A Thanksgiving Wish

Few people are grateful to be diagnosed with Parkinson disease (PD), the symptoms it brings or the side effects of the medication. However, as we approach Thanksgiving, 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 APDA-Greater St. Louis Chapter, we are thankful to be able to answer a question for a caller, or to find the perfect support group for the newly diagnosed person. We are happy to send out a welcome packet to a new “connection” or to schedule a one-on-one PD101 session with an individual and family members. 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.

Thank you to those who fight and don’t let this disease define them.

Thank you for advancing research through your donations or participation in clinical trials.

Thank you to those who provide care, who we sometimes forget to recognize in this family disease.

Thank you for your time which is precious.

Thank you for your financial support of our programs and services and for your involvement.

Thank you for creating awareness about Parkinson disease in the community.

Thank you for raising your voice.

Thank you for influencing change.

Thank you for inspiring us to do more.

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 commitment to providing outstanding 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 and love.

Warmly,

Debbie
Dear Friends,

I have the privilege of serving as the next President of the APDA-Greater St. Louis Chapter Board of Directors, and I wanted to spend some time introducing myself to you, along with some of the great work that is happening right now at the APDA. My association with Parkinson’s began when my father-in-law, Jim Mentel, was diagnosed with Parkinson disease. Since that time, I joined the APDA-Greater St. Louis Board of Directors and was recently named President. Outside of my work as a board member for the APDA, I am the CEO of RGAx, the transformation engine of The Reinsurance Group of America (RGA). RGA is the only global reinsurance company to focus primarily on life- and health-related reinsurance solutions, and as such is a good fit for community partnerships. We were proud to have sponsored the recent Elliot & Mary Ann Stein Speaker Series featuring Dr. Michael Greger, who spoke about eating right to improve quality of life and longevity, our vision at RGA.

The fall is a great time to reflect on the accomplishments of the past year and begin to focus on goals for the year ahead. With that in mind I will begin by acknowledging Matt Schumacher for his leadership as President of the Board of Directors of the APDA-Greater St. Louis Chapter. As I enter into the beginning of my tenure as President, I can only hope to carry on Matt’s legacy as an advocate for the organization. Under Matt and Debbie Guyer’s direction, and with the support of our many Board members and volunteers, this year the APDA:

- Hosted the first ever collaboration on a community-wide event, The Elliot & Mary Ann Stein Speaker Series, to raise awareness about good health and the APDA-Greater St. Louis Chapter.
- Led the nation as the “model” chapter for the APDA, receiving the Milestone Award from the National APDA in recognition of reaching more than one million dollars in annual revenue towards achieving APDA’s mission, the Salvatore A. Esposito, Sr. Award in recognition of the more than four million dollars contributed to APDA’s research mission over the past 30 years, and our Executive Director, Debbie Guyer, was given recognition for her devotion, dedication and success in fulfilling APDA’s mission since joining the Board in 1996, and serving as Information and Referral Coordinator, and later Chapter Executive Director since 2007.
- Received the 2018 Award for Outstanding Community Partner by The Program in Occupational Therapy at Washington University School of Medicine in St. Louis.
- Served over 18,000 people with personal or family connections to PD in the bi-state region & beyond.
- Generated over $500,000 dollars for research and programs and services through our Golf Classic in Memory of Jack Buck, Optimism Walk and Elliot & Mary Ann Stein Speaker Series.
- Provided $240,000 dollars in grants to the Advanced Center for Parkinson Research at Washington University for continued research in treatment and prevention of Parkinson’s.
- Welcomed our first Director of Development, Melissa Skrivan, who is responsible for engaging donors with the APDA mission and driving philanthropic support for research and programs.

As we approach 2019, we hope to offer additional programming, provide more funding for research, and drive even greater awareness of the resources available to those in need. It is with a personal passion for people with PD, and out of gratitude for the support the APDA-Greater St. Louis Chapter provided my family, that I take on the challenge and opportunity of leading our Board. It is an honor to serve in my father-in-law’s memory.

Regards,

Dennis

LETTER FROM THE PRESIDENT OF THE GREATER ST. LOUIS BOARD
When someone asks me what they can do to live well with Parkinson’s, my number one recommendation is to keep moving. That may seem like a strange recommendation, since Parkinson’s can make it challenging to move, but the evidence supporting the importance of physical activity and exercise is clear and undeniable. A study of over 2,000 people living with Parkinson’s showed that those who were exercising for 150 minutes or more per week had better mobility, physical function and cognitive performance compared to those who were not exercising. The people who were exercising regularly also experienced less disease progression over the course of a year.

Exercise can convey a wide array of benefits, not the least of which is improved quality of life. Studies suggest that exercise can be helpful whether you have been living with Parkinson’s for a day or for decades. It is never too early or too late to start, and there are lots of options in terms of types of exercises and activities that are beneficial. Aerobic exercise such as walking or biking - anything that gets your heart pumping harder and faster - can improve cardiovascular health and make movement more efficient. Balance exercises such as Tai Chi can help to improve postural stability and may even lead to a reduction in fall risk and number of falls. Stretching and flexibility exercises can help reduce stiffness. Strengthening exercises can improve the structure and function of muscles, making movement more effective. And complex activities that require learning of new skills, such as dancing, may help with physical function as well as cognitive function. Because there is not overwhelming evidence to suggest that one form of exercise is better than others, I recommend that people incorporate a variety of different types of exercises into their routines. After all, variety is the spice of life and can help to keep exercise interesting and enjoyable rather than doing the same thing day after day.

Speaking of day after day, we often underestimate the importance of our daily levels of physical activity. It is not just our planned or structured exercise that matters - our levels of activity throughout the course of daily life are also important. Being active, or spending less time sitting, is associated with less movement difficulty and a host of other health benefits. Ideally, we would all exercise for 150 minutes per week and get 10,000 steps per day, but in reality any amount of activity is better than being inactive. Do what you can to be active and set goals for yourself to keep moving.

If you are interested in learning more and receiving expert guidance regarding exercise and physical activity, you might consider participating in our upcoming research study. As a participant in this study, you would receive comprehensive assessments and multiple visits with a physical therapist to develop an exercise and physical activity program tailored to your needs and help you set goals. You would also receive support to help you continue exercising for a 1-year period.

For more information, Contact the Washington University in St. Louis: Program in Physical Therapy at 314.286.1478

Gammon M. Earhart, PT, PhD, Director, Program in Physical Therapy, Neuroscience and Neurology at Washington University
While Parkinson disease (PD) is often characterized by the common motor symptoms of tremor, stiffness, slowness, difficulty with balance and shuffling gait, pain is actually a very common non-motor symptom. As with many non-motor symptoms, sometimes the onset of pain even precedes motor symptoms. One recent study found that 76% of people with Parkinson disease report some type of pain. The difficult thing is that pain may be caused by something other than Parkinson disease. People with PD can have the pain for many of the same reasons as the general population, but there are also aspects of pain that are unique to PD. Recognizing the type of pain and the source of the pain can be key to effective treatment.

**TYPES OF PAIN**

There are various classification systems for Parkinson disease pain, but the most frequently cited system includes five types organized according to their origin and treatment approach.

**FORD’S PAIN CLASSIFICATION**

<table>
<thead>
<tr>
<th>Pain</th>
<th>Pain Classification</th>
</tr>
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<tbody>
<tr>
<td><strong>Musculoskeletal pain</strong></td>
<td>Aching, cramping, muscle tenderness, arthritic changes, skeletal deformity, limited joint mobility, postural abnormalities</td>
</tr>
<tr>
<td></td>
<td>May be exacerbated by rigidity, stiffness, and immobility, and relieved by mobility</td>
</tr>
<tr>
<td></td>
<td>May fluctuate with dose of medication and improve with levodopa</td>
</tr>
<tr>
<td><strong>Radicular/neuropathic pain</strong></td>
<td>Pain caused by a compression, inflammation or injury to a nerve root</td>
</tr>
<tr>
<td></td>
<td>Pain typically radiates along the course of the nerve</td>
</tr>
<tr>
<td><strong>Dystonic pain (dystonia)</strong></td>
<td>Associated with sustained twisting movements and postures; muscular contractions that are forceful and painful</td>
</tr>
<tr>
<td></td>
<td>May fluctuate closely with medication dosing</td>
</tr>
<tr>
<td><strong>Central or primary pain</strong></td>
<td>Originates in the brain, brainstem or spinal cord</td>
</tr>
<tr>
<td></td>
<td>Burning, tingling, “pins and needles” sensations, numbness, loss of touch sensation, often continuous</td>
</tr>
<tr>
<td></td>
<td>Pain may vary with the medication cycles</td>
</tr>
<tr>
<td><strong>Other pain</strong></td>
<td>Headache, rectal, abdominal, oral and genital pain, akathisia (restlessness)</td>
</tr>
</tbody>
</table>

The most common type of pain experienced by people with Parkinson disease is musculoskeletal pain (41%), followed by other pain (31%), radicular pain (27%), central pain (22%) and dystonic pain (17%). People in the advanced stages of Parkinson disease are more likely to report pain and higher intensities of pain. Additionally, people who have pain tend to be more depressed and have poorer scores on quality-of-life measures. Not surprisingly, most depressive scores are reported by people who are in constant pain.

**LOW BACK PAIN**

One thing that distinguishes the pain experienced by people with Parkinson disease is the high prevalence of low back pain. One recent study found that 87% of people with PD experience low back pain compared with only 65% of the general population. Chronic low back pain (lasting longer than 3 months) is also more common with Parkinson’s (48% of people with PD vs. 28% without). A study done in 2018 found that people at a higher risk for chronic low back pain are older, have higher levels of depression and anxiety, have more motor symptoms such as rigidity and have more impairments in their posture.

It can be challenging to tell whether low back pain is caused by the routine aches and pains of everyday living or by Parkinson disease. Regardless of the origin, all people with low back pain tend to be stiffer, have more difficulty making postural changes in preparation for moving, have more difficulty knowing where their limbs are during movement, have slower movements and have more difficulty maintaining their balance when perturbed. However, in the general population these impairments are typically localized to the trunk, whereas people with PD may experience them globally.

As a result, low back pain in Parkinson disease should be treated as more than just a musculoskeletal injury. Treatment should also address how the person moves. For example, someone with Parkinson disease may have changes in the way that they walk that impacts their lumbar spine. They may have altered mechanics with reaching, bending and lifting that can strain their lumbar spine. Addressing low back pain may also include treating depression and anxiety with medications, lifestyle changes and therapy or counseling. If rigidity is a contributing factor, complementary therapies like acupuncture or massage may help, although the benefits tend not to last.

**DYSTONIC PAIN**

Dystonia is characterized by painful, prolonged muscle contractions that can cause involuntary repetitive twisting, abnormal
movements and abnormal postures. People with Parkinson disease often report painful cramping in their arms, hands, neck or feet. Symptoms can improve with Parkinson’s medications, so it can be very helpful to track how dystonic symptoms respond to the timing of the medication. In addition, botulinum toxin (Botox) injections may help. A small amount is injected in overactive muscles, decreasing the rate of muscle firing for a few months. Physical therapy may be used in conjunction with medication. It is also worth considering complementary therapies such as yoga, Tai Chi and meditation, although there is not yet good research on these treatments as it relates to dystonia.

POSTURAL CHANGES
Parkinson’s affects automatic activities, including automatic cues to stand up straight. As a result, people with PD may have rounded shoulders, a forward head or a backwards tilt of their pelvis, all of which puts strain on the spine and other joints. Stooped posture also makes it more difficult to reach overhead, resulting in altered reaching and lifting mechanics. Additionally, people with Parkinson disease can develop spinal disorders, including:

- **Scoliosis** – lateral curvature of the spine
- **Anterocollis** – dropped head
- **Camptocormia** – bending forward when walking, sometimes as much as 90 degrees
- **Pisa syndrome** – involuntarily leaning to one side when sitting, standing or walking

A physical therapist can often be helpful in providing exercises, manual therapy and cues for stretching, strengthening and relaxing the appropriate muscles to improve posture. In some cases, surgical intervention is required.

ARTHritic PAIN
There is no evidence that Parkinson disease increases the risk for osteoarthritis (mechanical stress on a joint that causes breakdown of joint cartilage and underlying bone), but as age is a risk factor for both PD and osteoarthritis, it is not surprising that many people with PD also suffer from arthritis. Many of the movement and postural changes experienced by people with PD can exacerbate symptoms of arthritis. Additionally, arthritis in the spine is common and may contribute to spinal stenosis (narrowing of the spinal canal that can cause compression or injury to nerves as they exit the spine). There is strong evidence that exercise and joint protection techniques can decrease pain and disability from arthritis. Programs that include combinations of strength, flexibility, and aerobic exercises are more beneficial than general activity (e.g., cleaning the house). Even better are programs that include therapy and education about exercise to decrease fear of activity and improve adherence.

SUMMARY
Pain is a common symptom experienced by people with Parkinson disease, but it can be complicated to determine the origin of the pain. Understanding the different types of pain can help when you are communicating with your doctor. Because Parkinson’s medications are often a powerful tool to decrease Parkinson-related pain, it is important to track the timing of your medication with your symptoms. You also need to share with your doctor any other medications you take for pain – including over-the-counter drugs, herbs, vitamins and mineral supplements. Additionally, there is good evidence that physical therapy and exercise can help alleviate many types of Parkinson-related pain. To receive the most benefit, see a physical therapist for an individualized evaluation and treatment before starting a general exercise program.
HOW NOT TO DIE, IS IN FACT, A GREAT WAY TO LIVE!

Debbie Guyer, Executive Director, APDA-Greater St. Louis Chapter

David Baugher, Jewish Light

The American Parkinson Disease Association-Greater St. Louis Chapter hosted Dr. Michael Greger for the inaugural Elliot and Mary Ann Stein Speaker Series. The event was only 1 ¾ hours long, but the health benefits will last a lot longer. Over 600 individuals were treated to an outstanding presentation by Dr. Greger at Congregation Shaare Emeth. One of the Presenting Sponsors, Jill Stein, described Dr. Greger this way: “Dr. Greger is such a character; he’s just a delight to listen to and his knowledge is clearly encyclopedic.” She goes on to say, “it is amazing the way he puts scientific material into readily comprehensible language and with such a sense of humor.” We have received many emails and phone messages from guests who are now motivated to change their lifestyle and their eating habits, giving plant-based nutrition a try. This educational program reflected the mission of the American Parkinson Disease Association (APDA) to assist people with Parkinson’s disease and their eating habits, giving plant-based nutrition a try. This educational program reflected the mission of the American Parkinson Disease Association (APDA) to assist people with Parkinson’s disease and their families.

We are grateful to our SPONSORS who made this event possible:

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The Stein Family in memory of their parents, Elliot and Mary Ann Stein, and the James and Alison Bates Foundation, a Donor Advised Fund of The U.S. Charitable Gift Trust, honoring Nancy Rapp

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for generously donating the wine selections for the reception, Fred & Ricky’s and Frida’s for their tasty preparations for the VIP Reception, Angie Lawing of Spoke Marketing for generously handling advertising and marketing, Amy Bornstein of the St. Louis Jewish Book Festival for their collaboration in making this event a Bookend for their annual Festival, and Lynda Wiens for the floral arrangements

STEIN SPEAKER SERIES COMMITTEE:
Gail Glenn, Steve Hiler, Pam Lazaroff and Matt Specter and the SPICE BLEND GIFT PREPARERS: Pam Lazaroff, Chris Burgess, Steve Hiler, Nalini Mehta, Lynda Wiens

VOLUNTEERS AT REGISTRATION AND THE PRE-EVENT RECEPTION:

From top: Michael Greger and Angie Lawing; Greger presenting at the Congregation Shaare Emeth; Dennis Guilliams, Susie and John Kinsella, Jill Stein
Urinary Tract Infection (UTI) and Parkinson Disease

Johanna Hartlein, RN, MSN, FNP Nurse Practitioner, Department of Neurology, Washington University Movement Disorders Section

Although most people are familiar with the motor symptoms of Parkinson disease (PD), such as tremor or muscle stiffness, non-motor symptoms are often more prevalent and can be the most troublesome. Urinary symptoms such as increased sense of urgency, frequency, nocturia (frequent urination at night) and incontinence are very common in people with Parkinson’s and can significantly impact an individual’s quality of life. Urinary Tract Infections (UTIs) are actually the most common infection that is associated with worsened motor or cognitive symptoms in PD. If left untreated, UTIs can result in hospitalization and can even lead to serious infections in the blood or to death.

UTIs are very common in people with PD for several reasons. First, Parkinson disease itself causes changes in your bladder function. A majority of people with Parkinson’s have residual urine left in their bladders after urinating, which can lead to infections. Motor symptoms like tremor, rigidity and decreased dexterity can also make it more difficult to wipe and maintain hygiene. In other words, both PD itself and its symptoms can predispose individuals to urinary tract infections.

If you are concerned that you or your loved one may have a UTI, common symptoms to look for include pain with urination, changes in urine color or odor, inability to start flow, increased incontinence and fever. While it is true that UTIs may cause all of the above symptoms, they do not always cause those symptoms in people with PD. Sometimes, people with Parkinson’s may experience a “silent UTI” meaning that they have no urinary symptoms at all, but instead have worsened cognitive or motor symptoms. For example, family members will call their doctor to report that their loved one has had a sudden increase in falling, confusion, development of hallucinations (seeing things that are not there) or suspicious thinking. While a UTI cannot explain an increase in movement or thinking difficulties in every case, it is reasonable to collect a urine sample to check for an infection. If a urinary tract infection is present, many times people will return to their typical level of thinking and mobility after receiving treatment.

It is important to consult with your doctor about the best medications to treat urinary symptoms, particularly if you or your loved one has cognitive symptoms or hallucinations. Some medications for overactive bladder can cause an increase in confusion or hallucinations. Other medications for starting urinary flow or to help with bladder emptying can cause a drop in blood pressure, so these drugs should be used cautiously for people with orthostatic hypotension (sudden drops in blood pressure when standing). Lastly, sometimes people with PD can have a “colonized” bladder. This means that no matter how much antibiotic you take, the bacteria is always going to be present. It essentially lives there now and cannot be eradicated. However, in people with colonized bladders, antibiotics are still used if the patient has urinary symptoms of a UTI (vs. cognitive or motor worsening). If you are concerned about bladder and urinary symptoms, your treatment team may refer you to your primary care physician or a urologist, a specialist in bladder problems. Let your urologist know that you have Parkinson disease and discuss any medication or treatment concerns with them. Inform your healthcare team and Parkinson specialist of any new treatments, especially new medications, as they may affect your PD symptoms.

Continued from previous page

Dr. Greger recommends a “Daily Dozen” checklist of foods to help stave off disease. “I think if there were three things to add to one’s diet, it would be berries, greens and beans,” he said. “If there were just three things to remove from one’s diet, it would be trans fats – those partially hydrogenated oils, processed meat and soda.” Dr. Greger was inspired to write his book, How Not to Die, from the experiences of his grandmother, who was confined to a wheelchair at age 65 and received a “medical death sentence” from end-stage heart disease. Thanks to dietary changes and exercise, she went on to live for 31 more years and since then, Dr. Greger has made it his mission to educate people about nutrition.

Dr. Greger said that it is important to understand that many foods aren’t objectively bad or good but have to be seen as part of a continuum. “Are eggs good? Well, compared to the breakfast sausage next to them, yes,” he said. “Compared to oatmeal? Not even close. That’s how you have to think about food.” Regardless, he said, making good choices has a simple logic, what economists refer to as an opportunity cost. “Food is a zero-sum game. Every time we put something in our mouth, it is a lost opportunity to put something even healthier in our mouth.”

Following his presentation, Dr. Greger took questions from the audience. Charlie Brennan, host of “The Charlie Brennan Show” on KMOX Radio, moderated the Q & A portion of this program. Further questions may be submitted to Dr. Greger through his nutritionfacts.org website.

There are How Not to Die books available at the APDA Resource Center in Chesterfield, should you be interested in purchasing one. Call 636.778.3377 to reserve your copy.
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07.01.2018 to 09.30.2018

Donations of $25 or more are listed in the tribute pages. Every donation in any amount is greatly appreciated.

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Jean Cody

Ely Shrauner  
Barbara Shrauner

Carolyn Lee Stockton  
Sarah & Ben Burkermeper  
Terry & John Doer  
Loretta Grbac  
Debbie Guyer  
Evelyn Matt  
Michelle & John Munn  
Jeanette Santagato  
The Staff at KOC  
Lynda Wiens

JoAnn Sturm  
Katrine & Bruce Burkhardt

Shaw Weiner  
Lisa Day

Marian Whitehead  
Ann & Robert Schulte

Dick Whiteside, Jr.  
Myrna & Winston Bailey  
Karen & Larry Buck  
Patti & LeRoy Gladney  
Gayle & Jim Powers  
Brenda & David Ross  
& Family  
Lori & Eddie Ross & Family  
Nan & Mike Scarry  
Donna Schimmel  
Carla & Joe Talbot  
Mary Lou &  
Donald Thompson  
Karen & Robert Turnbull

Gene Wittman  
Nancy & Mike Klein  
Lori White

GENERAL GIFTS

Up to $99  
Martha Atkins  
Mira Bantzcheva  
Bill Billings  
Lewis Billingsley  
Karen Castanis  
Linda & Michael Cerutti  
Kathy & Garry Chaput  
Nancy & Dick Chin  
James Cottrall  
Jim Crates  
Mary & Ray DeVasto  
Rich Distler  
Ernestine Edelmann  
Larry Gassei  
Linda Gibbons  
Mary Ann & Jerry Gunn  
Carol & Arnold Henke  
Erica & David Hood  
Edith Kafpensteiner  
Lisa Knoll  
Cheri & Kau Li  
Linda Lieppman  
Terry McDonough  
Janet & Kenneth Munger  
Donna Nickum  
Lou Ann & Robert Nolan  
Sandra Parker  
Peter Pisaneschi  
Judy Pouyer  
Asma & Khalid Qayum  
Richard Rawlings  
Jeff Rose  
Judith Schuster  
Patricia Sheehan  
Rita Sidall  
Rodney Stecher  
Rita Sidall  
Nancy & Tom Freeman  
Cathy & Dennis Frey  
Nancy Gerber  
Robert Green  
Kathleen Holas  
Sanja & Steve Kilgore  
Nancy & Mike Klein  
Freda Lohr  
Ann & Larry Mauch  
Jeanne & Phil McDermott  
Karen & Jim Miller  
Alice & Andre Nutis  
Alfred & Dale Plank  
Joseph Price  
Diane & Karl Schoenfeld  
Dr. Eugene Seiler  
Cindy & David Smalley  
Bill Sorrell  
Anne Marie & Todd Tobias  
Terry Toolen  
Robert Wargel  
Dr. & Mrs. David Watkins

$500-$1,999  
Sarah & David Butler  
Phyllis & John Evans  
Penny Kodner  
Annetta McNinch  
Martha Monaghan  
Shirley & Robert Waggoner

*$5,000+  
Carole & Chuck Borchelt

ANNUAL GIVING

$500-$1,999  
Aurelia Konrad  
Charitable Foundation  
Rotonda Foundation

Nancy & Tom Freeman  
Cathy & Dennis Frey  
Nancy Gerber  
Robert Green  
Kathleen Holas  
Sanja & Steve Kilgore  
Nancy & Mike Klein  
Freda Lohr  
Ann & Larry Mauch  
Jeanne & Phil McDermott  
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*$5,000+  
Carole & Chuck Borchelt

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$500-$1,999  
Aurelia Konrad  
Charitable Foundation  
Rotonda Foundation
The ability to drive can have a big impact on independence, participation in activities and sense of self-worth as a productive member of society. When someone has been driving safely for many years, it can be very hard to determine when to retire the keys. We were delighted to have Sylvia Nissenboim, LCSW, and David Carr, MD, speak on this topic at our Parkinson Education Program (PEP), held at Congregation Shaare Emeth in August. Sylvia spoke about practical ways to have hard conversations with family members. Some of the tips that she provided were to slow down and become curious, to validate what the other person is feeling and to reach out for help if needed. Dr. Carr reviewed the data around safety of older drivers and talked about the current tools used to assess fitness to drive. Both speakers provided a wealth of information to the over 300 people in attendance. We were also grateful to hear from John Brisco, a person living with Parkinson disease who has retired from driving. He reassured the audience that it is very possible to stay independent and engaged using public transportation. Thank you to all three of our amazing speakers!

Based on feedback from families on this topic, the APDA-Greater St. Louis Chapter is working with Dr. Carr to develop a workshop where families will create a specific plan for driving retirement. The workshop will cover understanding how symptoms can affect driving, researching local transportation options, learning more about driving assessment tools and creating an individualized retirement plan. We hope this will help decrease the stress that often comes with a decision to stop driving and will reduce the chance that someone continues driving past the point when they are no longer safe. This workshop is planned for the spring of 2019. If you are interested in pre-registering or have questions, please contact Tricia Creel, Wellness Program Coordinator, at tcreel@apdaparkinson.org or 636.778.3377.

If you missed the PEP meeting, it is archived on our website at www.apdaparkinson.org/greaterstlouis. Please contact us at 636.778.3377 if you would like information about local transportation resources or driving assessment programs.
We received a lovely letter from 9-year-old Ellen Rozmaryn following the passing of her grandfather. Here are some excerpts about her experience raising funds for the APDA—

“On November 30, 2017, my grandfather, Phillip John Hampel, passed away in a nursing home. There were many causes of his death, but the main cause was Parkinson disease. I remembered how I always hated seeing my grandpa sitting helplessly in a wheelchair. Then I thought about all the other people in the world that had to see their family members also in a wheelchair. I had an urge to do something.

My mom told me about the neighborhood garage sale. I was up all night thinking of all the wonderful things I could do. I would make little crafts and sell them at a separate little stand. I would also make a fleece quilt to raffle off. I imagined my grandmother’s happy face when I told her how much money I had earned. My siblings and I all wore the Parkinson’s t-shirts that our grandma got at a Parkinson’s program. When we counted our earnings at the end of the day, we’d collected $200. I want to donate this money to help find a cure for Parkinson disease in honor of Phillip John Hampel, my beloved grandfather.”

Thank you, Ellen. I am certain that your grandparents are so very proud of your efforts, just as we are!

Mah Jongg and Bridge

On Wednesday, August 22 at the Richmond Heights Community Center, 48 Mah Jongg and Bridge Players paid to play to raise funds for the APDA-Greater St. Louis Chapter. One of our constituents, Margie Silverblatt, organized this sell-out event with the support of Phyllis Siegel. The foursomes registered and joined in the games, lunch and raffles raising $1,100 to benefit the APDA-Greater St. Louis Chapter. Way to go, Margie!

Hull of a Race

Lucky 13 – the 13th annual Hull of a Race took place on August 18 in Hull, IL, raising funds for the APDA-Greater St. Louis Chapter. The day consisted of a professionally timed, competitive 10K race held on a certified course, a 5K fun walk/roll, and a ½ mile kid’s fun run with trophies, medallions and ribbons awarded. Results this year set a new record, with $11,000 raised to fund Parkinson’s research. Hull of a Race has raised a total of $97,500 since 2008. Congratulations and heartfelt thanks go out to Marilyn White and the Hull, IL, community who support this event every August. Save the date of August 17, 2019, in Hull, IL, for lacing up your tennis shoes to help Hull of a Race surpass $100,000 raised to fund Parkinson research.

Tractor Cruise

The 11th Annual Knights of Columbus – “Journey for Charity” – Tractor Cruise rolled through a 30-mile route, passing St. Clair, Union and ending in Washington, MO, on Sunday, September 9. The Tractor Cruise concluded with a BBQ and Tractor Show in Washington, home of our constituent and annual Tractor Cruiser, Bob Weber. Bob raised another $1,590 in this year’s Journey for Charity and donated all funds he personally raised to the APDA-Greater St. Louis Chapter. This is the fourth Tractor Cruise Bob has participated in since 2014, raising over $4,571 to support our mission. In addition to the Tractor Cruise, Carol and Bob facilitate a very active Parkinson’s support group held monthly in Washington. We are most grateful for their involvement in this annual event and for their leadership with the support group and Parkinson community.
Welcome to Our New Board Members

Bryan Graiff, CPA/ABV/CGMA is the Partner in Charge of the Brown Smith Wallace Transaction Advisory and Litigation Support group. He has more than 25 years of diverse financial and operational experience in public and private companies. Bryan’s father, Dr. Ron Graiff passed away this year, after an 18 year battle with Parkinson’s. Bryan was interested in serving on the board to help find a cure for Parkinson disease. With his background in reorganizations, acquisitions and restructurings and board experience, Bryan brings valuable expertise and knowledge to our 2018-2019 Board of Directors.

Paul Thakadiyil is the Executive Director of Business Operation Solutions at RGA and comes with an interest in helping people. Reinsurance Group of America is in the business of health and insurance. Paul has an extensive background in IT and constituent relationship management and will add much value to our operations.

Grant Wiens is an attorney and Partner at Mickes O’Toole. Grant’s father, Dr. Robert Wiens, had Parkinson Disease. Grant’s mother, Lynda Wiens is an exceptional volunteer with APDA-Greater St. Louis Chapter, co-leading the Care Partner Only Support Group, and assisting with our educational programs and fundraising events. Grant and his family have been active participants in our events since relocating back to St. Louis and we’re delighted he could join the Board.

APDA Greater St. Louis Chapter is proud to welcome Melissa Skrivan as the organization’s Director of Development. In this new role, Melissa will be responsible for engaging donors with the APDA mission and driving philanthropic support for research and programs. She joins the APDA-Greater St. Louis Chapter team from The Foundation for Barnes-Jewish Hospital, a non-profit organization that raises funds for Barnes-Jewish Hospital, Barnes-Jewish West County Hospital, Siteman Cancer Center, Goldfarb School of Nursing, BJC Home Care and Hospice, Evelyn’s House, and Washington University School of Medicine. During her more than nine year career in non-profit fundraising, Melissa has helped build organizations, increasing their community involvement and reach.

Welcome, Melissa!
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. New classes are in bold.

<table>
<thead>
<tr>
<th>CITY</th>
<th>COUNTY</th>
<th>MEETING SITE</th>
<th>DAY OF MEETING</th>
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<th>PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballwin</td>
<td>St. Louis</td>
<td>Meramec Bluffs Care Center 1 Meramec, Veterans Rm.</td>
<td>4th Tuesday</td>
<td>2:30 PM</td>
<td>Chaplain Chris Nilges</td>
<td>636.923.2338</td>
</tr>
<tr>
<td>Cape Girardeau</td>
<td>Cape Girardeau</td>
<td>Cape Girardeau Public Library 711 N Clark Street</td>
<td>4th Monday</td>
<td>6:00 PM</td>
<td>Desma Reno, RN, MSN</td>
<td>573.651.2678</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>APDA Community Resource Center 1415 Elbridge Payne, Suite 150</td>
<td>1st Tuesday</td>
<td>11:00 AM</td>
<td>Tricia Creel, PT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>St. Louis</td>
<td>APDA Community Resource Center 1415 Elbridge Payne, Suite 150</td>
<td>2nd Monday</td>
<td>10:30 AM</td>
<td>Jay Bender, Lynda Wiens</td>
<td>636.778.3377</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. 415</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. 415</td>
<td>3rd Tuesday</td>
<td>6:30 PM</td>
<td>Doug Schroeder</td>
<td>314.985.7708</td>
</tr>
<tr>
<td>De Soto</td>
<td>Jefferson</td>
<td>StoneBridge – The Villas 1550 Villas Drive</td>
<td>Last Wednesday</td>
<td>3:00 PM</td>
<td>Jennie Lessor</td>
<td>636.586.6559</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 Community Conference Room</td>
<td>3rd Friday</td>
<td>1:00 PM</td>
<td>Jennifer Urich, David Urich</td>
<td>573.632.5440 573.796.2395</td>
</tr>
<tr>
<td>Joplin</td>
<td>Jasper</td>
<td>Mercy Hospital 100 Mercy Way Conference Room</td>
<td>Every Monday</td>
<td>3:00 PM</td>
<td>Nancy Dunaway</td>
<td>417.556.8760</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>First Presbyterian Church of Kirkwood 100 E. Adams Ave., Room 009</td>
<td>4th Tuesday</td>
<td>7:15 PM</td>
<td>Terri Hosto, 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>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, Beryl or Dana</td>
<td>573.785.6222 555.444.7276 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 County</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, Amanda Landsbaum, OT</td>
<td>314.846.5919 636.778.3377</td>
</tr>
<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 Groomes, 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 Polan, 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>6:00 PM</td>
<td>Carol Weber</td>
<td>314.713.4820</td>
</tr>
<tr>
<td>Webster Groves</td>
<td>St. Louis</td>
<td>Bethesda Orchard - Parlor Room 21 North Old Orchard Ave.</td>
<td>Last Friday</td>
<td>10:30 AM</td>
<td>Laurel Willis, MSG</td>
<td>314.471.6302</td>
</tr>
</tbody>
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Non-affiliated support groups are listed on our website only.
# Illinois Support Group Calendar

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</thead>
<tbody>
<tr>
<td>Alton</td>
<td>Madison</td>
<td>Senior Services Plus 2603 N. Rodgers Ave.</td>
<td>3rd Tuesday</td>
<td>2:00 PM</td>
<td>Dustin Heiser</td>
<td>618.465.3298 x120</td>
</tr>
<tr>
<td>Belleville</td>
<td>St. Clair</td>
<td>Southwestern Illinois College Programs and Services for Older Persons 201 N. Church St.</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>Carlinville</td>
<td>Macoupin</td>
<td>Carlinville Area Hospital Medical Office Building-Community Room 20613 N. Broad St.</td>
<td>3rd Wednesday contact leader to verify date and time.</td>
<td>10:00 AM</td>
<td>Amy Murphy, PT</td>
<td>217.854.3839</td>
</tr>
<tr>
<td>Centralia</td>
<td>Marion</td>
<td>Heritage Woods of Centralia 2049 E. McCord St.</td>
<td>2nd Wednesday</td>
<td>2:00 PM</td>
<td>Betty Evans, Helena Quaid</td>
<td>618.533.0224, 618.493.6064</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>Charleston</td>
<td>Coles</td>
<td>LifeSpan Center 11021 E. Co. Rd. 800N</td>
<td>Last Tuesday</td>
<td>1:30 PM</td>
<td>Jean Shobe, Jean Penrod</td>
<td>217.639.5150</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>Lin Smith, Mary DeLong</td>
<td>618.344.0680, 217.204.2137</td>
</tr>
<tr>
<td>Jacksonville</td>
<td>Morgan</td>
<td>Passavant Area Hospital 1600 W. Walnut-Meeting Room 2</td>
<td>1st Wednesday April-December</td>
<td>6:00 PM</td>
<td>Larry and Karen Ladd</td>
<td>217.377.4973</td>
</tr>
<tr>
<td>Nashville</td>
<td>Washington</td>
<td>Washington County Hospital 705 S. Grand Ave., Conference Room</td>
<td>4th Friday</td>
<td>1:00 PM</td>
<td>Helen Quaid</td>
<td>618.493.6064</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>
<tr>
<td>Quincy</td>
<td>Adams</td>
<td>Quincy Public Library 526 Jersey St.</td>
<td>1st or 2nd Saturday contact leader to verify date and time</td>
<td>10:30 AM</td>
<td>Terri and Dave May</td>
<td>217.224.7027</td>
</tr>
<tr>
<td>Quincy</td>
<td>Adams</td>
<td>Quincy Public Library 526 Jersey St.</td>
<td>2nd Thursday</td>
<td>12:30 PM</td>
<td>Terri and Dave May</td>
<td>217.224.7027</td>
</tr>
</tbody>
</table>

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

### Illinois Exercise Classes

Continued on page 15

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Belleville</td>
<td>Exercise for Parkinson’s (cycle + strength) East Belleville YMCA, 2627 Carlyle Avenue</td>
<td>Level 1</td>
<td>Wednesday</td>
<td>12:00 PM</td>
<td>Stefanie McLaughlin</td>
<td>618.236.9983 (registration)</td>
</tr>
<tr>
<td>Carlinville</td>
<td>Movement Training Carlinville Area Hospital, Medical Office Building, Community Room, 20613 N. Broad</td>
<td>Level 2</td>
<td>Thursday</td>
<td>10:00 AM</td>
<td>Amy Murphy, PT</td>
<td>217.854.3141 x377</td>
</tr>
<tr>
<td>O’Fallon</td>
<td>Exercise for Parkinson’s (cycle + strength) O’Fallon YMCA, 284 North Seven Hills Road</td>
<td>Level 1</td>
<td>Tuesday</td>
<td>12:00 PM</td>
<td>Amy Weisbrodt</td>
<td>618.628.7701 (registration)</td>
</tr>
<tr>
<td>Springfield</td>
<td>Joy of Movement (dance) First Presbyterian Church, 321 South 7th Street</td>
<td>All Levels</td>
<td>Tuesday</td>
<td>1:30 PM</td>
<td>Eve Fischberg, OT</td>
<td>217.494.4961</td>
</tr>
</tbody>
</table>
## Missouri 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](http://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. **New classes are bold. Exercise classes are one hour unless otherwise noted.**

### Missouri Exercise Classes

<table>
<thead>
<tr>
<th>CITY</th>
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</thead>
<tbody>
<tr>
<td>*Brentwood</td>
<td>Tango Convergence Dance and Body Center, 8044 Manchester Road</td>
<td>Level 2</td>
<td>Thursday</td>
<td>10:30 AM</td>
<td>Roxanne Maier</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>50-50 Fusion, 1415 Elbridge Payne, Ste. 163</td>
<td>Level 3</td>
<td>Wednesday</td>
<td>1:00 PM</td>
<td>Alana Krone</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>Movement Training, St. Luke's Outpatient Center, 111 St. Luke's Center Drive</td>
<td>Level 1</td>
<td>Monday</td>
<td>10:00 AM</td>
<td>Ann Towey, PTA</td>
<td>314.205.6934</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>Circuit/Interval Training, 1415 Elbridge Payne, Ste. 163</td>
<td>Level 2-3</td>
<td>Monday</td>
<td>2:30 PM</td>
<td>Tricia Creel, PT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>Movement Training, 1415 Elbridge Payne, Ste. 163</td>
<td>Level 1</td>
<td>Monday</td>
<td>1:30-2:15 PM</td>
<td>Tricia Creel, PT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>Tai Chi, 1415 Elbridge Payne, Ste. 163</td>
<td>Level 1</td>
<td>Monday</td>
<td>11:15 AM</td>
<td>Craig Miller</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>Indoor Cycling, Cyclebar, 1637 Clarkson Rd.</td>
<td>Level 2-3</td>
<td>Tuesday</td>
<td>10:00 AM</td>
<td>Nancy Robb</td>
<td>314.869.5296</td>
</tr>
<tr>
<td>Chesterfield</td>
<td>Exercise for Parkinson's (cycle + strength) Chesterfield YMCA, 16464 Burkhart Place</td>
<td>Level 2</td>
<td>Friday</td>
<td>12:30 PM</td>
<td>Angela Weaver</td>
<td>636.532.3100</td>
</tr>
<tr>
<td>Clayton</td>
<td>Fit 'n Fun, The Center of Clayton, 50 Gay Ave., Mind/Body Room</td>
<td>Level 1</td>
<td>Wednesday</td>
<td>2:00 PM</td>
<td>Mike Scheller, PTA</td>
<td>314.289.4202</td>
</tr>
<tr>
<td>*Creve Coeur</td>
<td>Box Your B.E.S.T., The J's Staenberg Family Complex, 2 Millstone Campus Dr.</td>
<td>Level 3</td>
<td>Tuesday</td>
<td>1:00 PM</td>
<td>Joe Ryan</td>
<td>314.442.3452</td>
</tr>
<tr>
<td>Creve Coeur</td>
<td>Parkinson's Performance (small group training) JCC, Staenberg Family Complex, 2 Millstone Campus Drive</td>
<td>Level 3</td>
<td>Saturday</td>
<td>TBD</td>
<td>Sabra Boes</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Florissant</td>
<td>Movement Training, Garden Villas North, 4505 Parker Rd.</td>
<td>Level 1</td>
<td>Thursday</td>
<td>10:00 AM</td>
<td>Nancy Robb</td>
<td>314.869.5296</td>
</tr>
<tr>
<td>Ladue</td>
<td>Tremble Clefs, Salem United Methodist, 1200 S. Lindbergh Blvd., Lower Level Choir Room</td>
<td></td>
<td>Saturday</td>
<td>1:30 PM</td>
<td>Linda McNair, MT-BC</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Oakland</td>
<td>Movement Training, Bethesda Hawthorne Place, 1111 S. Berry Road</td>
<td>Level 1-2</td>
<td>Thursday</td>
<td>1:45 PM</td>
<td>Teresa Godfrey, PT</td>
<td>314.942.5750</td>
</tr>
<tr>
<td>O'Fallon</td>
<td>Movement Training, Park Place at WingHaven, Independent Living Fitness Room, 2002 Boardwalk Place Dr</td>
<td>Level 1</td>
<td>Wednesday</td>
<td>10:00 AM</td>
<td>Marina Clements, PT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>South St. Louis County</td>
<td>Fit 'n Fun, Garden Villas South, 13457 Tesson Ferry Rd.</td>
<td>Level 1</td>
<td>Monday</td>
<td>11:30 AM</td>
<td>Mike Scheller, PTA</td>
<td>314.289.4202</td>
</tr>
<tr>
<td>South St. Louis County</td>
<td>Movement Training, Friendship Village-Sunset Hills, 12563 Village Circle Drive</td>
<td>Level 2</td>
<td>Friday</td>
<td>10:00 AM</td>
<td>Marina Clements, PT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>*St. Louis</td>
<td>Circuit Training, Parquad Health &amp; Wellness Center, 5200 Berthold Ave.</td>
<td>Level 2-3</td>
<td>Thursday</td>
<td>10:00 AM</td>
<td>Melissa Smith, OTR/L</td>
<td>314.289.4202</td>
</tr>
<tr>
<td>Ste. Genevieve</td>
<td>Movement Training, Community Center, 21390 Hwy 32</td>
<td>Level 2</td>
<td>Thursday</td>
<td>11:00 AM</td>
<td>Ketta Hill, PT</td>
<td>573.883.9366</td>
</tr>
<tr>
<td>St. Peters</td>
<td>Movement Training, Barnes-Jewish St. Peters Hospital Healthwise Center, 6 Jungermann Circle</td>
<td>Level 2</td>
<td>Tuesday</td>
<td>10:00 AM</td>
<td>Holly Evans, COTA</td>
<td>636.916.9650</td>
</tr>
<tr>
<td>*St. Peters</td>
<td>Aquatics, 3900 Shady Springs Ln.</td>
<td>Level 1-2</td>
<td>Thursday</td>
<td>1:45 PM</td>
<td>Alicia Bunn, CTRS</td>
<td>636.896.0999</td>
</tr>
<tr>
<td>Town and Country</td>
<td>Tremble Clefs, Maryville University, 650 Maryville University Dr.</td>
<td></td>
<td>Thursday</td>
<td>1:30 PM</td>
<td>Megan Moran, MT</td>
<td>636.778.3377</td>
</tr>
<tr>
<td>Washington</td>
<td>Exercise for Parkinson's (cycle + strength) Four Rivers YMCA, 400 Grand Avenue</td>
<td>Level 1</td>
<td>Tuesday</td>
<td>1:00 PM</td>
<td>Tim Peters</td>
<td>636.229.5704</td>
</tr>
</tbody>
</table>

*If you have a need for a scholarship for any exercise class listed on this page that charges a fee for participation, please contact the APDA-Greater St. Louis staff, as we have been fortunate to be recipients of donations to support and sustain these programs. Non-affiliated exercise classes are listed on our website only.

**Coming Soon!** A NEW class that meets twice a week, Saturdays and mid-week, at the J's Staenberg Family Complex in Creve Coeur. **Work with a personal trainer in a small group setting to improve your balance, strength, flexibility, coordination and cardiovascular fitness.** Each month long training block is designed to improve your fitness level while teaching you how to use the equipment in a gym setting to maximize your function. You will learn how to use treadmills, bikes, weight machines and much more. Class size will be limited, so call 636.778.3377 to pre-register.
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!

On March 14, 2019, the APDA-Greater St. Louis Chapter will once again offer a Midwest Parkinson Congress.

This year’s program will feature Rebecca Gilbert, MD, PhD, Chief Scientific Officer of the American Parkinson Disease Association, and participants can then select from three tracks to attend: Research & Medications, Care Partner Resources and a Managing Your Disease track. The Congress will start at 1:00 pm and conclude at 4:45 pm. In addition, we are pleased to offer a track in the evening for a young-onset program, featuring Dr. Paul Short, from 6:30-8:30 pm.

The Congress will be held at Congregation Shaare Emeth, 11645 Ladue Road, in west St. Louis County. Stay tuned for further details and an invitation/agenda which will follow after the New Year.