as a loss of five percent of your body weight within a six to 12-month period. Recent data suggests that close to 30 percent of people over the age of 65 experience involuntary weight loss. Weight loss can interfere with day-to-day functionality, causing a decline that can lead to dire consequences. Studies have shown that the loss of just ten percent of a person's maximum lifetime weight within the past ten years greatly increases the risk for illness, bone fracture and even death. Also, people who enter the hospital in a malnourished state are more likely to be hospitalized longer, have poorer outcomes or be discharged to a nursing home.

It's okay to skip a meal now and then – our bodies are well equipped to carry on in spite of an occasional lapse. The problem comes when we fail to eat properly for

days, weeks or months at a time. The body begins to draw on its own stores for fuel. And it doesn't just use stored fat. The brain must have glucose for fuel and cannot use the calories derived from fat stores. To get this fuel, the body breaks down muscle and converts it to glucose for the brain's use. So, although stored fat is used, precious muscle mass is depleted too. Muscle wasting makes it difficult to walk, maintain balance and perform the usual activities of daily living. Furthermore, the body becomes depleted of nutrients like vitamins and minerals. Depletion of iron can cause anemia and fatigue. Zinc loss can depress the immune system and cause poor wound healing. And continued lack of calcium and Vitamin D can lead to weakened bones. An accidental fall may lead to a serious fracture and hospitalization.

Loss of B vitamins, like thiamin, riboflavin and folate, can lead to confusion, depression, insomnia, irritability, and memory loss, and can worsen poor appetite. Vitamin B12 is stored quite well by the body so that it depletes very slowly. But this has a drawback. The slow depletion of B12 causes a gradual dementia that closely mimics the signs of Alzheimer's disease. In fact, it's now estimated that many people have been wrongly diagnosed with Alzheimer's disease – they were actually depleted of Vitamin B12. Finally, we need regular meals to maintain our energy. Food supplies a steady stream of blood glucose, which our body's cells use for nourishment, energy and work. Without this glucose, we may feel fatigued, listless or apathetic. People with PD often experience



fatigue due to the disease or medications used to treat PD; lack of glucose can make this fatigue even worse.

If you have lost weight, the first thing to do is notify your physician and ask for a referral to a registered dietitian. Your medications, food preferences and any diagnoses must be taken into consideration when planning a safe weight-gain program. A dietitian can help you solve these problems effectively.

When you just don't feel like eating, a big plate of food can seem discouraging. Don't try to force yourself to eat large meals. You'll need to eat a bit more than you have been, but not all at one time. Instead, plan for three small meals and three nutritious snacks each day. Meals and snacks should range from 100 to 500 calories each, totaling enough calories to prevent weight loss. If weight loss has already occurred, calories should be adequate to allow you to regain weight. Aim for a gradual weight gain of about one or two pounds per month.

Several conditions may make it hard to finish a meal. Sometimes bradykinesia (slow movement) makes it difficult to handle utensils or cut meat. It may help to choose softer foods, like meat loaf, soups and stews, where the meat has been ground or cooked to tenderness. Avoid raw vegetables and lettuce salads if they take too long to eat. Cooked vegetables, vegetable juices and vegetable soups may be better choices. This can also help if chewing becomes difficult.

If it's hard to swallow, or if choking occurs, your physician should refer you to a speech pathologist, who can determine whether there is a danger of inhaling food. This can lead to a form of pneumonia. The speech pathologist may recommend that you eat pureed foods and thickened liquids until danger of choking has passed.

Lack of appetite may be due to depression, a condition of sadness or hopelessness. This is often a temporary condition, but if it persists, your doctor can prescribe a medication to help. It's important to eat



at this time, because lack of nutrients can make depression much worse. Aim for small meals with frequent snacks. Meals and snacks should be as nutritious as possible in order to provide all the vitamins and minerals needed to help overcome depression. Keep on hand the foods you like best. It's easier to eat foods you like than those you don't much care about. Keep small snacks sitting out, where you can reach them easily. If you take levodopa/carbidopa (Sinemet), high-carbohydrate snacks are especially important. A dish of

ice cream, a cup of hot chocolate or a few cookies may be appealing. It's better to eat sweets than not to eat at all!

Common strategies to address unintentional weight loss are dietary changes, environmental modifications, nutritional supplements and flavor enhancers.

Diet modifications incorporating individual preferences (eat foods you enjoy), softer food consistency to accommodate for chewing or swallowing difficulties and assisted feeding may lead to weight gain. Limit fatigue by choosing foods that are easy to chew (like smoothies, ground meats or soft proteins). Ask for help in cutting meats into smaller pieces. Creating a more leisurely eating environment simulating an in-home dining experience may improve nutrition in individuals residing in facilities. Nutritional supplements are predominantly available in liquid form, but also come in puddings, bars and soups. Avoid filling up on coffee, tea and clear soups. Increase your consumption of whole grains (whole grain rice and breads).

Nutritional supplements should provide extra calories but not replace scheduled meals. Eat small frequent meals every two to three hours or eat a nutritious snack between meals. Consuming supplements between meals, rather than with the meal, may help minimize appetite suppression and facilitate increased overall intake. Attractive, colorful meals are usually more appealing, so make the most of garnishes, textures and flavors. Stimulate your

continued on page 18

NEW YEAR, NEW YOU – YOU CAN CHANGE!

TRICIA CREEL, PT, DPT, NCS, WELLNESS COORDINATOR, GREATER ST. LOUIS CHAPTER, APDA

You can't go back and change the beginning but you can start where you are and change the ending.

- C.S.Lewis

By now, many people are aware that exercise is one of the most powerful things you can do to manage your Parkinson's symptoms and continue to live life to the fullest well into the future. After working with people with Parkinson disease (PD) for almost a decade, I am confident that every person with PD has the ability to successfully incorporate exercise into their daily routine. However, while there are many great exercise options available for people with Parkinson's, it can be hard to get started and even harder to stay consistent.

A good place to start is by thinking about your needs and preferences.

PHYSICAL THERAPY - If you have had multiple falls, are new to exercising, are experiencing pain or have lost significant strength and mobility, you should see a physical therapist before starting an exercise program. Actually, everyone with PD should see a physical therapist at least once a year, but see a physical therapist right away for any of the situations just mentioned.

PERSONAL TRAINING - This is an individualized approach where a professional provides one-on-one feedback and designs a program specifically for you. A personal trainer can work with you in a gym setting or in your home and provides a lot of accountability if you struggle to exercise consistently. Before you start, ask about their education, certifications and experience working with people with PD. Cost can also be a consideration, as a personal trainer is not covered by insurance.

GROUP EXERCISE CLASSES - These provide a great social opportunity and access to a trained instructor who can motivate you, provide feedback and help modify exercises. Again, it is preferable to find an instructor who is certified to work with people with PD. They will make sure that the class is doing exercises targeted to the specific needs of people with PD and will make sure that the intensity is appropriate.

ONLINE PROGRAMS - These allow you to exercise on your own schedule or when you don't have access to a personal trainer or group classes. Online programs require that you are more self-motivated, have access to the Internet and are safe exercising without supervision. Online programs can offer a lot of variety and provide access to many different formats of exercise.

The next step is to find the right therapist, trainer, class or program.

People with Parkinson disease often have specific exercise needs, and it is important to work with someone knowledgeable about PD to design your exercise program. All APDA-Greater St. Louis Chapter exercise instructors have completed extensive training in working with people with PD, so you can trust that they understand your needs. In addition, all of our exercise classes are designated as Level 1, 2 or 3 to help you understand which is most appropriate for your fitness and mobility level.

We are constantly adding new classes and new formats in new locations. Make sure that you call our office or check our website for the most up-to-date information about available classes. New classes being offered in 2018 include:

INDOOR CYCLING AT CYCLEBAR (CHESTERFIELD) - This Level 2-3 class incorporates motivating music, rider-specific stats and group challenges. Thanks to generous Cycle Challenge contributions, the initial session of class is free and runs for 12 weeks. The class meets on Tuesdays (January 16-April 3) at 1:00 pm. Registration is required; please call 636.778.3377 to register.

KICKBOXING PLUS - Fight back against Parkinson's in a kickboxing class at the APDA Resource Center in Chesterfield. This Level 2-3 workout combines aerobic training, boxing, strengthening, balance and coordination all while moving to fun, upbeat music. The class meets on Wednesdays at 1:00 pm; registration is not required.

BOX YOUR B.E.S.T. - Exercise in a small group with a personal trainer. This class will improve your endurance, strength and balance through a challenging boxing workout in the J's state-of-





CLASS LEVELS

LEVEL 1: Participants exercise seated or standing with support. Movements are done at a pace and intensity that is appropriate for each participant.

LEVEL 2: Participants must be able to walk and stand up from a chair without assistance. Most exercises are done standing.

LEVEL 3: Higher intensity, faster paced classes where participants perform multiple step exercises and may get on/off the floor.

the-art facilities. This Level 3 class meets on Tuesdays and Thursdays at 1:00. Please call 314.442.3452 to register; there is a fee for this class.

If you are interested in working with a personal trainer, we can provide names of trainers who have expertise in working with people with PD. Several personal trainers in the St. Louis area have certifications that are approved by the APDA. If you are currently working with a personal trainer

who is interested in learning more about Parkinson disease, please let us know so we can get them information about the certification.

Finally, if you would like to exercise at home using an online program, a DVD or a printed program, we have you covered! We videotape and then archive many of the classes held at the Parkinson Resource Center in Chesterfield. That means you have access to a library of over 100 different classes including yoga, Tai Chi and interval training.

If you need other printed or recorded exercise resources, please call or email us. You can view online classes and find other resources on our website at www.apdaparkinson.org/greaterstlouis.

The final step is to get going!

If you still have questions or just need a little encouragement, please call or email me. All these great resources are only great if they are being used. We love to hear your feedback and suggestions, as we are always striving to make the exercise programming better. Don't be a stranger; send me a note in 2018 and let me know how you are progressing with your exercise plan (tcree@apdaparkinson.org or 636.778.3377). Happy exercising!

volunteers needed

ONLINE RESEARCH STUDY



We are a group of movement science researchers conducting a study to examine the willingness of people with Parkinson disease to participate in exercise classes offered in-person and online.

If you have Parkinson disease you can see if you are eligible to fill out our online survey at:

<https://is.gd/parkinsondisease>

The survey has questions asking about your health, physical exercise, neighborhood, and computer use. It is anonymous and will take approximately 30 minutes to complete.

PARTICIPATION IS COMPLETELY VOLUNTARY. PLEASE CALL US AT 314-286-1478 OR SEND US AN EMAIL AT MJHESSLER@WUSTL.EDU FOR MORE INFORMATION.

Washington University in St. Louis School of Medicine Physical Therapy

TRIBUTES & DONATIONS 10/01/2017-12/31/2017

Tributes are a thoughtful way of expressing sympathy, giving thanks, celebrating special occasions such as birthdays, anniversaries and holidays, or honoring the memory of a loved one or friend while expressing your commitment to the Greater St. Louis Chapter of the American Parkinson Disease Association. An acknowledgement including your name (but not the amount) will be sent to the person honored or to a relative in case of memorial, and the donor will receive a prompt thank you card/letter which can be used when filing your tax return. Starting in the new year, please note that only donations of \$25 or greater will be listed in these pages.

IN CELEBRATION OF

Bill Appleton's 80th Birthday

Rick Ehlenbeck
Carol & Samuel Mullen
Joanne & James Sills
Betty Suellentrop

Carol Blinder's Special Birthday

Rita Eiseman

Anita & Stanley Cohen's 60th Anniversary

Donna & Bob Cohen

Lisi Furman & Jason Berger Engagement

Sue & Phil Schreiber

Lu Hernandez's Birthday

Sandy Hernandez

Carol Hillmann's 80th Birthday

Norma & Gene Kuhlmann

Edward Hinch's Birthday

Margaret Hinch

Mayer Levy Jr.'s Birthday

Perry Sparks

Jamie & Joey Mufson's Wedding

Kathi & Stuart Rosenberg

Diane Novak

Cynthia James
Adam Novak

Ron Pettus's Retirement

Your Social Sciences
Colleagues

Schroeder Christmas

Stafonia D'Amico
Ashley & Matt Arrigio
Claude Schroeder
Bradley King
Robin & Tom King
Matt Marchwinsky
Darren Schroeder
Kathy & Doug Schroeder
Jim Schroeder
Lauren Schroeder
Radonna Schroeder

Charlotte Shelburne Christmas

Sharon & John Baldwin

Bill Taylor's Special Birthday

Roz Gad
Lori & Gary Levine

Terri Taylor's Special Birthday

Roz Gad
Lori & Gary Levine

Lynda Wiens' Birthday

Debbie Guyer

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Stacey Reinagel

Richard Bivens

Susan Efken

Bill Buck

Kay & Sam Gerth

The Jack Buck Family

Steven Horn

Mary Buck

Gayle & Don Wheeler

Don Carlson, Ageless Remarkable St. Louisan Awardee

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Shirley Lammert

Joe Marchbein Receiving Max Myers Award

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Russell Wells

Claralyn & Matt Bollinger

Harry Wirth

Susan Wirth

Gerald Ziegler's Recovery

Jack Strosnider

IN APPRECIATION OF

APDA Exercise Class at SSM Day Institute-Kirkwood

Bill Sorrell

APDA Staff

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Bill Sorrell

Katie Benjamin

Bill Sorrell

Teresa Godfrey

Bill Sorrell

Debbie Guyer

Sharon & Mel Spiegelglass

The Midwest Parkinson Congress Presenters

APDA St. Louis Chapter Staff

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Dr. Joel Perlmutter

Dorothy Mill
Barry Roufa

Nancy Robb

Mercedes Smith

Jan Thomas

St. Louis University OT Class

Our Children, Grandchildren, Great-grandchildren

Linda & Bob Coulter

IN MEMORY OF

*We will be known forever by
the tracks we leave.*

Fred Absher

Joanne Strauss

James & Alison Bates

Gail Moran

Karen Bausch

Kathleen & Mark Baum
Susan & Kevin Curtis
Barbara & Dave Lochmann
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Parkinson Prom

Put on your dancing shoes and your Sunday clothes and you'll feel as fine as you look! That is a line from *Hello Dolly* that sets the stage for our Parkinson Prom on Sunday, April 15.

At the renovated Shaare Emeth, come have your picture taken as you swirl and swing to the sounds of D.J. Terre LeGrande. This dance is sponsored in part by our wonderful South County support group co-facilitator, Jack Strosnider, and you are guaranteed to have an afternoon of fun and fellowship, culminating in the crowning of a Prom King and Queen.

Dancing will start at 2:30 PM and end at 5:00 PM. Light refreshments will be available and this dance is for you. There is no charge! Celebrate April Parkinson Awareness Month by dancing your way to better health. You'll feel as great as you look! Come to socialize and enjoy the open dance floor. Bring a partner or come as a single – graduate students will be volunteering and love to move to the sounds of music.

More details to follow in the invitation.

WHEN: Sunday, April 15, 2018
TIME: 2:30-5:00 PM

WHERE: Congregation Shaare Emeth, at the corner of Ballas and Ladue in Creve Coeur. Enter the newly renovated facility on the Ladue side of the building.
Totally accessible!

ATTIRE: Tuxedos and formal gowns are not required or expected! Dress in your "Sunday clothes."

ADMISSION COST: Free (although no contributions will ever be turned away)

WHY: To have fun and enjoy getting to know one another.

R.S.V.P. by March 24 at apdaparkinson.org/greaterstlouis or by calling 636.778.3377

INAUGURAL MIDWEST PARKINSON CONGRESS RECEIVES RAVE REVIEWS!

Our *Midwest Parkinson Congress* was a resounding success! Over 575 people with Parkinson's, care partners and healthcare professionals attended this inaugural event on October 27, 2017. A number of sponsors also attended, sharing information with participants about new products, clinical trials and services available to our Parkinson community.

The Midwest Parkinson Congress featured three simultaneous tracks: Treatment for Advancing Parkinson Disease, Movement as Medicine, and Care Partner Resources: Planning for the Future. If you weren't able to attend but would like to view the sessions, they are available on our YouTube Channel www.youtube.com/apdagreaterstlouischapter, or you may purchase a DVD from the Greater St. Louis Chapter, \$25 per DVD or \$65 for the entire three disc set.



TREATMENT FOR ADVANCING PARKINSON'S - TRACK ONE OVERVIEW

The Treatment for Advancing Parkinson Disease session was moderated by Dr. Diego Torres, MD, Director of the Movement Disorders Program and Associate Professor at the University of Nebraska Medical Center.

Dr. Joel S. Perlmutter, MD, Elliot Stein Family Professor Neurology, Washington University School of Medicine, led off the session with a review of Parkinson disease, the various treatment options and medications available to manage the disease and potential research in trial that holds promise to impact Parkinson's.

Dr. Mwiza Ushe, MD, Associate Professor of

Neurology, Washington University School of Medicine, gave a detailed review of deep brain stimulation (DBS). Dr. Paul Kotzbauer, MD, PhD, presented treatment of Parkinson's using the Duopa Gel pump delivery system. Dr. Ushe and Dr. Kotzbauer both reviewed how decisions are made regarding the consideration of DBS or Duopa, symptoms that each treatment does and does not affect, the implementation of the treatment, the potential risks involved and how each treatment may facilitate living a full life.

The session concluded with a panel discussion giving attendees an opportunity to ask questions of Dr. Perlmutter, Dr. Ushe and Dr. Kotzbauer, who were joined by three individuals with Parkinson's. The individuals were asked to describe their life before and after receiving either DBS or the Duopa. Each individual detailed the conversations with their neurologist and how they came to their decision, the implementation of the procedure and the impact on their lives. The individuals, stressed that the treatment had a tremendously positive impact on their lives with Parkinson's.

The key point made throughout the session was that Parkinson disease presents itself differently in every individual and the management of the disease is unique for each person. The presenters emphasized that everyone with Parkinson's must work closely with their neurologist to find an appropriate treatment option.

MOVEMENT AS MEDICINE FOR PARKINSON DISEASE - TRACK TWO OVERVIEW

Participants in the Movement as Medicine track learned about the latest research on how exercise, physical therapy and movement strategies can be used to address Parkinson's impairments. It was an interactive session, with many participating in a boxing

demonstration led by speaker Beth Templin, a Rock Steady Boxing coach, physical therapist and owner of HousePT. The session was moderated by Tricia Creel, PT, DPT, Wellness Program Coordinator for the APDA - Greater St. Louis Chapter.

The session opened with a review by Terry Ellis, PT, PhD, NCS, of the latest research on exercise for people with Parkinson disease. Dr. Ellis is Director of the Center for Neurorehabilitation at Boston University and



Director of the APDA National Rehabilitation Resource Center at Boston University. Her presentation included information on the key components of a successful exercise program and the effectiveness of different types of exercise in reducing disability in people with PD.

Gammon Earhart, PT, PhD, Professor and Director of the Program in Physical Therapy at Washington University in St. Louis, spoke about practical ways to integrate exercise into everyday life. Dr. Earhart emphasized the importance of exercise and then reviewed strategies to increase daily activity. She reported that people are more motivated to

exercise when they enjoy it and see evidence for its efficacy and when they are provided guidance from a medical professional.

After Dr. Templin's interactive presentation on the Rock Steady Boxing program, participants heard from Ryan Duncan, PT, DPT, about fall prevention and the benefits of personalized treatment by a physical therapist. Dr. Duncan is an Assistant Professor of Physical Therapy and Neurology at Washington University in St. Louis. His presentation provided evidence on the effectiveness of exercise in reducing fall risk and emphasized the importance of seeing a physical therapist on a regular basis. He recommended seeking a therapist with expertise in Parkinson disease.



Finally, Pietro Mazzoni, MD, PhD, provided an update on the research on Freezing of Gait (FOG), a disabling symptom experienced by some people with Parkinson disease. Dr. Mazzoni explained that treatment strategies are often highly individual and may lose effectiveness over time. It is also a challenging symptom for researchers to study. He discussed some of the new research being done on wearable devices and recommended working with your neurologist and physical therapist to develop a personalized approach to addressing this symptom.

The central message from all the presenters was the importance of regular participation

in exercise and regular visits to a physical therapist for personalized treatment and feedback. The presenters emphasized that multiple types of exercise can be beneficial, including strength training, cardiovascular training and stretching. The key is to find something you enjoy and stick with it!

CARE PARTNER RESOURCES: PLANNING FOR THE FUTURE – TRACK 3 OVERVIEW

Attendees at the Care Partner Resources track learned about caring for the care partner and how to be proactive in preparing for their loved one's future needs as well as their own. Johanna Hartlein, RN, MSN, FNP from Washington University School of Medicine's Movement Disorder Center moderated this session.

Kevin Black, MD, opened the session by discussing possible neuropsychiatric symptoms that can arise in people with Parkinson's. He described the effects of hallucinations, anxiety and mood changes that care partners may observe, as well as when it is important to seek treatment. Dr. Black also outlined the best treatment options to be pursued by those with Parkinson's, including medications such as antidepressants and other treatments like cognitive-behavioral therapy.

Johanna Hartlein, RN, MSN, FNP, spoke with the group about how to identify "invisible" non-motor symptoms of PD, such as pain, fatigue, constipation and urinary tract infections, and how they can aggravate other Parkinson's symptoms and decrease quality of life. She also described common treatment methods for these symptoms and how to address some of your loved one's needs at home versus when to seek assistance from a medical professional.

Stacey Barton, MSW, LCSW, shared her knowledge about different levels of care available to people with Parkinson disease as well as factors to consider when choosing care for your loved one. She described the rising costs associated with long-term care while providing valuable information about payer sources, what to expect in the future

and how to access additional resources when they are needed.

Jamie Archer, MOT, OTR/L, provided information about home modifications and adaptive aids that can be beneficial and increase safety for those with Parkinson's as well as their care partners. She described devices that can be used throughout the home and in your vehicle to improve independence and decrease potential strain for care partners. Jamie also provided information about medical equipment resources, such as the APDA Resource Center and other options in the community.

Debra Shuster, MHA, JD, concluded this track by providing her perspective as an elder law attorney. Her presentation about essential legal documents to preserve your wishes and estate planning provided a guide on protecting your assets in the future. She explained the importance of establishing advance directives, a last will and testament, and possibly a trust. Despite how difficult it can be to make these plans, it is essential to make them and communicate them to family both so that your wishes can be honored and to reduce the burden on loved ones.

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Every participant who raises \$100 gets an Optimism Walk T-shirt!

Hope In Motion - Optimism Walk

Saturday, June 2, 2018

Maryville University
650 Maryville University Drive
Town & Country, MO 63141

Check-in: 9:30am - Walk: 10:00am

Register online today!

apdaparkinson.org/greaterstlouischapter

Families, lace up your sneakers! The 2018 Optimism Walk in Memory of Walter & Connie Donius will take place on the Maryville University campus on June 2. We are pleased to announce that Bill Donius, author of the *New York Times* bestseller, *Thoughtful Revolution: How to Unlock Your Inner Genius*, will be joining us as Honorary Chair again this year. Bill is a generous supporter of all the work we do for the Parkinson community. The event is for all age groups, from grandchildren to grandparents, and will include family-friendly entertainment, vendor booths, an ice cream social, demonstrations

of the special programs the Greater St. Louis Chapter offers and so much more! Various walking distances will be available for participants to choose from, ranging from less than a mile to a full 5k. Invite all of your friends and family members to our Optimism Walk! Registration is free, and participants who raise \$100 or more will receive an Optimism Walk t-shirt. For more information on the walk and to register online, visit our website at apdaparkinson.org/greaterstlouischapter. If you would like registration information to be sent to you, please contact us at apdastlouis@apdaparkinson.org or call 636.778.3377.

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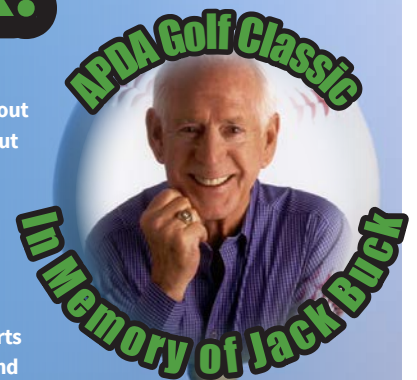


The annual APDA Golf Classic in Memory of Jack Buck will take place May 21, 2018, at Algonquin Golf Club in Glendale, MO. Mark your calendars! Invitations will be mailed out soon, so don't delay in returning your registration as this event has completely sold out for the past five years. We hope you'll join us in honoring a man whose own dauntless brand of charity made him a civic institution in our community.

We are fortunate to have the St. Louis Cardinals GM, John "Mo" Mozeliak, serving as Honorary Chairperson for the ninth consecutive year. Mo's Parkinson connection is twofold as both his grandmother and father-in-law were diagnosed with Parkinson disease. We are grateful that Mo remains passionate about his involvement with our organization and cause. One of the highlights of the evening is the Q&A session with John Mozeliak and KMOX Sports Director and broadcaster, Tom Ackerman. Last year, over \$146,850 was raised to support expansion of programs and services and to fund Parkinson research. Participants will feast on a delicious dinner that Chef Brian Bernstein creates. There is a dinner-only option if you don't golf, but tickets are limited, so sign up early.

If you would like to receive an invitation to play in this wonderful tournament, "chip" in by becoming a sponsor or donating an auction gift; we welcome your involvement. Please contact the Greater St. Louis APDA Chapter at 636.778.3377 or send an email to apdastlouis@apdaparkinson.org.

Help us honor Jack's memory with yet another winner! The funds generated will assist those living with Parkinson disease in our local communities as well as the researchers hard at work discovering the causes of Parkinson disease and hopefully a cure!



OPTIMISM EVENTS

SHOP FOR A CAUSE On December 2-3, 2017, the APDA-Greater St. Louis Chapter participated in a very special weekend shopping event in partnership with Michael Kors. At all three St. Louis locations of Michael Kors Fashion Accessories Stores



MICHAEL KORS and two additional locations in Kansas City and Springfield, IL, customers were given the opportunity to shop with a purpose and support our Chapter. Ten percent of the pre-tax sales were donated to the Greater St. Louis Chapter.

I am pleased to share with you that the five stores collectively generated \$19,513 in sales scanned in by associates for the APDA. Michael Kors is delighted to be donating \$1,951 to our local APDA Chapter serving the bi-state region.

The event was successful and rewarding, igniting new excitement for Michael Kors team members and customers. We very much look forward to building on our two-year experience and creating an even more successful event in 2018. A hearty thank you to Jane Edwards, who was responsible for organizing this event in 2016 and 2017 and who continues to seek ways to grow this optimism event in honor of her father, Chris Edwards.



PEDALING 4 PARKINSON'S IN AVISTON, IL

Lynn Huegen organized the inaugural Pedaling 4 Parkinson's event at Aviston Park, in the small community of Aviston, IL, on Sunday, October 15, 2017. Sixty people signed up to participate in the 10- or 25-mile bike ride. They also had a one-half and one mile fun bike ride for kids and a few walkers to follow them. Even the rain didn't deter this community! They raised \$6,000 which is HUGE for a first-year event. Following the ride, participants engaged in Soup Ta Do, an annual party for Aviston residents and their families. Lynn was motivated to fundraise in honor of her father, Don Lampe.

SCARVES FOR SALE

A loving tribute to her Maw Maw, Brittany Guyer Rotskoff was busy crocheting scarves all summer to sell in memory of her grandmother, Lillian Dalin. The scarves were sold this fall at Selvidge Middle School in the Rockwood School District, where Brittany teaches 6th Grade History. The sales raised \$150 for the cause.

WHILE EMERGING SCIENCE UNFOLDS – ANOTHER POINT OF VIEW!



The article which appeared in the November 2017 *LiNK* suggesting use of dairy alternatives has raised many red flags, so we are presenting another viewpoint on this topic because it is critical to put the risk of consuming dairy into proper perspective. A study was published which suggests little correlation between consumption of

dairy and developing Parkinson's. Katherine Hughes, a researcher at the Harvard T.H. Chan School of Public Health in Boston, found that consumption of higher amounts of low-fat dairy products or milk does not result in a higher risk of developing Parkinson's.

Of the 5,830 people who ate at least three servings a day of low-fat dairy, only one percent (60 people) developed Parkinson's during the quarter century of follow-up. The findings didn't prove a cause-and-effect relationship that eating dairy products causes Parkinson's. Before altering your diet dramatically, check with your physician and dietician. Getting enough calcium from dairy products is important for other health reasons, such as maintaining bone health. Given that many people don't eat enough dairy foods, it may be in your best interest to eat a balanced, nutrient-rich diet, representative of all food groups – including dairy – while the emerging science unfolds.

THE KNOTTY PROBLEM OF COGNITION AND DISABILITY CLAIMS

DR. PAUL SHORT, PSYCHOLOGIST AND LIFE COACH



Over the past few years, I have been asked to test a number of individuals with early-onset Parkinson disease (PD) who are considering applying for disability. The cognitive effects of PD are often more severe than many people realize, even very early in the course of the disease. Many people try to pursue disability on the basis of physical limitation, when the stronger case may well lie with cognitive factors.

I wanted to share a few general observations based on my experience participating in the disability process:

1. Many people forget to consider the problems they are having with the computer keyboard due to psychomotor factors like loss of fine motor control. If your job requires a lot of typing and your fingers are not finding the right keys, a task once independent of conscious direction now requires concentration and focus. Even simple emailing and spreadsheet entry can become stressful, frustrating and disabling.
2. Mentally processing complex conversations can become very difficult as a result of slowed thinking (bradyphrenia). It is easy to miss the important information and extremely difficult to organize and summarize it later. The quality of your work will inevitably suffer through no fault of your own. This problem can be exceptionally disabling when you are sitting at your desk attempting to recall what you just heard.
3. The portion of the brain that processes non-verbal information



is often a source of cognitive impairment. Although the workplace typically relies on verbal communication, we need both hemispheres of the brain to work together seamlessly to analyze problems, perceive relationships and develop solutions and strategies. The loss of reliable non-verbal information processing can be very disabling in ways not immediately recognizable.

4. Many people have trouble finding words during conversations and verbal presentations. Being at a loss for words can alter the impact of even a well-rehearsed sales pitch or meeting report. The ideas may well be there but the words to bring them to life may not.
5. Complex tasks that require one to temporarily shift focus and juggle multiple demands are often an early casualty of cognitive impairment. Rapid multi-tasking becomes increasingly difficult and ultimately a near impossibility.

If you are contemplating leaving your job on disability, you might want to consider consulting a neuropsychologist to help

you determine if, and to what extent, cognitive changes are affecting your ability to continue working. It may allow you to build a stronger case for your claim.

There are also a number of workplace adaptations that can be made to help you stay independent at work. A neuropsychologist can also help determine which adaptations may be helpful for you.

WHAT "BIG DATA" TELLS US ABOUT PRODROMAL PD

CONTINUED FROM PAGE 3

brain injury, during the five year prodromal period, is likely due to symptomatic PD. This is important because these injuries potentially may be preventable with early diagnosis and appropriate symptomatic treatment.

Our next step with these studies is to use Medicare Part D data (prescription coverage) to see if we can more accurately identify people who are going to develop PD. Our initial work with these new data,

purchased with the help of the APDA-Greater St. Louis Chapter, has helped us identify several FDA-approved medications that may reduce the risk of PD. However, we need to obtain more data to confirm these associations and to study whether these medications affect disease progression. We also are seeking funding from the National Institutes of Health to develop a 10-year prodromal PD predictive model, potentially allowing us to identify someone

with PD up to 10 years prior to diagnosis, at a time in which they may receive maximal benefit from neuroprotective therapies. Those identified could also be monitored closely for symptoms that put them at risk of falls or other injuries, allowing earlier treatment. Overall, these studies have the potential to make a substantial impact on early identification, treatment, and potential disease modification for people with PD.



Missouri 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.apdaparkinson.org/greaterstlouis, or call the APDA Information & Referral Center at 636.778.3377 or the facilitator at the number listed below.

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	4th Monday	6:00 PM	Desma Reno, RN, MSN	573.651.2678
Chesterfield	St. Louis	APDA Community Resource Center 1415 Elbridge Payne, Suite 150	1st Tuesday	11:00 AM	Tricia Creel, PT	636.778.3377
Chesterfield	St. Louis	For Caregivers Only APDA Community Resource Center 1415 Elbridge Payne, Suite 150	2nd Monday	10:30 AM	Dee Jay Hubbard, PhD	636.778.3377
Creve Coeur	St. Louis	Pre/Post-DBS Group Missouri Baptist Medical Center 3015 N. Ballas, Main Parking Garage 4th fl. CLI Rm. 415	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. 415	3rd Tuesday	6:30 PM	Doug Schroeder	314.985.7708
Festus/ Crystal City	Jefferson	Disability Resource Association 130 Brandon Wallace Way	3rd Tuesday	1:00 PM	Penny Roth Laura Sobba	636.931.7696 x129
Florissant	St. Louis	Garden Villas North 4505 Parker Rd.	4th Thursday	11:00 AM	Nancy Robb	314.869.5296
Hermann	Gasconade	StoneBridge- Frene Valley 1800 Wein St. Activity Room	4th Wednesday	5:00 PM	Emilie Hegerfeld	573.486.3155
Jefferson City	Cole	Capital Region Medical Center Community Conference Room	3rd Friday	1:00 PM	Jennifer Urich, PT David Urich	573.632.5440 573.796.2395
Joplin	Jasper	Mercy Hospital 100 Mercy Way Conference Room	Every Monday	3:00 PM	Nancy Dunaway	417.556.8760
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 Patty Waller	314.286.2418
Ladue	St. Louis	The Gatesworth 1 McKnight Place	2nd Wednesday	1:00 PM	Maureen Neusel, BSW	314.372.2369
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 Amanda Landsbaum, MS	314.846.5919 636.778.3377
St. Peters	St. Charles	Spencer Road Library 427 Spencer Rd., Room 259	1st Tuesday	1:00 PM	Sherrie Rieves Ann Groomes, 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	6:00 PM	Carol Weber	314.713.4820
Webster Groves	St. Louis	Bethesda Orchard - Parlor Room 21 North Old Orchard Ave.	Last Friday	10:30 AM	Laurel Willis, MSG	314.471.6302
Webster Groves	St. Louis	Laclede Groves 723 S. Laclede Station Rd.	3rd Wednesday	3:00 PM	Shawn Riley, MSW	314.446.2452

Non-affiliated support groups are listed on our website only.

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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.apdaparkinson.org/greaterstlouis, or call the APDA Information & Referral Center at 636.778.3377 or the facilitator at the number listed below.

CITY	COUNTY	MEETING SITE	DAY OF MEETING	TIME	LEADER(S)	PHONE
Alton	Madison	Senior Services Plus 2603 N. Rodgers Ave.	3rd Thursday	2:00 PM	Dustin Heiser	618.465.3298 x120
Belleville	St. Clair	Southwestern Illinois College Programs and Services for Older Persons 201 N. Church St.	2nd Monday	1:30 PM	Jodi Gardner, MSW, LCSW	618.234.4410 x7031
Carbondale	Jackson	Southern IL Healthcare Headquarters University Mall	1st Wednesday	1:00 PM	Bill Hamilton, MD	618.549.7507
Carlinville	Macoupin	Carlinville Area Hospital Medical Office Building-Community Room 20613 N. Broad St.	3rd Wednesday - Schedule can fluctuate, please contact leader to verify date and time.	10:00 AM	Amy Murphy PT, DPT, NCS	217.854.3839
Centralia	Marion	Heritage Woods of Centralia 2049 E. McCord St.	2nd Wednesday	2:00 PM	Betty Evans Helena Quaid	618.533.0224 618.493.6064
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	Lin Smith Mary DeLong	618.344.0680 217.204.2137
Jacksonville	Morgan	Passavant Area Hospital 1600 W. Walnut-Meeting Room 2	1st Wednesday April-December	6:00 PM	Larry and Karen Ladd	217.377.4973
Mattoon	Coles	Odd Fellow-Rebekah Home 201 Lafayette Ave.	Last Tuesday	1:30 PM	Roy and Kay Johnson	217.268.4428
Springfield	Sangamon	St. John's Rehab. @ Fit Club South 3631 S. 6th. Street #C	3rd Sunday Odd num- bered months: 1,3,5,7,9,11	2:00 PM	Kelly Neumann, PT	217.483.4300
Quincy	Adams	Quincy Public Library 526 Jersey St.	1st or 2nd Saturday-Please contact leader	10:30 AM	Terri and Dave May	217.224.7027
Quincy For Caregivers Only	Adams	Quincy Public Library 526 Jersey St.	2nd Thursday 4th Tuesday Please contact leader	12:30 PM	Terri and Dave May	217.224.7027

Non-affiliated support groups are listed on our website only.

UNINTENTIONAL WEIGHT LOSS

CONTINUED FROM PAGE

appetite by seasoning food with herbs, spices and sauces. Include some high-calorie foods like cream and butter (if recommended by your physician) in your diet. A bright, cheerful setting and soft music may help, too.

On the related question of the effect of diet or specific food in treating Parkinson's, **no combination of foods have been proven to slow disease progression.** Doctors recommend a balanced diet that includes a variety of fruits and vegetables to maximize general health and help ease certain non-motor symptoms such as constipation and low blood pressure. For some, dietary adjustments

(particularly around protein intake) may ensure that PD medications work optimally. Creating a recipe for wellness must account for many factors such as an individual's other medical conditions and activity level. Treat diet like medication – only make significant changes after discussing the situation with your physician and dietitian.

With most medical conditions, the best treatment is prevention. Once a significant amount of weight is lost, it can be difficult to regain the lost weight. This makes it imperative to pay close attention to the possible symptoms of unintentional weight loss and treat it before it becomes an issue.



Missouri and Illinois Exercise Classes

Exercise is essential to managing Parkinson symptoms and slowing the progression of the disease. Our funding comes from donations, so we encourage those who attend multiple classes to make a \$5 per week donation. This helps us defray the cost which run around \$10 per person. Any amount you can contribute is used exclusively for our patient services to keep these programs free or at little cost to our community. Our exercise classes meet once a week or otherwise as noted. No RSVPs are required unless noted. Check our website, www.apdaparkinson.org/greaterstlouis, or call 636.778.3377 to find out any changes since publication. Online videos of classes are available at all times on our website.

MISSOURI

CITY	MEETING SITE	LEVEL	DAY OF MEETING	TIME	LEADER(S)	PHONE
Clayton	Fit 'n Fun The Center of Clayton, 50 Gay Ave., Mind/Body Room	Level 1	Wednesday & Friday	2:00 PM	Mike Scheller, PTA	314.289.4202
Chesterfield	Movement Training St. Luke's Outpatient Center, 111 St. Luke's Center Drive Bldg. B, Suite 14B	Level 1	Monday	10:00 AM	Ann Towey, PTA	314.205.6934
Chesterfield	Movement Training Friendship Village 15201 Olive Blvd., Friendship Hall-Door #5	Level 1-2	Tuesday	1:30 PM	Janelle Wenstrup	574.780.1924
Chesterfield	Circuit/Interval Training 1415 Elbridge Payne, Ste. 163	Level 2-3	Monday Tuesday Thursday	2:30 PM 10:00 AM 1:00 PM	Tricia Creel, PT	636.778.3377
Chesterfield	Movement Training 1415 Elbridge Payne, Ste. 163	Level 1	Monday	1:30-2:15 PM	Tricia Creel, PT	636.778.3377
Chesterfield	Tai Chi 1415 Elbridge Payne, Ste. 163	Level 2 Level 1	Wednesday Friday	10:00 AM 11:30 AM	Craig Miller	636.778.3377
Chesterfield	Exercise for Parkinson's (cycle + strength) Chesterfield YMCA , 16464 Burkhardt Place	Level 2	Friday	12:30 PM	Angela Weaver	636.532.3100 (registration)
Creve Coeur	Box Your B.E.S.T. The J's Staenberg Family Complex, 2 Millstone Campus Dr.	Level 3	Tuesday Thursday	1:00 PM	Joe Ryan	314.442.3452 (registration)
Florissant	Movement Training Garden Villas North, 4505 Parker Rd.	Level 1	Thursday	10:00 AM	Nancy Robb	314.869.5296
Kirkwood	Movement Training SSM Day Institute, 1001 S Kirkwood Rd.	Level 2	Thursday	1:00 PM	Teresa Godfrey, PT	314.821.7554 (registration)
Hermann	Movement Training (starting 02-27-18) Stonebridge-Frene Valley, 1800 Wein St., Activity Room	Level 1-2	2nd & 4th Wednesday	4:00 PM	Emilie Hegerfeld	573.486.3155
O'Fallon	Movement Training Park Place at WingHaven, Independent Living Fitness Room, 2002 Boardwalk Place Dr	Level 1	Wednesday	10:00 AM	Beth Templin, PT	636.778.3377
Richmond Heights	Parkinson's Performance THE HEIGHTS, 8001 Dale Ave.	Level 3	Saturday	1:00 PM	Barry Nicholson	314.645.1476 (registration)
Richmond Heights	Tango Convergence Dance and Body Center, 7700 Clayton Rd., Ste. 120	Level 2	Thursday	11:00 AM	Roxanne Maier	636.778.3377 (registration)
Ladue	Tremble Clefs Salem United Methodist, 1200 S. Lindbergh Blvd., Lower Level Choir Room		Saturday	1:30 PM	Linda McNair, MT-BC	636.778.3377 (registration)
South St. Louis County	Fit 'n Fun Garden Villas South, 13457 Tesson Ferry Rd.	Level 1	Monday	11:30 AM	Mike Scheller, PTA	314.289.4202
South St. Louis County	Movement Training Friendship Village Sunset Hills, 12563 Village Circle Drive	Level 2	Friday	10:00 AM	Beth Templin, PT	636.778.3377
Ste. Genevieve	Movement Training Community Center, 21390 Hwy 32	Level 2	Thursday	11:00 AM	Ketta Hill, PT	573.883.5244
St. Peters	Movement Training Barnes-Jewish St. Peters Hospital Healthwise Center, 6 Jungermann Circle	Level 2 Level 1	Tuesday	10:00 AM 11:00 AM	Holly Evans, COTA	636.916.9650
St. Peters	Aquatics St. Charles YMCA, 3900 Shady Springs Ln.	Level 1-2	Thursday Winter Session Jan. 2 - Mar. 9	1:45 PM	Alicia Bunn, CTRS	636.896.0999 x21 (Kathleen)
Town and Country	Tremble Clefs Maryville University, 650 Maryville University Dr. Walker Building-Community Room		Thursday	1:30 PM	Megan Moran, MT	636.778.3377 (registration)
Washington	Exercise for Parkinson's (cycle + strength) Four Rivers YMCA , 400 Grand Avenue	Level 1	Tuesday Thursday	1:00 PM	Tim Peters	636.239.5704 (registration)

ILLINOIS

CITY	MEETING SITE	LEVEL	DAY OF MEETING	TIME	LEADER(S)	PHONE
Belleville, IL	Exercise for Parkinson's East Belleville YMCA, 2627 Carlyle Avenue	Level 1	Monday Wednesday	12:00 PM	Stefanie McLaughlin	618.236.9983 (registration)
Carlinville, IL	Movement Training Carlinville Area Hospital, Medical Office Building, Community Room, 20613 N. Broad	Level 2	Thursday	10:00 AM	Amy Murphy, PT	217.854.3141 x377
O' Fallon, IL	Exercise for Parkinson's O'Fallon YMCA, 284 North Seven Hills Road	Level 1	Tuesday Thursday	12:00 PM	Amy Weisbrodt	618.628.7701 (registration)
Quincy, IL	Be Well with Parkinson's Blessing Wellness Center, 4917 Oak Street	Level 1	Wednesday	10:00 AM	Rita Arment, PT	217.223.8400 (registration, ask for Home Care)
Quincy, IL	BIG For Life Blessing Wellness Center, 4917 Oak Street	For LSVT- Big Graduates	Monday	10:00 AM	Rita Arment, PT	217.223.8400 (registration, ask for Home Care)
Springfield, IL	Joy of Movement (Dance) Laurel United Methodist Church, 631 South Grand Ave. West	All Levels	Tuesday	1:30 PM	Eve Fischberg, OT	217.494.4961

Non-affiliated exercise classes are listed on our website only.

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 **636.778.3377** or email **apdastlouis@apdaparkinson.org** to let us know! Thank you in advance for helping us spend our resources wisely!

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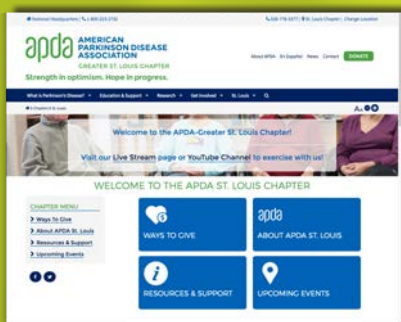
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**JOIN US FOR
THE FOLLOWING
PROGRAMMING AND
EVENTS IN 2018!**

APRIL 15

Parkinson Prom, sponsored in part by Jack Strosnider, Congregation Shaare Emeth, RSVP required

MAY 21

20th Annual Golf Classic in Memory of Jack Buck, Algonquin Golf Club, RSVP required

JUNE 2

2nd Annual Optimism Walk, in Memory of Walter & Connie Donius, Maryville University

AUGUST

PEP Meeting: Be Prepared! Planning for the Future - featuring Elder Law Attorneys (date/location to be announced)

OCTOBER 4

Elliot & Mary Ann Stein Speakers Series – Dr. Michael Greger, *How Not to Die*, RSVP required

NOVEMBER

PEP Meeting: Topic and date/location to be announced