



## “3rd Annual Shakin’ but not Stirred!”

Friday the 7<sup>th</sup> of October the doors to the Georgian Room at the Spokane Club opened up for the guests of the 3<sup>rd</sup> Annual “Shakin’ but not Stirred” fundraising Martini and Silent Auction. Over one hundred and twenty guests from the Spokane community joined the Parkinson’s Resource Center Board of Directors, volunteers and the seven local restaurants and vendors to enjoy delicious treats and martinis like the Lemon Drop and Apple Blossom Martinis made with local vodka from Dry Fly Distillery. There were delights for every pallet from



Fast Eddies, Famous Ed’s and David’s Pizza, Luna, Revolver Bar and Lounge and Coffee with Dessert from Waverly’s and Chaps. We were able to enjoy everything from a selection of Stromboli, Grilled Salmon with Dilled Cream Cheese on a Stone Wheat Cracker, Candied Lemon Zest with Goat Cheese, and 3 Olive Tapenade Crostini to Yummy Cake bites for dessert. Through the hard work of our Board,

volunteer event planning committee, and our generous community business donors we had three overflowing auction tables with baskets, gift certificates, and artwork. Bidders had fun bidding against each other for many unique auction items such as one of a kind Martini paintings, Cougar Tailgating Fun Pack, weekend stay at a beautiful Condo at Schweitzer, golf at

Black Rock, and it was all for a very good cause. We would like to thank you for your support. The contributions made at the 2011 “Shakin’ but not Stirred” through ticket sales and the auction go to support the Parkinson’s Resource Center of Spokane. The generosity at the event and throughout the year allows us to provide programs, support groups and a growing resource center in the Spokane community and surrounding areas throughout Washington, Idaho, Montana, Oregon and Alaska. Thank you for your generosity and we look forward to enjoying and growing this event with you again next year.

### Parkinson’s Educational TeleHealth

TeleHealth is a live video conference originating at St. Luke’s Rehabilitation Institute, 711 S. Cowley St. Spokane, WA on the 2nd Monday of each month from 2-4 PM. There is no charge to attend this meeting in person, or to join in at one of our remote locations (contact the PRC with remote location questions).

#### November 14 2011

Presenter: Becky Tiller, owner of Tiller Care Strategies, Spokane, WA

Topic: Care Management Services, Home Safety, and Assisted Living

#### December 12, 2011

Presenter: Darrelle Volwiler, Ph.D of Volwiler Counseling, Spokane, WA

Please visit our website or call the resource center for updated topic information for this month. **Also:** Parkinson’s Year-End Celebration – Just for fun; join in a sing-along with the Spokane Tremble Clefs

## Cougar Corner

Parkinson's disease (PD) is a neurodegenerative disease affecting movement. Unfortunately, despite much research, it is unknown what the true cause of this disease is. There have been many theories and possible causes, but none have fully explained the loss of dopamine, a chemical that helps send messages in the brain. As the disease progresses, there is a greater loss of dopamine and therefore the symptoms of PD worsen.

Some medical professionals believe in the "oxidative hypothesis". The oxidative hypothesis suggests that as dopamine is used in the brain, *free radicals* are released. This is a normal process that occurs in all brains. Typically, free radicals are eliminated by a chemical called glutathione. However, free radicals can cause damage if there are too many of them. With PD, the levels of glutathione in the brain are lower usual. Therefore, the free radicals can cause damage to dopamine-producing cells and increase the loss of dopamine. Because glutathione is thought to be protective to the brain and specifi-

## Glutathione...let's stick with what we know...

By Gretchen Riker, Pharm.D.

cally protective to dopamine, glutathione supplementation has been considered as a possible treatment for PD.

Glutathione's possible protection of the brain is similar to other antioxidants such as vitamin C, vitamin E, and Coenzyme-Q10. Some of these supplements have been used because they are thought to help protect the brain and decrease the loss of dopamine and symptoms seen with PD. The research done on these has not yielded a clear answer. Some studies find it may be slightly helpful, while others find no benefit. It could be harmful, potentially interacting with other therapies being used, which is why it is important to always discuss ALL therapies with your doctor.

Some patients with PD are considering glutathione therapy, which is given as an intravenous (IV) injection. The research with glutathione is very limited and mostly seen in animal studies. It does not show much benefit at preventing loss of dopamine and damage to the brain. There are many options that have been shown to be more effective in helping to slow the progression of symptoms seen with PD. Using medications such as levodopa-carbidopa (Sinemet®), ropinirole (Requip®), and

pramipexole (Mirapex®), just to name a few, can be very effective. Non-medication options include being involved in a support group, singing, dancing and other forms of exercise and movement, as well as trying to keep a positive outlook and attitude. If you do want to explore some of the alternative options for treating your PD, these should be in conjunction with accepted therapies and always while communicating your ideas to your doctor. Seeing a neurologist specially trained in movement disorders can be very helpful because the best treatment for a patient with PD is very unique to each individual.

PD is a very unique disease; each person has symptoms that show up in a different order and progress at a different rate. While research continues to try to find a cure, there are many "possible treatments" that have not been shown to be effective. It is important to be careful when changing your therapy and to always discuss possible changes with your doctor first. While glutathione, along with the other antioxidants, may show a small benefit in some patients, further research is needed and these therapies are not recommended at this time.

### Meet your Board Member: Sheila Geraghty, Vice President

Sheila Geraghty was born and raised in Spokane, Washington. She attended public and catholic grade schools and graduated from Gonzaga Prep in 1979. She went on to get her bachelor degree in Political Science and Sociology from Washington State University, and is active in the Alumni Association. Sheila received her Masters degree in Organizational Leadership from Gonzaga University in 1995. After working in the corporate world for many years, Sheila decided to change her focus to non-profits and has been the Business Administrator at The Salvation Army of Spokane since October of 2008. She is a member of Downtown Kiwanis, and sits on the board of Transitions, Spokane-Limerick Sister City Society and the Emergency Food and Shelter Program. In 2010, her mother's husband John was diagnosed with Parkinson's. It was a life changing moment for her family. But now John is thriving with treatment and has just recently joined Tremble Clefs. He and Sheila's mother are really enjoying their weekly sing-a-longs! Sheila is proud to be a member of the PRC Board and will help awareness and resources that will advance the PRC mission.



## The Parkinson's Foot

### Len Norfleet, Master Level Physical Therapist/Board Certified Athletic trainer

When looking at a Parkinson's Foot's behavior, there are very similar aspects to the behavior of the foot, the tone of the foot/ feet, and how that affects balance, walking, and standing, and even sleep. It can even become even goutie-like pain, especially the big toe. I want all of you to really take a look at your feet and see what those toes are up to. Often we take our feet for granted, shoving them into shoes too narrow, too wide, or myriad of heel heights, allowing worn out old favorites to linger too long in the closet. Or even heaven forbid flip flops!!!!

Let us break down your foot and how it got in the shape it can get too. What most people with PD don't realize is that the foot can be one of your first behavioral signs of your PD symptoms. It simply begins as a normal balance response of over balancing as if you're on the edge of a cliff or when you lean too far forward. This response is totally normal it causes you to grip the floor using your toes as grippers trying to hold back that forward push/ pull feeling PD can bring on. The gripping and over gripping of the toes becomes abhorrent when the toes begin to adaptively shorten and can become "hammer toes" this begins the "Rigid" Dystonic foot as you see here. Unfortunately, it does stop there; the big toe seems to be left out so it gets involved as. The big toe or greater hallicus be-

gins to literally stick up in the air, even Botox or tendon release of this has stopped that big toe well getting into your business. This can be very painful and very restrictive reducing your stride length, push off and then progressing even further the next step in the PD foot. The remarkable aspect with my over 20 years experience is that even if you have flat feet, pes cavus, the PD foot can restore the natural long arch as you see above causing an elevated arch while depressing your Tarsal



bones, those in between bones from your toes and your ankle. The transverse arch that horizontal part where your forefoot is arched in a rainbow like shape and easily is push up. This Horizontal (Transverse) arch is pivotal (literally) allows your to pivot and adapt to the ground as you step. Again it doesn't stop there the next step is the supination of the ankle where the ankle turns up. This then effects your base of support often times transferring it out to the little toe or 5<sup>th</sup> metatarsal. This combined affect can cause pediatric chaos and multiple orthopedic issues not to mention pretty hard to balance on the side of your foot..

## What to do.....

1. Be aware both at rest when sitting, lying down, and walking of what your foot is doing. Often times The PDer doesn't realize that they are constantly on their tippy toes causing increase tone, some times a clonus like tremor, like when you bounce your heel up and done this can become adverse and constant at times especially when stressed or fatigue. This dystonic behavior and over used balance system can lead to restless feet twitching ( not to be confused with wrestles leg syndrome) and can lead to sleep disruption, the slightest weight of a tight or heavy quilt can start your foot in action with out you knowing it... The trick often times is that taping, or an ASO brace (call for specifics).

2. Keep your feet flexible, just a golf ball or two taped together and rolling it up, and down and then side to side just behind the toes (that's the transverse arch I spoke about); massage, deep tendon pressure on the bottom of the foot can help.

Changing behavior..... yes you can change how PD effects your body's reaction to the lack of dopamine. The biggest thing I teach is what often times we try to avoid if you have flat feet, That being pronation or pushing of down into the big toe in your stance and push off phase of your walking.



The Parkinson's Resource Center of Spokane relies upon its Board of Directors to maintain the vision and promote the mission of the PRC as well as to support the Parkinson's disease community.

#### PRC Board of Directors

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**Emeritus:**  
**Ed Ewell, R.Ph.**, Retired Pharmacist and Pharmacy Owner, PRC Co-founder

### New happenings at the Parkinson's Resource Center of Spokane

In the month of September the Parkinson's Resource Center of Spokane added a new member to the PRC team. Cyndi Cook, the new Office Administrator and Program Coordinator has been working to make the PRC even more welcoming and useful to the community and those who are affected by Parkinson's Disease. In her short time here she has also experienced the PRC's exciting fundraiser "Shakin' but not Stirred", met the support group leaders, some of the participants and many great supporters of the Parkinson's Resource Center! Cyndi brings several years of management experience working in local non-profits, events and fundraising. The most important thing to Cyndi is family. Cyndi and her husband Eric have four children and lots of extended family. Don't be surprised to find Cyndi with her LC Football shirt on during football season or talking about the kids and how they are doing. She likes to have fun, work and play hard, watch movies, read books, play with their animals, learn new things and organize just about anything she can get her hands on. Come down to the PRC to see the changes, check out our resources, and meet Cyndi!



# Tremble Clefs begin their 7th year!



The Spokane Tremble Clefs held their annual picnic at Manito Park in August after completing their 6<sup>th</sup> year of operations. They began their 7<sup>th</sup> year of sessions in September by welcoming two new speech-language pathology (SLP) students, Allison Budzier and Vanessa Grier, to the group. Two years ago, Doreen Nicholas, the speech clinic director for the combined EWU/WSU SLP program at the Spokane Riverpoint campus, began recruiting students to assist the Tremble Clefs with vocal exercises to improve the quality and loudness of their voices.

This program has been a great success, both for the students and for the Tremble Clefs. So far, 12 students have been educated and trained in the special needs of folks with Parkinson's. The Tremble Clefs meet every Tuesday from 1 to 2 PM at the Rockwood Manor South. Contact Cyndi, our Program Coordinator at the Parkinson's Resource Center if you would like to become a member or to get additional information.

## Exercise for Parkinson's

How can a person lower their risk of Parkinson's disease development or decrease some of its symptoms? Exercise! New research is focusing on the fact that exercise done consistently and early on in the disease may possibly play a role in decreasing symptoms and may be neuroprotective in nature. Numerous musculoskeletal changes may be improved or slowed by exercise, including: spinal flexibility, core strength, posture, respiratory volume, and pain. Exercise has also been shown to increase the release of dopamine, increase the clinical efficacy of levodopa, and improve cognition and mood.

For most of us, the thought of exercising regularly sounds boring. The good news is that it doesn't have to be! Numerous studies are being published to support the use of a wide variety of activities to improve Parkinson's symptoms that are far from boring (tandem biking, tango, tai chi, etc.). Exercising with a partner or group can also improve compliance and consistency to achieve better results.

A great opportunity to become involved in an exercise class began Tuesday Oct. 11<sup>th</sup> and is still accepting enrollments. Classes are held on Tuesday's, 3pm at 9827 N. Nevada, Spokane, WA (Avalon Care Center). Brighton Rehabilitation and Avalon Care Center at Northpointe will be hosting a **FREE** weekly exercise class on Tuesdays to encourage improved mobility. The class will be geared toward individuals with Parkinson's disease at all levels. Please call Ingrid van Anrooy, PT, DPT to sign-up and reserve your spot (509)468-7000.

**Looking forward to seeing you there!**

**Planning your estate?** In 2010 the PRC received a total of \$9,765.10 from people who had named the Parkinson's Resource Center of Spokane in their will or codicil. *That's about 25% of the PRC yearly budget. That's important because everything we offer is FREE to anyone who asks. If you're considering how to "leave a legacy" please consider helping the PRC spread HOPE by remembering us in your will.*

### Language to consider for a Will or a Codicil to a Will

I, \_\_\_\_\_, of \_\_\_\_\_ County, \_\_\_\_\_ State, declare this to be [the First Codicil to] my Last Will dated \_\_\_\_\_.

[I direct that paragraph \_\_\_ of Article \_\_\_ of my Last Will to read as follows:]

I give my estate [or \_\_\_\_\_ percent of the rest and remainder of my estate] [or \$\_\_\_\_\_ from my estate] to the Parkinson's Resource Center of Spokane, Spokane, Washington ("PRC"), a Washington State nonprofit corporation TIN 91-2113876.

NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY/ZIP: \_\_\_\_\_  
 DAYTIME PHONE: (\_\_\_\_\_) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 CHECK ENCLOSED \_\_\_ CREDIT CARD: \_\_\_ VISA \_\_\_ MASTERCARD

\_\_\_\_\_  
 CREDIT CARD NUMBER                      EXPIRATION                      SECURITY CODE

\_\_\_\_\_  
 CARDHOLDER'S SIGNATURE



**If you itemize your taxes** and are looking for another deduction, please consider the 501 (c) 3 charity PRC.

**Donor envelopes are missing** from the newsletter. Many people already use their own envelope to send donations, others go to our website and click on the **Donate** button to use their credit card.

**All our services are FREE because of your generosity!**

**Please mail your donation to:**

**Parkinson's Resource Center  
 PMB 199, 1314 S Grand Blvd., Ste 2  
 Spokane, WA 99204**

My gift is in \_\_\_ Honor / \_\_\_ Memory of: \_\_\_\_\_

Special Instructions: \_\_\_\_\_



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Our Mission:

*“Serving to enhance the quality of life of people affected by Parkinson’s disease through empowerment, education, and awareness.”*

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**Check out the PRC Facebook page @ Parkinson’s Resource Center of Spokane for updates!**

### **The Tremble Clefs Are Branching Out!**

Beginning in November 2011, the Tremble Clefs will hold a monthly session on the north side. The sessions will be on the first Wednesday of every month from 2:15 to 3:15 PM at the Avalon Care Center at 9827 N. Nevada. Tremble Clefs members are welcome to participate in both the north side and south side sessions. If you are not currently a member of the Tremble Clefs but are interested in the north side sessions, please contact the PRC to get on the list for receiving information about this new location.

### **Dance for PD**

Come dance with us twice a month. Dance for PD meets on the 1st and 3rd Saturdays of each month from 11:00am to 12:15pm., September thru May, hiatus summer and January. Please join us at 1108 N. Pearl Street.

## **Support Groups**

### **Parkinson’s and Care Partners**

Meets the 2nd Wednesday of each month at the Parkinson’s Resource Center in the Deaconess Health and Education Building. This Support group is for anyone affected by Parkinson’s Disease; patient, caregiver, family or friend.

## **Support Groups continued...**

### **Caregivers**

This is a support group for those who care for Parkinson’s patients to share common experiences and build a trustful network for caretakers. It meets the fourth Wednesday of each month; please call the PRC for information.

### **Women with PD (WWPD)**

Meets the 1st Thursday of each month at a location coordinated by the group’s facilitator. The WWPD group focuses on issues unique to women with Parkinson’s, finding fun and open ways to help those women with PD. Contact the PRC for information.

### **Coeur D’Alene Support Group**

Meets the 1st Friday of each month and is looking for more members and volunteers to help with the facilitating of the support group as the current leader juggles family and caregiving. Please contact the PRC for more information.

### **Young Onset PD Group**

Looking for a place to talk with others who are experiencing many of the same experiences as you...contact the PRC for more information.