When politicians discuss how to manage the budget deficit, do you ever wonder what would happen if every American contributed just $1 or more? The deficit would be significantly lower than it is today and might quite possibly not exist at all. And so one morning, I posed this question to my staff: What if everyone who received the LiNK newsletter, whether they are an individual who has Parkinson disease, or a family member, or a care provider, or a professional, each donated what they could, within their means, to the Greater St. Louis American Parkinson Disease Association (APDA) – $1, $10, $100, $1,000 – times 9,500 individual mailing addresses – couldn’t we create a virtual fundraiser? It would be an opportunity for everyone who is touched by or touches this disease to make a difference and demonstrate their commitment and “ownership” by making a contribution to further our mission of easing the burden of living well with Parkinson disease while researchers continue their efforts to find causes and a cure!

With an audience of 9,500 households connected to the Greater St. Louis American Parkinson Disease Association, we have an exciting opportunity. If 9,500 contribute simply what they are able, that would make an enormous difference by ensuring that people maintaining strength and balance through our wonderful weekly exercise classes, or engaging in our monthly support groups, or attending an educational meeting, or becoming better educated by reading the LiNK newsletter can enjoy these programs and services any time they need them.

We are proud to be setting the standard and raising the bar for other chapters around the country. I am proposing that we consider doing our own Greater St. Louis Chapter ice bucket challenge, but minus the ice and the bucket. Instead of the freeze of the ice, together we can generate the warmth of community by ensuring a family in need can always access programs, support and education through APDA. What has touched you, a loved one or a friend? Five dollars allows two LiNK newsletters to reach individuals looking for opportunities for programs and support. If a support group provided understanding, a donation of $25 would provide funding to rent a space for...
APDA Greater St. Louis Chapter
Deborah Dalin Guyer, MA
Executive Director
dguyer@stlapda.org
Sarah Schmerber, OTD
Program Coordinator/Development
sschmerber@stlapda.org
Michelle Almengor, BA
Program Coordinator/Administration
malmengor@stlapda.org

APDA Community Resource Center
1415 Elbridge Payne • Suite 150
Chesterfield, MO 63017
Hours: 7:30 a.m.– 4:00 p.m. M–F
Phone: 636.778.3377
www.stlapda.org

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Medical Director
Joel S. Perlmutter, MD

National Affiliation
APDA • 135 Parkinson Ave.
Staten Island, NY 10305
800.223.2732

Editor
Deborah D. Guyer

Contributing Editors
Michelle Almengor
Betty Hayward
Sarah Schmerber

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.

APDA Advanced Parkinson Research Center
at Washington University in St. Louis—Research Update

By Joel S. Perlmutter, MD, Department of Neurology, Head, Movement Disorders Section, Washington University School of Medicine

This year we have made substantial progress in our Parkinson disease research efforts. Again, much of this work has been supported by the Greater St. Louis Chapter of the APDA and the APDA Advanced Research Center at Washington University. Of course, we also thank all of the volunteer participants in our research studies—without whom none of this work would have been possible.

I want to give an update on our research fellows who have completed their neurology residency and are now taking additional training in Movement Disorders with a focus on Parkinson disease. Dr. B. Maiti has started his second year of fellowship training with us and has been focusing on our studies of thinking problems that occur in PD. Our new fellow, Dr. Albert (Gus) Davis, is working in Dr. David Holtzman’s lab concentrating on various aspects of alpha-synuclein. Dr. Holtzman, Dean of Neurology, investigates the function of abnormal brain proteins which include alpha-synuclein (the abnormal protein that occurs in the brains of people with PD). Once again, we have received a substantial gift from Mrs. Jo Oertli that continues to support these fellowship opportunities.

A major area of research has focused on the changes in the brain that lead to cognitive difficulties in people with PD. We have previously found that everyone with PD and thinking problems has abnormal deposits of the protein alpha-synuclein in higher parts of the brain called the cortex. This past year, we found that spinal fluid levels of alpha-synuclein correlate with the amount of another protein called A-beta. A-beta is typically one of two abnormal proteins that accumulates in the brains of people with Alzheimer disease and in about 60% of people with PD and dementia. This relationship does not occur in people without PD and is important since this, along with our spinal fluid findings, is more evidence that people with PD only uncommonly have brain changes typical of Alzheimer disease. That is to say, PD and Alzheimer disease have different types of brain changes.

Another study that we published in the journal Neurology showed that the spinal fluid levels of alpha-synuclein in people with PD also correlated with the strength of brain networks that we can measure with a special type of MRI scan known as a resting state study. These particular studies are done with someone lying quietly in the MRI scanner. This was the first evidence that the alpha-synuclein protein actually relates to specific brain functions. We also published a paper describing the cognitive reserve or amount of damage that must occur to the brain prior to development of difficulties with thinking in people with PD. In this particular study, we found that those with less than 16 years of education had more trouble with thinking if they had PET measures of increased A-beta in the brain. Thus, these findings suggest that more education in people with PD protects against the clinical effects of A-beta deposits in the brain. Perhaps most interesting is the recent paper published showing that several different brain chemical messengers are substantially decreased in various brain regions. Classically, the focus has been on the loss of dopamine, but these new findings indicate major reductions in serotonin and norepinephrine. We found...
Have you ever tried to take a step and felt like your foot was glued to the floor? This phenomenon is referred to as freezing of gait (FOG), and it affects approximately 20-60% of people with Parkinson disease (PD). The underlying causes of FOG are poorly understood. Formally defined, FOG is the transient inability to produce an effective stepping motion. Situations frequently associated with FOG are turning, walking through doorways, walking while changing surfaces (e.g., carpet to hardwood floor), or when walking in narrow or crowded spaces. Because the body continues to move while the feet stay fixed to the floor, FOG is one of the most significant risk factors for falling in people with PD.

While FOG is often frustrating and may lead to fear of falling, there are specific movement strategies that may help reduce FOG severity.

The most studied intervention targeted at reducing FOG is the use of cueing. Cueing takes many forms: 1) auditory, 2) visual, and 3) attentional. Auditory cueing often involves the use of a metronome or rhythmic music. The person with FOG is instructed to step at a certain beat. The prevailing thought is that this helps restore a more normal rhythm needed for walking, which is often lost in people with PD. Visual cues are used in several different ways. Taped lines on the ground, cracks in the sidewalk, or your spouse’s foot to step over to get started are examples of visual cues. Some canes or walkers can have a laser pointer attached to them, which produces a line on the floor that acts as the target to step over. Attentional cues, perhaps the most practical type of cues, require the person with FOG to pay attention to how they move. For those with PD, walking typically becomes less of an automatic behavior. This means that an individual with PD may benefit from paying attention to their stride to help establish an improved walking pattern. When a caregiver or friend tells one with PD to “take big steps” or “heel-toe,” this is using attentional cues. The person with PD focuses their thinking on the length of their stride or hitting with their heel first when taking a step to help to facilitate an effective gait pattern.

The research on all three types of cues shows positive effects of each. When used, the cues result in improved walking speed and stride length. However, when they are taken away or are not used, the gait pattern returns to baseline. This suggests that these cues, whichever is preferred, must be used regularly to maintain the improvements in walking. To date, there is no research to show that one type of cueing is superior to another. Oftentimes the response to each cue varies from individual to individual.

Because physical or emotional stress tends to increase symptoms in people with PD, it is very important to avoid getting upset during a freezing event or trying to “push your way through” a freezing event. Being stressed or trying to force through a freeze will often prolong the freeze, making it more difficult to move.

If you experience FOG, shuffling, or difficulty walking, a physical therapist can be a useful resource in helping you to understand which type of cue might benefit you most. A physical therapist with experience in treating people with PD is trained to determine which cue provides the most benefit and how to optimize that specific cue to improve walking and reduce FOG. People with severe FOG may benefit from using an assistive device like a walker, and a physical therapist can help determine which device is best for the person with PD. Because some individuals with FOG also have difficulty with standing balance, a physical therapist can also provide exercises to improve the factors that cause instability with walking.

In summary, FOG is a common and frustrating problem for some people with PD. There are strategies that are effective in improving movement and reducing FOG. A physical therapist with experience in treating people with PD will work with you to determine how to best improve your walking and decrease FOG.

Drs. Duncan and Crowner are physical therapists with extensive experience in treating individuals with Parkinson disease and other movement disorders. They regularly see patients at the Washington University Physical Therapy Clinics. A referral from your neurologist or primary care physician is needed to initiate treatment. For further information, call 314.286.1940.
Medicare Part D Open Enrollment:
Do Your Homework (Even If You Already Have a Part D Plan!)

By Stacey K. Barton, MSW, LCSW; Department of Neurology, Movement Disorders Center, Washington University School of Medicine

Medicare Part D is the prescription drug benefit associated with traditional Medicare. Despite being in effect since 2006, many people remain confused about how to make the most of the benefit. This article will focus only on Medicare Part D with traditional Medicare, not drug coverage obtained through a Medicare Advantage Plan (Part C).

The Basics Part D was enacted to provide financial relief to Medicare recipients from the high cost of prescription medications. Coverage for both brand name and generic drugs is provided by private companies offering prescription drug plans (PDPs) and covers prescriptions obtained from retail and mail order pharmacies. Each PDP will have its own list of covered medications (formulary) and within the formulary, drugs will be assigned to different tiers. Higher tier drugs cost more.

Participation in Part D is open to everyone with Medicare, but it is not free. Medicare recipients can enroll in Part D when they first become eligible for Medicare. Indeed, most people should enroll upon initial eligibility, otherwise they may incur a permanent penalty of 1% of the national monthly premium average times the number of months a person failed to enroll. Exceptions to this are those who can prove they have other coverage that is equivalent or better (such as through employment or retiree medical benefits) or those who have low income and qualify for the Extra Help Program (more on that in a minute). For those who didn’t sign up when first eligible or who wish to change plans, open enrollment is annually from October 15 to December 7 for coverage beginning on January 1 of the following year.

Costs Part D costs come in several forms: the monthly premium, annual deductible, copayments/coinsurance and costs in the coverage gap. The monthly premium varies by plan but the 2016 annual average is expected to be $32.50 per month. Not all plans charge a deductible, but for those that do the 2016 maximum annual deductible is $360. Copayment and coinsurance costs vary by drug tier. The coverage gap, commonly referred to as the “donut hole,” is the period of time when the insured person reaches the Medicare Part D plan’s initial coverage limit. It ends when the person has spent enough out of pocket to meet the out-of-pocket threshold and enters the catastrophic coverage period, which would stay in place for the rest of the year. The Affordable Care Act included a provision for the donut hole to slowly close. In 2016, while in the donut hole, Part D enrollees will receive a 55% discount on the total cost of their brand name drugs. 50% of this discount is paid by the drug manufacturer and 5% is paid by the PDP. The good news is that 95% of the cost of the drug (the 45% you paid and the 50% paid by the drug manufacturer) will be “applied” towards your out-of-pocket costs which means you will exit the donut hole much faster. For generic drugs you will pay up to 58% of the cost. Nothing additional is applied toward your out-of-pocket costs.

For example: You are in the donut hole and purchase brand-name medication “B” (retail cost $100) and generic medication “G” (retail cost $50). These two medications will cost you $74 ($45 for “B” and $29 for “G” after the discount), but $124 ($45 plus $50 for “B” and $29 for “G”) will be applied towards your out-of-pocket maximum.

Once you have exited the donut hole, you enter catastrophic coverage until the end of the calendar year. During that time, you pay only 5% of the cost of the drug (or $2.95 for generics or preferred drugs or $7.40 for all other drugs, whichever is higher).

Making the Most of Your Benefit

Now that you understand the basics of costs, there are steps you can take to maximize your benefit. The most important thing you can do is to reconsider your PDP every year, even if you are satisfied with your current coverage! The reason for this is because the “best” plan for you may have changed. If your medications changed even a little over the year, another PDP could be cheaper, and also PDPs themselves change coverage and costs a lot from year to year (and usually do!). For example, one year my mom’s plan costs quadrupled even though she only took two very inexpensive generic medications. We found a new plan that was less expensive and switched her plan (even though the current one was the cheapest the prior year!). Remember also that, with only rare exceptions, you can only change your PDP once per year, during open enrollment, so it is important to make changes while you can.

To evaluate the PDPs from which you can choose, start by visiting https://www.medicare.gov/find-a-plan/questions/home.aspx. Enter your ZIP code and
then choose the correct answer to “How do you get your Medicare coverage?” If you have traditional Medicare, which is what this article is aimed at, you will select “Original Medicare.” You can choose “I don’t know” to the next question unless you are certain you benefit from a program on the list. Click “Continue to Plan Results.” Next, enter your medications, including the accurate dose and number of tablets (this can make a big difference!). Once that is completed, you will select your preferred pharmacy or pharmacies on the next screen. This is also important because some plans provide better coverage at some pharmacies so you will want to make your decision based upon the pharmacy you prefer. If you are open to considering other nearby pharmacies or mail order, that may allow you to reduce costs.

On the next screen, it is important to choose “Prescription Drug Plans (with Original Medicare).” The only reason you would not select this option is if you are looking at the option of giving up traditional Medicare and enrolling in a managed care plan instead. This choice has big implications outside of medication costs and is well beyond the scope of this article.

When you continue to plan results, you will see the PDP choices available in your area. The default first result will be the lowest annual drug cost at your preferred retail pharmacy. You may notice that your costs can vary by thousands of dollars per year from the cheapest PDP to the most expensive!

**A Few Tips**

- For some people, the cheapest plan over the course of the year may have a deductible. Some people would rather avoid the deductible to keep their monthly costs flatter even if it costs a bit more annually. If that is true for you, pay attention to whether the plan you are looking at lists a deductible.
- Many people only compare the monthly premium in making their choice. This is a mistake. Plans with low monthly premiums may make up the costs elsewhere by having deductibles, drug restrictions, or placing your medications in higher tiers.
- Consider mail order. To check for the lowest cost mail order plan, change the “Sort Results By” at the top to select the mail order option. You can also see that you have other sorting options there as well.
- By clicking on the red box in front of the PDP name and then clicking “Compare Plans,” you can select up to three PDPs to compare side by side. Note that they may not appear on the next screen in the same order they were on previously!
- Another helpful feature of clicking the “Compare Plans” button is that you can see your expected monthly drug costs (including the monthly premium). You can also see when you are expected to hit the coverage gap, if at all. This is very important so you can plan ahead! Every year we get calls from patients who are surprised when they hit the coverage gap and have no plan to pay for their medications. There are very few options for help in the coverage gap beyond the provisions already in place by the Affordable Care Act.
- If you are switching plans or signing up for the first time, you can click the “Enroll” button on the right. If you are keeping your same plan, it is not necessary to re-enroll. If you are switching plans for 2016, enrolling in a new one will automatically trigger the old plan to stop at the end of 2015. No additional work is necessary on your part to cancel your current plan.

### Getting Help with Drug Costs

People with lower resources may also be eligible for a special program called the Low Income Subsidy or “Extra Help” program. As of the time of this writing, the 2016 income and asset limits are not posted but they are likely to be similar to 2015.

In 2015, the income limit for individuals was $17,655 per year and for married couples it was $23,895 per year. Resource limits were $13,640 for a single person and $27,250 for a married couple. Resource limits apply to money in the bank, stocks and bonds but do not include the home, one car, burial plot, up to $1,500 set aside for burial expenses, and household items. Even if you are over these income or resource limits a bit, try applying anyway; many people have been successful.

People who qualify for Extra Help receive assistance paying for their deductible, copayments and costs in the coverage gap. Depending on the level of Extra Help, you may still incur a small copayment, but the maximum copayments in 2016 are $2.95 for generics or preferred drugs and $7.40 for all other drugs.

If you aren't sure if you qualify for Extra Help, apply anyway! It is a quick online application and can save you thousands of dollars. To apply, visit [https://secure.ssa.gov/i1020/start](https://secure.ssa.gov/i1020/start) and follow the instructions.

Other ways to lower your costs may be to switch to generics when possible, use a mail order pharmacy, talk to your doctor about other drug options that may be on a lower tier, or see if your state has a Pharmacy Assistance Program. In Missouri the Pharmacy Assistance Program is called MORx and information is available here: [http://www.morx.mo.gov/](http://www.morx.mo.gov/).

These are difficult economic times, but there are things you as an informed consumer can do to maximize your benefits and limit out-of-pocket costs. If you need assistance with navigating your Part D options, APDA may be able to provide a referral for social work assistance.
Over 300 people joined us in the Versailles Ballroom at the Sheraton Westport Chalet on October 12, 2015, to support the APDA annual auction, luncheon, and fashion show. The afternoon began with our silent auction, in which attendees were able to shop for wonderful baskets, restaurant gift certificates, and one-of-a-kind items. Jennifer Blome, Director of Humane Education at the Animal Protective Association & former anchor of Today in St. Louis, joined Kelly Jackson of KSDK-TV & KTRS-Radio 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 not only at Washington University School of Medicine but around the world. He shared exciting new findings resulting from brain tissue examinations, including several different brain chemical messengers, serotonin and norepinephrine, which are reduced in various regions of the brain. This is a particularly important finding since it suggests other drug targets beyond the usual replacement of dopamine. Scientists continue to make progress in development of a medication, carboxyfullerene, which has potential to slow damage to dopamine-producing cells, resulting in a slowing of PD progression. Debbie Guyer recognized the many sponsors and volunteers for their time and effort in putting together the auction and fashion show. A small segment of a recent TED lecture with Robin Morgan was played for the audience, with Ms. Morgan reciting a poem she has written called “No Signs of Struggle.” The audience was moved by the author’s rhythm and music of language; with the power of metaphor and imagery Ms. Morgan captured the essence of how “growing small requires enormity of will.” Honorary Co-Chair Terri Brennan spoke on behalf of herself and her husband, Gerry, about the impact that the APDA has had on their family and her realization of the importance of daily exercise in slowing down the progression of this intruder. She shared a very common feeling of relief at having finally received an accurate diagnosis after years of trying to find the answers to her emerging difficulties.

The event was a huge success, raising almost $90,000 to support our mission, and we could not have done it without the help of our tireless volunteers. Lynda Wiens, Auction Chairperson, was the woman behind the creative and beautiful baskets and auction room. 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. Fashion Show Chairpersons Joanie Goldstein, Sherrie Rieves and Kathy Wunderlich gathered a lovely group of returning and first-time models and brought fresh ideas and fun to the runway. The guests were treated to fashions by new and returning local boutiques including Camille La Vie, Mister Guy- The Men’s Store, Mister Guy- The Women’s Store, Paperdolls, Savvi Formalwear and Vie. A round of applause goes to our 26 models and to the boutique owners and designers who selected fashions off their racks and outfitted our lovely models.

The Tremble Clefs, a singing group comprised of 35-40 people with Parkinson disease, sang two songs and provided entertainment for the event. The Tremble Clefs choir is led by music therapist extraordinaire, Linda McNair, MT-BC, and accompanied by Anna DiVesta. Our guests each enjoyed receiving plantable seed paper dresses from Cast Paper Art, which is owned by the Tremble Clefs’ own Steve Deines. Steve also spoke to the crowd to talk about how Parkinson’s had changed his life and career as an opera singer, as well as treating everyone to a short song with lyrics written by the choir to the song “Imagine.”
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A heartfelt thanks to all the volunteers, bankers, and runners who made sure the event progressed smoothly. For many years now, volunteers from Elsevier have 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 Lori Gambill, and video production by Larry Balsamo of Video Views, visit www.stlapda.org.

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Fran Zamler

Kelly Jackson & Jennifer Blome
A Thanksgiving Wish
By Debbie Guyer, MA, Executive Director

Few people are grateful to be diagnosed with Parkinson disease (PD), or the symptoms it brings and the side effects of the medication. As we approach Thanksgiving, however, it is important to take stock of what is good in your life. Perhaps you’ve met some of the best friends you’ve ever had through your support group. Maybe dance has helped improve your movement and Tai Chi your balance.

And, of course, there are the blessings of family and friends. Here at the Parkinson Association, we are thankful to be able to answer a question for that caller or to find the perfect support group for the newly diagnosed person. We feel grateful for the opportunity to provide quality education programs and supportive family services to those living with PD every day. Mostly, we are thankful for YOU and your support throughout the year.

A colleague of mine, Stacy Tew-Lovasz, President/CEO of the local Alzheimer Association, emailed this message of thanks to their members years ago. I would like to share her thoughts, as it captures what we’d like to say to you as well.

Thank you for raising your voice.
Thank you for creating awareness.
Thank you for your financial support.
Thank you for your time.

Thank you for influencing change.
Thank you for advancing research through donations or clinical trials.
Thank you to those who provide care, who we honor especially this month.

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 and wholehearted “thank you.”

Here’s to a holiday season full of blessings.

Over-The-Counter Medications – Use with Caution! (Part 1)
By Morvarid Karimi, MD, Department of Neurology, Movement Disorders Section, Washington University School of Medicine

Cold-related supplements  As we approach the cold and flu season, let us review a few basic tips. Most upper respiratory illnesses are due to viral infections. This means that antibiotics do not shorten the course of the disease. Taking antibiotics, when not indicated, can not only harm you by killing off the good bacteria in your gut but also increase the risk of bacteria becoming resistant to these antibiotics in our community. The first crucial step is prevention. Please make sure you receive your yearly flu shot and that you are up to date on the pneumonia vaccination. Wash your hands frequently and teach children in particular around you to cover their mouths with the bend of elbow when coughing or sneezing. Despite all precautions, when you catch an upper respiratory illness make sure that you drink plenty of water. Hydration helps you feel better and makes it easier to cough up mucous and clear your airways. If you develop a high fever and severe body ache, please see your primary care physician as soon as possible as you might have influenza which can affect you even if you have had a flu shot. The reason for the urgency is that your doctor can prescribe a special antiviral medication for you that is effective only if taken within the first two days of the illness. Although there is no cure available for most upper respiratory illnesses, you can take over-the-counter medications that help you feel better. Please avoid “cocktails;” these are combinations of two or more over-the-counter medications marketed under a promising name. Instead look for medications that have only one active ingredient and use it to address a specific complaint.

Antihistamines: They help with runny nose, sneezing, itchy or watery eyes, or allergic reactions like hives. Examples are diphenhydramine (Benadryl), chlorpheniramine (ChlorTrimeton), loratadine (Claritin), and cetirizine (Zyrtec). Diphenhydramine is the most effective one; however, it results in the greatest risk of drowsiness and confusion, especially if there is any cognitive decline or tendency toward hallucinations. That is why we usually ask our PD patients to avoid it and use loratadine or cetirizine instead. Certainly it is best to take these at bedtime, when sleepiness is not a problem.

article to be continued in the February 2016 issue
Tributes are a thoughtful way of expressing sympathy, giving thanks, celebrating special occasions such as birthdays, anniversaries, 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.

HONORING

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Shanna Kohner

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Rita Eiseman

Josephine & John Mazzola on their 50th wedding anniversary
Terry & Sandra Allen

Sue & Kelly Price

Andy & Alice Nutis on their 50th wedding anniversary
Mark & Laurel Capron

Mary Collins
Mike & Linda Ford
Sherry Silver
David & Mary Thien

Mrs. Bonnie Perlman on her special birthday
Mr. & Mrs. Jerry & Pam Brown

Dr. Joel Perlmutter
David & Barbara Furman

Harold Rosner on his 80th birthday
Paul Stumpe

Ruth & Sylvan Sandler on their special anniversary
Ms. Gertrude Hultbert

Kathryn & Bernard Schubert on their 70th wedding anniversary
Eva Skebo

Anita Selle
Howard Selle

Jack Strosmier on his 90th birthday
Jean Stemmler

Linda Wallace on her granddaughter Emma’s Bat Mitzvah
Sharna Kodner

Vernon L. Wein on the occasion of his birthday
Sharon Wein

Bob & Lynda Wiens on their 40th wedding anniversary
Karl & Debbie Guyer

IN MEMORY OF

Elizabeth Abernathy
Kevin & Beth Hollander
Marion & Virginia Medic
Michael & Angela Mueller
Virginia Pruetzel
John & Jennifer Sanford

Helen Caroline Alabach
John & Diana Alabach
Mary Alabach
Roseanne Galyon Brumit &
Clifford Brumit
David Cawein
Lynn Collins
Jeanne Moritz
Richard & Kathleen Wright
Matt & Peggy Wunder
Moritz

Gordon “Mark” Allen
Donald G. Glennie

Joseph Ancona
Margaret Barton
Shelly & Michael Coulter
Dickmeyer Family
Janet Eberhardt
Patricia Frockemann
Claudine Huether
John & Cindy Mathers
St. Louis Real Estate
Investors
Joseph Salko
Tony & Gery-Vonder Haar
Linda Walker

Edna Bahr
J Paul Biesterfeldt

Jake Balf
Cheryl Perl

Richard Bannes
Bee Friederich
Kelle & Jeff and K.R.
Koeneman

Shirley J. Barber
Dorris Goodhart & Family
Art & Jan Worley

William David Bartels
Jill Stein

Ruth Julia Benear
Mike & Jane Richie

Virginia J. Besgrove
Don & Jan Bagby
Gary & Sara Bagby
Dan & Deb Drane
Mark & Susan Feezee
Shirley Monckton
Kevin & Marilyn O’Bannon
Gale & Ann Schaller
Fred & Willie Stroupe
Chuck & Lou Thompson
Ted Vogelweid

Ada Billings
Bambry Craig

Marvin Bley
Clifford & Brenda Young

James Boahtoit
Sylvia & Dick Graves

Gene Boedeke
Laura & Ted Greenberg
and Family

Bernadine Nancy Bondona
Sherry Silver

James Brackett
The Schuettes

All Brouk
Gayle Brouk
John & Lynnette Kozer
Barb Lindhorst

Bunny Bryan
Claire & Randy Rosenthal
Judy & Steve Rosenthal

James L. Buheue
Mary Buheue

Helen S. Capps
Mark & Nancy Kodner

Clarence “Zack” Carter
Earl & Catherine Addison

Kevin Casey
Mary & Thomas Behan
Margaret & Jim Bernhard
Steven & Claudia Black

Dale & Kathy Hake
Jim & Pam Hake
Joe & Donna Hake
Kenneth & Mary Hardy
Ann & Tim Hughes
Norm & Elena J ump
Timothy Ott
Tom & Suzanne Pennycook
Dave & Debbie Russo

Jerry Coleman
Bob & Jennie Schuller

Dr. Edwards Matthew Crogan
Mary & Marie Bergmann

Walter Donius
Karl & Debbie Guyer

Calvin C. Donjon
Joe Bergesch & Your Fantasy Football Friends

Richard Fehr
Del & K Banner
Dianne & David Banner
Kirk & Sherry Banner
Lynda Kay Banner
Ronald W.Camden
Groves & Carol Cooke
Carol Crossley
Lance & Michele Duvall
Ruth Fisher
Amy Foote
Rachel & Neil Giffhorn
Joann Hamilton
Eula Hoover
Victor & Laura Horn
Image Technologies, Corp.
Shane Jackson
Trish Jackson
Jennifer Larson
Audrey B. Lytle
Elizabeth Marshall
Jad & Sarah Mason
Mary Ellen & Warren
Meyer
Elaine & Phil Pasquini
Tim & Amy Reinarth
Mr. & Mrs. George Reuss
Jane & Jeff Teeter
Jeffrey & Janette
Thompson
Dena Wallermefchtel
Bob & Lynda Wiens

James Noel Flynn
Carol Bohn
Shirley Corin
Randy & Clarette Harnish
Joe & Mary Ann Kochanski
William Olson
The Sargent Family

Frances Fox
Annette Haynes Carbaugh
Peter, Jane & Jim Cauchon

Mabel Clark & Family
Doug & Melody Cosn
Independent Order of Odd
Fellows-Grand Lodge of
Missouri

Independent Order of Odd
Fellowship-Farmington
Rebekah Lodge 407

Darlene Gaertner
Harlan & Barbara Floom

Maxine Gaterman
Tim & Pat Bahlering
Kay Bauer
Virginia Collignon
Mr. & Mrs. Jack Gaffigan
Wayne & Arlene Hogue
Ed & Carol Horn
Dolores Mayfield
Lorraine & Mark Conkey
Michael E McCraw
Terri Oehler
Jerry & Diane Puff
Linda & Paul Puff
Quest Graphics, LLC
Donna & George Reinicke
Mr. & Mrs. John Shine
Bob & Mary Sina
Robert & Jeannine Sina
Diane Venegoni
Opal Wiesehan

Robert Geier
Ann Delaney
Charles & Kimberly Manley
Margaret M. McCarthy
Bob Naucke
Gary Naucke
Sharon & Butch Rinklin
Lauren Royal

Francis George
Gerry & Jane Eschmann
Elaine Glassman
Mark & Nancy Kodner

Alan Goldberg
Rita Eiseman
Mark & Nancy Kodner

Dr. John Headrick
Eva Sketoe

Marie F. Hinni
Charles E. and Mary E. Sharp

Marigrace Hoffman
Marianne Sullivan
Thompson Family

Dorothy Jarvis-Kellett
Shirleen & Colleen
Coughlin
Kevin & Beth Hollander
Blake & Laura Hooper
Donald & Kathy Julian

Susan Burke Kellett
Judith & Thomas Minella
Tom & Lois Stiles
UFCW Local 88

Robert Klostermeyer
Tom & Joan Rauch
Phyllis Schaefter
Anne Woodrome

Pattie Latchman
Judith Hayes

Lucille Linville
Bernice & Mike Resnick

Martin March
Debbie & Bernie Gray
Bernice & Mike Resnick
Beverly & Jerry Silverman
Lee & Lynne Simmons

Hal McDonald
Jeff & Louise Levine

Frances Lorraine Melliere
Katherine Aiello
Richard Bevenue
William & Dorothy
Dearworth
Joe & Laurie Flees
C.J. McCarthy
Mark & Nancy Melliere
Tony & Dorothea Mirth
Kenneth & Helen Reichert
Lori Weiss Schreiner &
Gary Schreiner

Mr. & Mrs. Dan Slattery
Joy & Robert Stafford
Roy & Joyce Wirth

Charlotte Meyer
Edwin Seematter

Jerre Minner
Bernice & Mike Resnick

Ruth P. Mitchell
Barnes Jewish Chemistry
Lab

Anita Borchelt
Danske & Gaye Puchbacher
and Family

Eugene Montabon
Joni & Larry Erickson
Jean & Dan Kleypas
Bud & Helen Simpson

Robert T. Naumann
Audrey Naumann

Ralph E. Niehaus
Mr. & Mrs. E. Schoesel

Willie Owen
Kathy Hurst
Frank & Lois Lang
Tom & Linda Nagle
Ken & Chris Scherer
emotionally)! KBM Group raised almost $2,500 for the Greater Parkinson community during the third quarter of 2014 as well. We look forward to this becoming an annual tradition. Thanks so much for your support again this year.

Journey for Charity Tractor Cruise

Bob Weber participated again this year in the Knights of Columbus Journey for Charity Tractor Cruise. Bob’s wife, Carol, facilitates our Washington, MO, Support Group. Bob collected $855 which is more than the $843 collected in 2014. He is approaching the $1,700 mile marker (for the two years) during this 30-mile tractor cruise, which begins in St. Claire, MO, and ends in Washington, MO. This is the ninth year for such an event and Bob’s second 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.

Casual for a Cause

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 community. Over $2,000 was raised during this quarter, proving that dressing down never felt so good (both physically and emotionally)! KBM Group raised almost $2,500 for the Greater

The generous support from the friends and family of Gail & Larry, employees of KBM Group, Bob Weber, and the many other Optimism events across the Greater St. Louis area help us continue in our mission to enhance the quality of life for people with Parkinson disease and provide funding for ongoing Parkinson research.

It is very impressive that these three Optimism Events held since our August newsletter have generated $9,237. What Optimism Event can you or your family sponsor?
The Ice Bucket Challenge Minus the Ice and the Bucket  continued from page 1

our meetings each month. If an exercise class helped maintain mobility and independence, $50 would provide 10 weeks of exercise. If education and knowledge about research empowered you or brought you hope, $75 provides a special speaker. Bringing these gifts to our community – your community – is a gift that will bring others – and YOU – great warmth this time of year and no ice and no bucket required!

Big things often have small beginnings. Together, we discover. Together, we create. Together, we heal. Together, we innovate. Together, we lead. Please consider making a contribution which will help us maintain critical programs and expand new ones to meet the needs of our growing Parkinson community. It will enable us to support the research being conducted to find causes and ultimately a cure for Parkinson disease. The overriding goal is to make Parkinson’s no one’s disease, and that can and will be accomplished with your help.

Every one of us can make a difference, together! ■

APDA Advanced Parkinson Research Center at Washington University in St. Louis–Research Update  continued from page 2

despite these changes upon examination of brain tissue from those that donated their brains after death. This is a particularly important finding since it suggests other drug targets beyond the usual replacement of dopamine. These studies have been done with a large team of investigators including Drs. Meghan Campbell, Chandana Buddhala, Nigel Cairns, Paul Kortzbaer, Erin Foster Voegtli, OTD, Johanna Hartlein, NP, and others. These important studies have continued to be supported by the Chapter and the APDA Advanced Research Center. We still need volunteers to participate in this study – we now have 274 but still need another 50 participants.

We also continue to make progress in development and validation of neuroimaging measures of PD severity. Such measures are absolutely critical for us to determine whether any new treatment can slow disease progression. Much of our research targeted measures of the nerve cells that make dopamine, but we have now extended these studies to other brain chemical messengers. For example, we are now able to measure acetylcholine, another chemical messenger system in the brain. This new radiotracer that we can measure with PET scanning has been developed by Dr. Will Tu and his team, and we have begun initial studies in humans with this.

We have already started making these measurements with PET in people. In addition, we have completed a series of studies using a new PET radiotracer that measures another part of the dopamine system called PDE10A. PDE10A is a part of the dopamine system that helps to translate dopamine effects on a nerve cell. In effect, PDE10A helps transmit nerve messages transmitted by dopamine, thereby controlling this signaling system in the brain. There are many actions related to PD that may relate to changes in this PDE10A system, and we can now begin to investigate these systems. This work has been done by Dr. Morvarid Karimi, Dr. Tu, Dr. Xu, and others. Again, much of the preliminary work necessary to obtain these data were supported by the APDA Greater St. Louis Chapter.

Finally, we continue to make progress in development of a medication that has potential to slow PD progression. This work has been done in collaboration with Dr. Laura Dugan, now at Vanderbilt. 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 nigrostriatal neurons – those are the dopamine-producing nerve cells that degenerate in PD. We published this last year in Annals of Neurology. Prior to starting studies in humans, I wanted to develop a method to measure how carboxyfullerene targets specific brain systems. This is important to help determine proper dosing in humans – that would make a research study in humans much stronger and more likely to succeed. We are about to begin these studies to identify such a measure. These studies have included Drs. Tian, Karimi, Norris, Dugan, Mink, Tabbal, and Moerlein. Again, this work was initially supported by the Chapter, then by two separate NIH grants, and now donations are helping to keep this important work moving forward.

These are just a few of the studies done at the Advanced Research Center. Dr. Racette and his team continue to make outstanding progress in the risk that environmental exposures play in the development of parkinsonism as well as describing some of the disparities in providing care to under-represented ethnic groups. Dr. Gammon Earhart continues to make great progress in the effects of various exercise and rehabilitation strategies in improving quality of life and reducing morbidity of PD.

None of this research would be possible without our volunteers and many of their care partners. The Chapter support remains key for us to make this progress. Individual donations and funds raised at events help the Chapter support a grant provided to the Advanced Center for Parkinson Research at Washington University in the amount of $100,000 annually. We need to work together to bring better treatments to people and families affected by PD. Debbie Guyer continues to keep us on track and has been particularly helpful in coordinating strategies in improving quality of life and reducing morbidity of 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.stlapda.org, or call the APDA Information & Referral Center or the facilitator. Information that has changed since the last LINK appears in bold.

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<th>PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballwin</td>
<td>St. Louis</td>
<td>Meramec Bluffs Care Center 40 Meramec Trails Dr., Activities Rm.</td>
<td>4th Tuesday</td>
<td>2:00 PM</td>
<td>Gayle Truesdell</td>
<td>636.923.2364</td>
</tr>
<tr>
<td>Cape Girardeau</td>
<td>Cape Girardeau</td>
<td>Cape Girardeau Public Library 711 N Clark Street, Oscar Hirsch Room</td>
<td>3rd Monday</td>
<td>6:00 PM</td>
<td>Desma Reno, RN, MSN</td>
<td>573.651.2939</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>APDA Community Resource Center 1415 Ebriddle Payne, Suite 150</td>
<td>1st Tuesday</td>
<td>10:30 AM</td>
<td>Mary Buck</td>
<td>636.532.6504</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>For Caregivers Only APDA Community Resource Center 1415 Ebriddle Payne, Suite 150</td>
<td>2nd Monday</td>
<td>10:30 AM</td>
<td>Dee Jay Hubbard, PhD</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Columbia*</td>
<td>Boone</td>
<td>Lenoir Community Center 1 Hourigan Drive</td>
<td>1st Thursday</td>
<td>4:00 PM</td>
<td>Patsy &amp; David Dalton</td>
<td>573.356.6036, 573.434.4569</td>
</tr>
<tr>
<td>Creve Coeur</td>
<td>St. Louis</td>
<td>Pre/Post-DBS Group Missouri Baptist Medical Center 3015 N. Ballas, Main Parking Garage 4th fl., CLI Rm. 419</td>
<td>3rd Tuesday</td>
<td>6:30 PM</td>
<td>Joe Vernon</td>
<td>314.614.0182</td>
</tr>
<tr>
<td>Creve Coeur</td>
<td>St. Louis</td>
<td>Young Onset Living and Working with PD Missouri Baptist Medical Center 3015 N. Ballas, Main Parking Garage 4th fl., CLI Rm. 419</td>
<td>3rd Tuesday</td>
<td>6:30 PM</td>
<td>Doug Schroeder</td>
<td>314.306.4516</td>
</tr>
<tr>
<td>Festus/ Crystal City</td>
<td>Jefferson</td>
<td>Disability Resource Association 130 Brandon Wallace Way</td>
<td>3rd Tuesday</td>
<td>1:00 PM</td>
<td>Penny Roth, Laura Sobba</td>
<td>636.931.7696, x129</td>
</tr>
<tr>
<td>Florissant</td>
<td>St. Louis</td>
<td>Garden Villas North 4505 Parker Rd.</td>
<td>4th Thursday</td>
<td>11:00 AM</td>
<td>Nancy Robb</td>
<td>314.869.5296</td>
</tr>
<tr>
<td>Jefferson City</td>
<td>Cole</td>
<td>Capital Regional Medical Center SW Campus, Cafeteria</td>
<td>3rd Wednesday</td>
<td>3:00 PM</td>
<td>Jennifer Urich, PT David Urich</td>
<td>573.632.5440, 573.796.2395</td>
</tr>
<tr>
<td>Joplin</td>
<td>Jasper</td>
<td>Byers United Methodist Church 1730 S. Byers, Gymnasium</td>
<td>Every Monday</td>
<td>3:00 PM</td>
<td>Nancy Dunaway</td>
<td>417.623.5560</td>
</tr>
<tr>
<td>Kansas City</td>
<td>Jackson</td>
<td>VA Medical Center 4801 Linwood Blvd. Hall of Heroes Room</td>
<td>3rd Tuesday</td>
<td>11:00 AM</td>
<td>Jesus Torres, Nikki C. Caraveo, RN, BSN, CNRN</td>
<td>816.861.4700, x56765</td>
</tr>
<tr>
<td>Kirkwood</td>
<td>St. Louis</td>
<td>Kirkwood United Methodist Church 201 W. Adams, Room 201</td>
<td>4th Tuesday</td>
<td>7:15 PM</td>
<td>Terri Hosto, MSW, LCSW Patty Waller</td>
<td>314.286.2418</td>
</tr>
<tr>
<td>Ladue</td>
<td>St. Louis</td>
<td>The Gatesworth 1 McKnight Place</td>
<td>2nd Wednesday</td>
<td>1:00 PM</td>
<td>Maureen Neusel, BSW</td>
<td>314.372.2369</td>
</tr>
<tr>
<td>Lake Ozark*</td>
<td>Camden</td>
<td>Lake Ozark Christian Church 1560 Bagnell Dam Blvd.</td>
<td>3rd Thursday</td>
<td>Noon</td>
<td>Patsy &amp; David Dalton</td>
<td>573.356.6036, 573.434.4569</td>
</tr>
<tr>
<td>Poplar Bluff</td>
<td>Butler</td>
<td>Poplar Bluff Regional Medical Center 3100 Oak Grove Rd. Ground Floor Education Room 3</td>
<td>2nd Monday</td>
<td>6:00 PM</td>
<td>Charles Hibler register with Beryl or Dana</td>
<td>573.785.6222, 855.444.7276, 573.776.9355</td>
</tr>
<tr>
<td>Rolla</td>
<td>Phelps</td>
<td>Phelps County Regional Medical Center, Pulaski Room, 1000 W. 10th St.</td>
<td>4th Thursday</td>
<td>2:30 PM</td>
<td>Sarah Robinson</td>
<td>573.201.7300</td>
</tr>
<tr>
<td>South St. Louis</td>
<td>St. Louis</td>
<td>Garden Villas South 13457 Tesson Ferry Rd.</td>
<td>2nd Wednesday</td>
<td>10:00 AM</td>
<td>Jack Strosnider</td>
<td>314.846.5919</td>
</tr>
<tr>
<td>Springfield</td>
<td>Greene</td>
<td>Mercy Hospital 1235 E. Cherokee</td>
<td>2nd Thursday</td>
<td>2:00 PM</td>
<td>Valerie Givens, RN</td>
<td>417.820.3157</td>
</tr>
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# Missouri Support Group Calendar

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<tr>
<td>St. Peters</td>
<td>St. Charles</td>
<td>Spencer Road Library 427 Spencer Rd., Room 259</td>
<td>1st Tuesday</td>
<td>1:00 PM</td>
<td>Sherrie Rieves, Ann Ritter, RN</td>
<td>636.926.3722</td>
</tr>
<tr>
<td>Trenton</td>
<td>Grundy</td>
<td>Royal Inn 1410 E. 9th Street</td>
<td>1st Thursday</td>
<td>10:00 AM</td>
<td>Novy &amp; Mary Ellen Foland, Gloria Koon</td>
<td>660.357.2283, 660.485.6558</td>
</tr>
<tr>
<td>Washington</td>
<td>Franklin</td>
<td>Washington Public Library 410 Lafayette Avenue</td>
<td>2nd Monday</td>
<td>6:30 PM</td>
<td>Carol Weber</td>
<td>314.713.4820</td>
</tr>
<tr>
<td>Webster Groves</td>
<td>St. Louis</td>
<td>Bethesda Institute 8175 Big Bend Blvd., Suite 210</td>
<td>Last Friday</td>
<td>10:30 AM</td>
<td>Laurel Willis, MSG</td>
<td>314.373.7036</td>
</tr>
<tr>
<td>Webster Groves</td>
<td>St. Louis</td>
<td>Laclede Groves 723 S. Laclede Station Rd.</td>
<td>3rd Wednesday</td>
<td>3:00 PM</td>
<td>Dina Spies</td>
<td>314.446.2594</td>
</tr>
</tbody>
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# Illinois Support Group Calendar

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<tbody>
<tr>
<td>Alton</td>
<td>Madison</td>
<td>Senior Services Plus 2603 N. Rodgers Ave.</td>
<td>2nd Tuesday</td>
<td>9:30 AM</td>
<td>Kim Campbell</td>
<td>618.465.3298 x146</td>
</tr>
<tr>
<td>Belleville</td>
<td>St. Clair</td>
<td>Southwestern Illinois College (PSOP) 201 N. Church St., Rm 106</td>
<td>2nd Monday</td>
<td>1:30 PM</td>
<td>Jodi Gardner, MSW, LCSW</td>
<td>618.234.4410 x7031</td>
</tr>
<tr>
<td>Carbondale</td>
<td>Jackson</td>
<td>Southern IL Healthcare Headquarters University Mall</td>
<td>1st Wednesday</td>
<td>1:00 PM</td>
<td>Bill Hamilton, MD</td>
<td>618.549.7507</td>
</tr>
<tr>
<td>Centralia</td>
<td>Washington</td>
<td>Heritage Woods of Centralia 2049 E. McCord St.</td>
<td>2nd Wednesday</td>
<td>2:00 PM</td>
<td>Dennis Krupp, Betty Evans, Helena Quaid</td>
<td>618.545.6597, 618.533.0224, 618.493.6664</td>
</tr>
<tr>
<td>Champaign</td>
<td>Champaign</td>
<td>Savoy United Methodist Church 3002 W. Old Church Road</td>
<td>Every Monday</td>
<td>10:00 AM</td>
<td>Charles Rohn, Chuck Arbuckle</td>
<td>217.549.6167, 217.586.3100</td>
</tr>
<tr>
<td>Decatur</td>
<td>Macon</td>
<td>Westminster Presbyterian Church 1360 West Main Street</td>
<td>3rd Thursday</td>
<td>1:30 PM</td>
<td>John Kileen</td>
<td>217.620.8702</td>
</tr>
<tr>
<td>Glen Carbon</td>
<td>Madison</td>
<td>The Senior Community Center 157 N. Main St.</td>
<td>3rd Wednesday</td>
<td>10:30 AM</td>
<td>Nancy Goodson, Rich Rogler</td>
<td>618.670.7707, 618.288.3297</td>
</tr>
<tr>
<td>Greenville</td>
<td>Bond</td>
<td>Bond County Sr. Center 1001 E. Harris Ave.</td>
<td>4th Monday</td>
<td>10:30 AM</td>
<td>Anna Oestreich</td>
<td>618.664.1465</td>
</tr>
<tr>
<td>Greenville</td>
<td>Bond</td>
<td>Bond County Sr. Center Baumberger Comm. Rm. CAREGIVERS ONLY</td>
<td>4th Friday</td>
<td>1:00 PM</td>
<td>Anna Oestreich</td>
<td>618.664.1465</td>
</tr>
<tr>
<td>Jacksonville</td>
<td>Morgan</td>
<td>Passavant Area Hospital 1600 W. Walnut—Meeting Room 2</td>
<td>1st Wednesday March-December</td>
<td>6:00 PM</td>
<td>Karen Ladd</td>
<td>217.377.4973</td>
</tr>
<tr>
<td>Mattoon</td>
<td>Coles</td>
<td>First General Baptist Church 708 S. 9th St.</td>
<td>Last Tuesday</td>
<td>1:30 PM</td>
<td>Roy and Kay Johnson</td>
<td>217.268.4428</td>
</tr>
<tr>
<td>McLeansboro</td>
<td>Hamilton</td>
<td>Heritage Woods – Fox Meadows 605 S. Marshall Ave., Dining Room</td>
<td>1st Wednesday</td>
<td>1:00 PM</td>
<td>Paula K. Mason</td>
<td>618.643.3868</td>
</tr>
<tr>
<td>Springfield</td>
<td>Sangamon</td>
<td>St. John’s Rehab. @ Fit Club South 3631 S. 6th. Street #C</td>
<td>3rd Sunday Odd numbered months: 1,3,5,7,9,11</td>
<td>2:00 PM</td>
<td>Kelly Neumann, PT</td>
<td>217.483.4300</td>
</tr>
</tbody>
</table>
**Exercise Classes**

The APDA now offers 14 exercise classes that meet weekly. 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 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](http://www.stlapda.org), or call to find out any changes since publication.

<table>
<thead>
<tr>
<th>CITY</th>
<th>COUNTY</th>
<th>MEETING SITE</th>
<th>DAY OF MEETING</th>
<th>TIME</th>
<th>LEADER(S)</th>
<th>PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clayton</td>
<td>St. Louis</td>
<td>The Center of Clayton 50 Gay Ave., Mind/Body Room</td>
<td>Wednesday &amp; Friday</td>
<td>2:00 PM</td>
<td>Mike Scheller, PTA</td>
<td>314.289.4202</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>St. Luke’s Deslodge Outpatient Center 121 St. Luke’s Center Drive Conference Rooms 1 &amp; 2</td>
<td>Monday</td>
<td>10:00 AM</td>
<td>Sarah Farnell, OT</td>
<td>314.205.6934</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>Friendship Village 15201 Olive Blvd. Friendship Hall-Door #5</td>
<td>Tuesday</td>
<td>1:30 PM</td>
<td>Jessica Andrews</td>
<td>636.733.0180 x7719</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>Parkinson Resource Center 1415 Elbridge Payne, Ste. 150</td>
<td>Monday</td>
<td>1:30 PM</td>
<td>Tricia Creel, DPT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>Tai Chi APDA Community Resource Center 1415 Elbridge Payne, Suite 150</td>
<td>Wednesday or Friday</td>
<td>10:00 AM 11:30 AM</td>
<td>Craig Miller</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Florissant</td>
<td>St. Louis</td>
<td>Garden Villas North 4505 Parker Rd.</td>
<td>Tuesday</td>
<td>10:00 AM</td>
<td>Bobby Lautenschleger, PTA</td>
<td>314.355.6100</td>
</tr>
<tr>
<td>Joplin</td>
<td>Jasper</td>
<td>United Methodist Church 1730 Byers Ave.</td>
<td>Monday</td>
<td>2:15 PM</td>
<td>Nancy Dunaway</td>
<td>417.623.5560</td>
</tr>
<tr>
<td>Kirkwood</td>
<td>St. Louis</td>
<td>RehabCare 439 S. Kirkwood Rd., Ste.200 Park in rear</td>
<td>Thursday</td>
<td>1:00 PM</td>
<td>Brandon Takacs</td>
<td>618.971.5477</td>
</tr>
<tr>
<td>Ladue</td>
<td>St. Louis</td>
<td>Tremble Clefs Singing Salem United Methodist 1200 S. Lindbergh Blvd. Lower Level Choir Room</td>
<td>Saturday</td>
<td>1:30 PM</td>
<td>Linda McNair, MT-BC</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>South St. Louis County</td>
<td>St. Louis</td>
<td>Garden Villas South 13457 Tesson Ferry Rd.</td>
<td>Monday</td>
<td>11:30 AM</td>
<td>Mike Scheller, PTA</td>
<td>314.289.4202</td>
</tr>
<tr>
<td>St. Peters</td>
<td>St. Charles</td>
<td>Barnes-Jewish St. Peters Hospital Healthwise Center, 6 Jungermann Circle</td>
<td>Tuesday</td>
<td>11:00 AM</td>
<td>Holly Evans, COTA</td>
<td>636.916.9650</td>
</tr>
<tr>
<td>St. Peters</td>
<td>St. Charles</td>
<td>Aquatic Exercise St. Charles YMCA 3900 Shady Springs Ln.</td>
<td>Winter Session Oct. 5-Dec. 11</td>
<td>1:45 PM Thursdays</td>
<td>Brenda Neumann</td>
<td>636.896.0999 x21</td>
</tr>
<tr>
<td>Greenville, IL</td>
<td>Bond</td>
<td>Bond County Sr. Center 1001 E. Harris Ave.</td>
<td>Wednesday</td>
<td>10:30 AM</td>
<td>Anna Oestreich</td>
<td>618.664.1465</td>
</tr>
</tbody>
</table>

*denotes non-affiliated APDA support group

**Do you have questions related to Parkinson disease and exercise?** Please call the APDA National Rehabilitation Resource Center at Boston University - toll free helpline to speak with a licensed physical therapist who can answer your questions about exercise and identify exercise and therapy resources in your area.

**TOLL FREE NUMBER: 888-606-1688 or Email at rehab@bu.edu**
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 info@stlapda.org to let us know! Thank you in advance for helping us spend our resources wisely!

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

SAVE THESE 2016 DATES!

April 3:
Tools in Your Toolbox – A Panel Discussion
Who is a Candidate for Deep Brain Stimulation & Who is a Candidate for Duopa Gel?
What are the Pros and Cons of each procedure?

April 9-10
GO! St. Louis-Annual Walk/Run

American Parkinson Disease Association
1415 Elbridge Payne
Suite 150
Chesterfield, MO 63017
Address Service Requested

2015 Fashion Show Highlights
See Inside!

Sandra Gaskill
Monica & Joel Perlmutter
Steve Deines
Katie Byrum
Rebecca Bruchhauser
Lauren, Emma & Kevin Fairlie
Debbie Guyer & Sherrill Rieves

Chris Kuevisauskas
Terri Brennan
Jack Strosnider & Friends