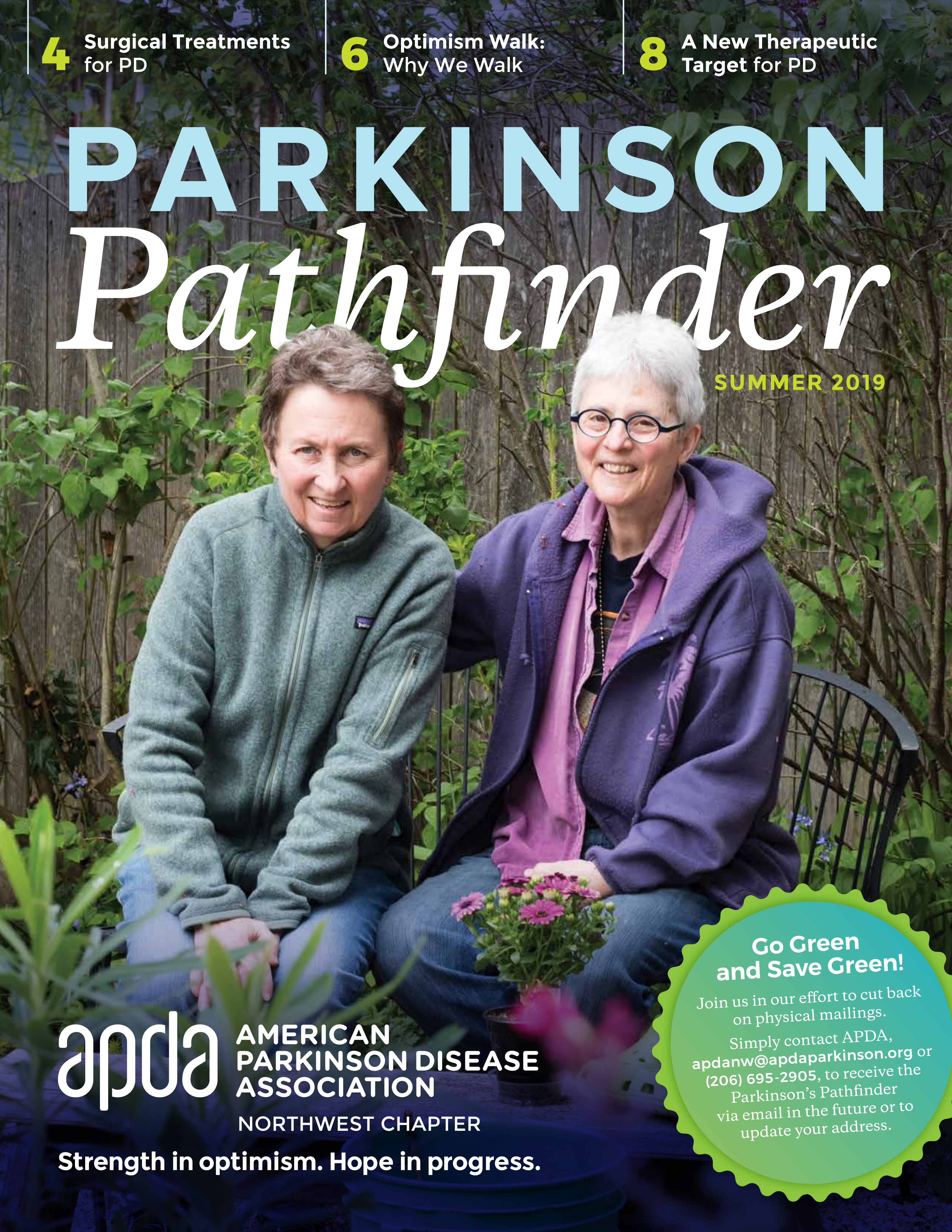

4 Surgical Treatments for PD

6 Optimism Walk: Why We Walk

8 A New Therapeutic Target for PD

PARKINSON *Pathfinder*

SUMMER 2019

AMERICAN PARKINSON DISEASE ASSOCIATION
NORTHWEST CHAPTER

Strength in optimism. Hope in progress.

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Join us in our effort to cut back on physical mailings. Simply contact APDA, **apdanw@apdaparkinson.org** or **(206) 695-2905**, to receive the Parkinson's Pathfinder via email in the future or to update your address.

SUMMER 2019

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COVER
Gardening with Patty Harrold and Sally Friedman.
Photo by Ken Kisch

OUR MISSION

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

AMERICAN PARKINSON DISEASE ASSOCIATION
NORTHWEST CHAPTER
Strength in optimism. Hope in progress.

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APDA NORTHWEST IS
Celebrating 35 years!

Help celebrate APDA'S 35th Anniversary!

Spread Awareness

Tell 35 people impacted by PD that APDA is here for them

Ask 35 people to like/follow APDA on social media

Share your story about how an APDA program, service or personal interaction impacted you by emailing us or sharing your story on social media (don't forget to tag APDA!)

Raise Funds

Ask 35 people to donate $35 to APDA

Hold a fundraiser with the goal of raising $3,500

Donate yourself: $35, $350 or $3500!

Donate Time or Talent

Volunteer for 35+ hours in the APDA office, on an event committee, or at an APDA event.

What were you doing in 1984? Apple released its first Macintosh computer, Carl Lewis won 4 gold medals at the Los Angeles Summer Olympics, and Mohammad Ali was diagnosed with Parkinson's disease (PD). In 1984, awareness of PD was growing. APDA established an Information & Resource Center in 1979 at the UW. Seeing a need for more support, a dedicated group of volunteers recognized the increasing number of people diagnosed with PD and stepped forward to form our local chapter of the American Parkinson Disease Association (APDA).

The first neurologists trained in treating people with PD were just starting their practices, after all it was just four years after the first Movement Disorders Fellowship program in the US was established. APDA (founded nationally in 1961) was spreading grassroots awareness of PD across the country, reaching areas like the Northwest. While a lot has happened in 35 years, APDA Northwest's mission remains the same: to provide the support, education and research that will help everyone impacted by Parkinson's disease live life to the fullest.

SOME CHAPTER HIGHLIGHTS:

The local chapter of APDA is established in Seattle! The Information and Resource Center celebrates 5 years of providing support, referrals and education to people with Parkinson's across the Northwest.

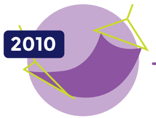
APDA hires first Executive Director after being volunteer-led for 17 years. Today we still rely heavily on our volunteers, including our Board, dedicated committee members, and event and office volunteers. With only four staff covering a 5-state territory, we are proud to keep overhead costs low so that every generously donated dollar helps those impacted by PD.

The first Magic of Hope Gala & Auction is held, now the largest APDA fundraiser in the country.

APDA helps establish the Washington State Parkinson Disease Registry (WPDR), helping research happen faster. APDA is currently the sole funder. The WPDR has since been used for 70 research studies conducted by 31 investigators at 8 Northwest research institutions.

The Taxi Voucher program - now APDA Ride Repay - is developed, to help people get to where they want to go. This transportation reimbursement program has benefitted more than 450 people living with PD.

Created a community grant program to fund exercise and wellness programs. To date we have awarded thousands in grant dollars and helped promote 134 Parkinson's specific programs in our five state area.



Caregivers Day Off program is rolled out, and has since provided 147 caregivers up to 20 hours per year of well-deserved time off to renew and reenergize.

First office space was rented for local APDA chapter, on Nickerson Street in Seattle. Come visit!

vecteezy.com

HOW I WON MY STP

by Ken Kisch

The dream began when I was diagnosed with Parkinson's disease (PD). I heard of a group that was raising money for PD by riding the STP (Seattle to Portland) bike race. I had ridden the STP many times between 1987 and 1992, prior to my diagnosis, but riding with Parkinson's was a new challenge. I started to train.

I rode the STP every year between 2013 and 2017, always finishing in two days. In 2018, doing the STP in just ONE day became my dream and my goal. I found some friends to do the ride with me and we formed a team. However, my average training rides were always 10 miles per hour. At that rate finishing the 206 mile STP would take 20 hours, which meant an impossibly long day and riding for hours in darkness. In order to finish in one day, I had to maintain an average of 14.4 mph, including support stops, tire repair, wrong turns, and traffic. I had some work to do.

As race day neared, we did a shakedown ride of 112 miles to see if we could come close to our 14.4 mile goal, which was a disaster. It was raining, and we got a flat tire. My average was sticking at 10 mph. That was simply not going to cut it. Then two weeks later I had a personal best ride of 15.9 mph. I felt like I had a 50-50 chance of making it.

My teammates wanted to start the ride in Renton to simplify logistics, and I happily obliged since that would shorten our trip by 14 miles and shave off one hour. On race day, we started riding at 4:50am, and were so excited. We were fresh, the sun was coming up and the air was cool. We made it to Sumner, about 35 miles south of Seattle, before other STP riders caught up with us.

However, I was soon falling behind. I was trying to draft behind a teammate which was getting increasingly difficult. I had to get uncomfortably close to the back of his wheel to really feel the benefit, which made me very nervous. When my teammate saw that I could not stay on his back wheel, he thought we were sunk. But I kept going.

Our support stops were so fast that I felt like a boxer in between rounds. Sunscreen was applied on my left arm while I held my sandwich in my right hand. I needed a third hand to drink water. The last stop for our support vehicle was in Longview at the hottest part of the day, about 94°. I guzzled ice water in preparation for a last long 50 miles to Portland.

We crossed the finish line at 8:40pm to the cheers of strangers and our support team. 15 hours and 50 minutes start to finish. I had won my STP.

I should be straight with you. The Seattle to Portland bike ride is not a race. People can start anytime and finish anytime. Nobody is counting or checking riders. A lot of people make their own challenge out of it and by completing it they win their own STP. Some people challenge themselves by carrying their overnight gear and camping along the way, or use single gear bikes to increase the difficulty. My challenge was to finish in one day, which I did at the age of 65 while carrying Parkinson's along with me.

SEATTLE

Turn your dream into a reality

What's your dream?
My dream was to ride the STP, 206 miles in one day.

Plan carefully
I reviewed my past ride statistics to figure my probability of success, then calculated what I had to do to meet my goal. I needed riding partners and a support team (thank you Linda and Moli!). I developed a detailed plan with scheduled support stops.

Make a backup plan
I set up a hotel reservation in Longview, the 150 mile mark. If I made it to Longview by 3:30, I knew I could make it the rest the way before sunset. Past 3:30, and I had a place to stay.

Commit to your challenge, practice and train, see it through

I had my doubts many times. But even after some training setbacks, I didn't give up.

PORTLAND

> **"Very helpful introduction to ongoing research – Hopeful! Excellent content & presentation."**
>
> —Symposium Participant

Research Symposium

APDA Northwest kicked off Parkinson's Awareness Month by hosting our first ever Parkinson's Research Symposium. This unique event brought together local Parkinson's researchers from every major research institution in Washington state under one roof with the goal of educating those impacted by Parkinson's disease (PD) on the latest in PD research, local projects and trials, and what it's like to be a research participant. This event gave people impacted by PD an opportunity to meet the scientists, researchers, and clinicians who are working towards a better understanding of the causes of PD in their quest to find a cure.

Did you miss the event? Videos of all the presentations can be found at the APDA Northwest website or on our YouTube channel. Watch from the comfort of your home and learn about all the exciting research happening in the Pacific Northwest. www.apdaparkinson.org/events/apda-research-symposium

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Did you know?

APDA proudly invests in the most promising clinicians and scientific projects focused on the discovery of the cause(s) and finding the cure(s) for Parkinson's disease (PD). APDA is committed to scientific research and has been a funding partner in many major PD scientific breakthroughs, investing nearly $49 million in research since 1961.

APDA Northwest is the sole funder of the Washington State Parkinson's Disease Registry (WPDR). The WPDR helps make research happen faster by connecting researchers to individuals willing to participate in research. The WPDR recruits for a wide range of studies including drug trials, exercise and therapy studies, studies involving technology, genetics, and more. To learn more about the WPDR please visit www.registerparkinson.org or call 888-365-9901.

Left, from top: Parkinson's researchers from every major institution highlight some of their most exciting research projects; Research participants share their experience with the audience; Attendees ask questions and learn more about current projects at the researcher and sponsor fair; Q&A portion.

Surgical Treatment
for Parkinson Disease

By Dr. Pravin Khemani

Pharmacological and surgical therapy of Parkinson's disease (PD) has vastly improved since its description by Dr. James Parkinson in the early 19th century. This brief review explores various surgical treatments available for PD and considers what could be coming down the pike.

Dr. Pravin Khemani *is a Movement Disorders Specialist at Swedish Medical Center in Seattle, WA and is fellowship trained in both Neuromuscular Disorders and Movement Disorders.*

Dr. Khemani's philosophy of care for movement disorders it to adopt a multidisciplinary approach and closely collaborate with the patient, family and other caregivers. He is also a member of the APDA Northwest Board of Directors.

Deep Brain Stimulation (DBS): DBS was developed in the 1990's and has significantly advanced PD treatment. DBS is the predominant neuromodulation technique used in clinical practice to treat motor symptoms that are not sufficiently controlled with medication. It can improve the quality of life for those with motor fluctuations, offering relief from those who suffer from dyskinesias and turning "off". During the DBS procedure, electrodes are strategically placed in selected targets in the brain, either the subthalamic nucleus (STN), or the globus pallidus interna (GPi). The electrodes are then connected through a wire tunneled under the skin to a small battery pack, which is wirelessly programmed by the specialist to reduce bradykinesia (slowness), stiffness (rigidity) and tremor. A movement disorders neurologist collaborates with a multidisciplinary team to ensure positive outcomes after surgery. Potential DBS patients should be cognitively intact, have realistic expectations, be fit for neurosurgery, and informed about its potential risks, which include brain bleeds, strokes, infections, and hardware failure. DBS does not treat non-motor symptoms of PD and is not designed to improve balance and speech.

Two decades of data and nearly 150,000 people who have been treated with DBS show it to be a safe, effective and durable treatment for PD.

What's next with DBS?

DBS has given scientists direct access to complex brain circuitry involved in impaired mobility. We can now record abnormal signals from the brain and alter them to improve motor symptoms. Known as adaptive or closed-loop DBS, it is still in the investigative stages, but may become a mainstream platform for customizing PD treatment in the near future.

Progress has been made to improve existing DBS platforms. Brain and body MRIs, previously not allowed after DBS due to concerns of overheating the electrodes, are being approved as newer technology increases safety. Smaller, rechargeable battery packs are being designed to steer electricity in the brain and minimize side-effects of programming, and reduce the frequency of battery replacement. The goal of future DBS technology is to personalize treatment, to address specific symptoms and meet the unique needs of each PD patient.

MRI guided Focused Ultrasound (MRgFUS): was approved in 2016 for essential tremor (ET) and was recently approved for PD tremor. MRgFUS eliminates the need for invasive brain surgery; instead, ultrasound waves are very precisely directed into the brain through the skull and focused on the thalamus. Energy from the waves is incrementally transferred to the thalamus creating a lesion, with subsequent reduction of tremor. Tremor improvement is tracked and the neurosurgeon receives real-time feedback on size and location of the lesion, allowing the procedure to be immediately modified if necessary. No hardware is implanted in the body and the patient can go home the same day.

Since MRgFUS only treats one side of the body, it is reserved for individuals who have severe asymmetric tremor unresponsive to medications, and may not be suitable if PD affects both sides similarly. The technology is relatively new, so its long-term efficacy and durability need to be further established. Overall, side-effects of MRgFUS are tolerable and temporary, although a few patients may experience long-lasting numbness or weakness on the side treated for tremor. Like DBS, MRgFUS does not stop disease progression. People with PD who cannot get a brain MRI are not candidates for MRgFUS.

> Two decades of data and nearly 150,000 people who have been treated with DBS show it to be a safe, effective and durable treatment for PD.

Levodopa-carbidopa intestinal gel (LCIG): Also known by its trade name DuopaTM, LCIG was approved in 2015 to treat motor symptoms of PD. It involves continuously infusing a gel suspension of levodopa through a tube directly into a portion of the small intestine (the jejunum) where it is absorbed into the bloodstream. Continuous infusion of small amounts of levodopa into the jejunum allows the medication to bypass the stomach for smoother absorption and delivery of the medication into the brain. The PEG-J (percutaneous endoscopic gastrostomy jejunum) tube used to deliver LCIG resembles a feeding tube and is inserted by a gastroenterologist, then externally connected to a pump which continuously infuses levodopa gel during waking hours. The movement disorders specialist, along with the gastroenterology team, customize the rate of levodopa infusion to improve motor symptoms.

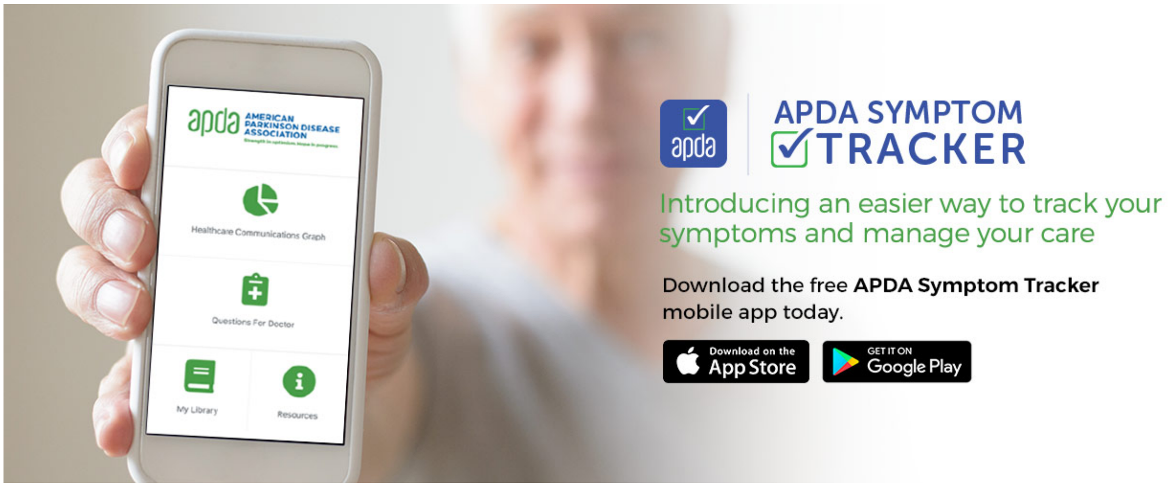
LCIG works best for patients who are having fluctuations despite an optimized regimen of oral PD drugs, who are not disabled by cognitive decline or psychosis, and who have support at home to assist in changing the gel pack every day and care for the PEG-J tube. The rate of complications from the PEG-J tube during the first year after insertion can be challenging, but are quite manageable when the neurology and gastroenterology team work collaboratively. LCIG does not impact the rate of PD progression in any way.

The choice of a specific surgical treatment for PD is dependent on several factors that must be considered by the neurologist and patient after weighing the risks and benefits of each procedure. For more information on currently available treatments for PD, please consult your movement disorder specialist.

What's next?

The future is optimistic for further refinement of current technology and invention of novel techniques to significantly improve the quality of life for individuals and families affected by PD. While relentlessly investigating a cure, we are also ushering in an era which promises to deliver customized, precise and more effective treatments for PD:

- DBS is being investigated to precisely introduce into the brain snippets of DNA, dopamine-generating enzymes, stem-cells, and other molecules, improving symptoms and potentially slowing PD progression.
- MRgFUS is being studied to target other areas of the brain to improve PD symptoms, and research is being conducted on the ability of ultrasound waves to temporarily disrupt the blood brain barrier to allow experimental PD drugs into the brain. This could potentially eliminate the need for invasive surgery.
- Optogenetics, a revolutionary field of molecular biology which could have profound implications for PD treatment, utilizes light rays to switch 'on' or 'off' genetically engineered, light-responsive neurons transplanted into the brain to modulate abnormal brain circuitry.



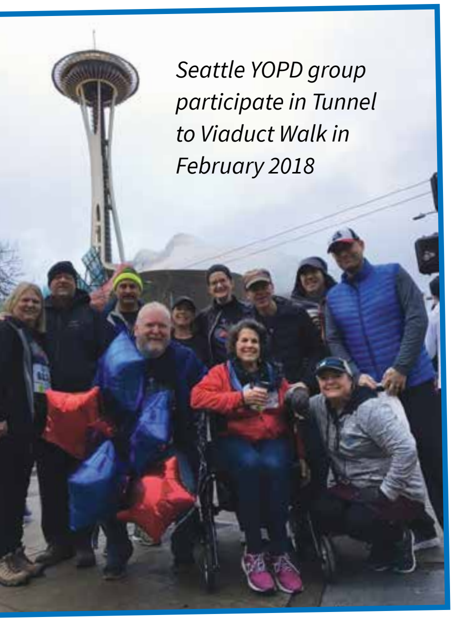
Hear Their Stories

Team Captains share why they are walking in APDA Northwest's annual Optimism Walk on Sunday, June 2nd, 2019.

Heather Wright

Team Captain of Walking for Wright

I am walking for my dad, Dennis Wright, who has been living with Parkinson's for 27 years. I grew up watching his symptoms progress and saw how hard he fought to stay mobile. He went from a cane, to a walker, and now to a wheelchair. So I walk in his honor as he no longer can. My team is made up of my partner, his family, and my closest friends. APDA has become a big support system for me and I walk every year. My dad has had Parkinson's Disease my entire life, so being around other families who face similar challenges with their loved ones and an organization that strives to find a cure really helps me. My dad has always pushed his limits and fought to stay independent. When he started having trouble walking, instead of using a normal cane, he would walk around with a ski pole. It was his way of trying to look normal, but he looked like a total goofball. One of the kindest gestures of support my dad and I have received was when my partner's family invited us over for dinner. They have stairs up to their house so they made a wheel chair ramp for my dad.



Seattle YOPD group participate in Tunnel to Viaduct Walk in February 2018

Brian Harris

Team Captain of SEAYOP

My team is SEAYOPD and together we meet as a social activity group for the young onset Parkinson's community in and around Seattle, WA. We are walking to promote visibility on how PD affects people under 50 years of age. **I am walking for myself and others like me.** Openness about the disease helps put it in a positive light and strengthens my PD family. One of the group's basic premises is to be active. We encourage each other to get out there and do things together, and rotate activities to include everyone's interests. We have hiked, kayaked and even taken an organ tour visiting various churches to learn more about the beautiful music played. We have built our PD family through these monthly events and invite others to join us (want to join, email seayopd@gmail.com!). SEAYOPD was founded in January of 2017. This is our 2nd year doing the walk and I can see the tradition continuing year after year.

Ziadee Cambier

Team Captain of Swedish Rehab Power Up for Parkinson's

I'm a physical therapist and I support patients with Parkinson's. **My team is a group of physical, occupational and speech therapists and we are inspired by our patients.** APDA has been a resource to us and our classes and we wanted to give back. We walk in honor of a group of people that we work with. You get to know people really well and have become quite close and fond of this group. It really motivates us, and we work with a variety of people, but I feel particularly fond of my Parkinsons group. We hope that we run into our patient's at the walk! We have encouraged them with our fundraising goals, because we don't want to have this just be symbolic, we want to actually make a difference in their lives. I just discharged somebody with Parkinson's, and she doubled her walking speed during our 3 month period, and it makes doing this work incredibly rewarding. This is our first time walking with APDA. The Optimism Walk means community; people who have Parkinson's and the other people in the community.

OPTIMISM WALK

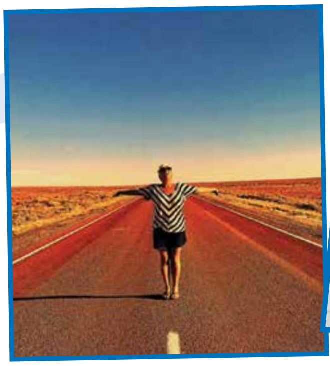
AMERICAN
PARKINSON DISEASE
ASSOCIATION

The APDA Northwest Optimism Walk is part of a nationwide movement to mobilize and inspire people to step up and help out an end to Parkinson's disease.

Why I Walk

I walk for my smart, funny, awesome husband John who has been living with PD for 24 years! He is our hero!

—Suzie Schofield



I am walking to help support research for people with Parkinson's. I am walking to help increase awareness of the effects of this disease. I am walking because of my desire to help people.

—Julie Fechter

My dad has had Parkinson's disease my entire life, so being around other families who face similar challenges with their loved ones and an organization that strives to find a cure really helps me.

—Heather Wright

To support the young onset with PD (YOPD) community and inform others that PD isn't just an old person's disease.

—Brian Harris

The positive experience of walking w/ friends & family members, for a common goal, is life changing!

—Barbara Gunsolus (Roy's wife)

I was recently diagnosed with Parkinson's and obviously interested in research and cures, and as I shared with family and friends, we had a united front and thought it was a great way to raise money.

—Steve Bodnar

We walk for my dad, grandfather and great aunt. They have all struggled with PD and we love them! I want my kids to know their Papa.

—Suzanna Eller

We like to be involved with the local community and support those with Parkinson's in any way, shape, or form that we can!

—Rachel Linden

A New Therapeutic Target for Parkinson’s Disease

By Dr. Alice Lazzarini

Dr. Alice Lazzarini is a renowned Parkinson’s researcher who chronicles the connection between pα-syn, tau, and mitochondrial degradation, and how it may lead to new treatments. Dr. Lazzarini was one of the scientists who was at the forefront of discovering the connection between Parkinson’s disease (PD) and α-synuclein, now known to be the major component of the Lewy body.

In the epilogue of my book, *Both Sides Now: A Journey From Researcher to Patient*, I describe being at a 1996 meeting of our Neurology department at the now Rutgers Robert Wood Johnson Medical School. I had just learned that Science had accepted my team’s paper locating PARK1, the first Parkinson disease (PD)-causing mutation, on the long arm of chromosome 4. (The following year, in 1997, we would publish the paper that showed that PARK1 was the protein α-synuclein).

Giddy with the prospect of proving a genetic etiology to PD, I uncharacteristically engaged senior faculty member Bill Nicklas in a nature/nurture debate. I insisted that PD was a result of the influence of nature – a person’s genetic makeup – and summarily dismissed Bill’s theory, that nurture – factors in the person’s environment – was responsible for damage to mitochondria, the energy-producing structures of the nerve cells.

Nature, Nurture, or Both

By 2014 when I published *Both Sides Now*, the scientific community had begun to see the merger of these two views. PD is now thought to likely be caused by a combination of environmental and genetic factors, and both may cause damage to the mitochondria. I suggested this theory in my book and now, a team out of the Scripps Research Institute in Florida has published a paper clarifying the exact mechanism of this toxicity, and the critical role that is played by the protein, tau.

“And you were the first to report a PD-tau association!” wrote my colleague Larry Golbe, MD, when I sent him the Scripps paper.

Tau plays a role transporting nutrients through nerve cells and is a key protein in the development of Alzheimer’s disease (AD). In 1996, I had been thinking of the commonalities between several late-onset neurodegenerative

PD is now thought to likely be caused by a combination of environmental and genetic factors, and both may cause damage to the mitochondria.

disorders and decided it was worth looking at our laboratory's well-documented PD samples for a genetic link to tau. With support from APDA, this resulted in an abstract first reporting a significant association of tau with PD. Not long thereafter, I left the medical school and was pulled in new directions whereupon Dr. Golbe expanded that study into a full paper.

New Technology Enables New Discoveries

As the field of genetics evolved, new tools were developed to identify genetic causes of disease. These new tools have confirmed an association between PD and both tau and α-synuclein.

The Scripps paper contains an exquisite set of experiments that sets out to determine why α-synuclein can be damaging to nerve cells. The group had previously identified a specific harmful form of α-synuclein named pα-syn*. (One of the co-authors of these papers is Laura A. Volpicelli-Daley, PhD, who has also received past support from APDA.)

In the current paper, the group shows that pα-syn* causes injury by triggering the activation of several kinases (specific enzymes that control cellular events) that in turn activate tau. Pα-syn*, tau and these kinases accumulate at the mitochondria, causing the mitochondria to fragment and degrade. Because the mitochondria are the energy-producing factories of the cell, losing mitochondria leads to death of the cell.

Why should Parkinson's patients care about these cellular events?

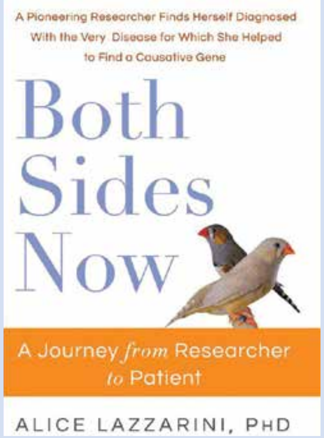
This science may be clinically relevant because pα-syn*, or the kinases that it activates, may be good targets for new drugs. This means that drugs could be designed to inhibit the processes that eventually cause the mitochondria to break down and the cells to die.

Tips and Takeaways

APDA was a key funding partner in the 1996 study that identified alpha-synuclein as a major genetic contributor to PD, as well as the initial report of an association with tau.

Today's researchers continue to build on this critical knowledge to help understand why neuronal death occurs in PD.

If the steps that lead to neuronal death in PD are understood, as this paper indicates, drugs can be designed to help protect neurons from these cellular processes.



To support research like Dr. Lazzarini's, donate to APDA Northwest today!

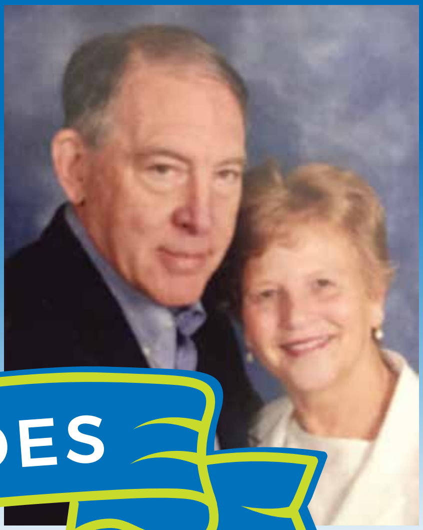
About the author, Alice Lazzarini, PhD:

Dr. Lazzarini was a co-author on a monumental paper in 1997, which was partially-funded by APDA and which identified genetic alterations in the α-synuclein gene in families with PD.

Ironically, after a career dedicated to working to understand PD, Dr. Lazzarini was herself diagnosed with PD and today is living her best life with the condition. She authored a book entitled *Both Sides Now: A Journey From Researcher to Patient* in which she chronicled her amazing career and her transition from PD researcher to PD patient.

Today Dr. Lazzarini stays on top of the scientific literature that explores the biology of α-synuclein and its role in damaging nerves in PD. Recently, she read a fascinating article which sheds new light on this issue and inspired her to write the following article to explain the finding to the APDA community.

We're so thankful to Dr. Lazzarini for sharing her insights on this recent revelation in PD research. To hear the unique perspective on current α-synuclein research from one of the original α-synuclein researchers who is also a PD patient is truly extraordinary.



MAKING STRIDES

Andrew Long, a tenth grader from Timberline High School in Boise, Idaho, is making strides – literally.

His fundraising campaign, "Strides," is now in its second year raising money for "research, prevention, and support" for those impacted by Parkinson's disease (PD). Andrew's grandfather was diagnosed with Parkinson's over a decade ago and watching him fight the disease has encouraged Andrew to join the fight as well. Andrew has been running cross-country and track since seventh grade, and by combining two things he's passionate about – running and helping to make the world a better place– he created Strides to make a difference today for people impacted by PD and fundraise for a cure.

Andrew shares, **"one of the most critical things I've learned from my grandpa's illness is that Parkinson's affects more than just the one with the disease. It affects family, friends, finances, and many other aspects you might never consider."** Andrew's grandfather isn't the only one showing great strength living with PD: According to Andrew, "my grandma has been my grandpa's main support system, attending informational meetings, taking him to doctors for treatment, managing the many medicines he needs, and much more."

Andrew highlights the importance of supporting those living with Parkinson's right now. "[This is] just as important as curing the actual disease." By fundraising for education, support and research, Andrew is showing strength in optimism for today, and hope in progress for the future.

So, how does Strides work? Andrew fundraises by setting a mileage goal and asks for ten cents per mile. He then donates the proceeds to a charity, and this year has chosen the Northwest Chapter of APDA as one of the recipients. **Andrew is aiming to raise $10,000 in 2019 and run 600 miles.**

Will you support Andrew?
Visit
pledgeit.org/strides2019

VOLUNTEER SPOTLIGHT

Kathryn volunteering at APDA's annual Magic of Hope Gala & Auction March 2019, pictured with Allison of APDA staff

"As a recent transplant to the Pacific Northwest, it is important to me to **grow my community and build relationships** in my new home city. Volunteering with APDA Northwest has given me the opportunity to **connect with and give back to a community** that is close to the hearts of my family members and myself."

-Kathryn Saini

You too can connect and give back!
Volunteer your time and talent with APDA Northwest,
call Allison at 206-695-2905.

17TH ANNUAL

APDA MAGIC OF HOPE

GALA & AUCTION

On Saturday, March 16th, the Parkinson's community came together for a magical evening raising over $480,000 for APDA's annual gala and biggest fundraiser of the year! The night was filled with fun and games, silent and live auction, dinner, dessert dash, and hope and optimism. Jake Whittenberg of KING 5 News returned as emcee and honoree, Nancy Griese, who has long been devoted to APDA, serving on the chapter board of directors and gala committee, shared a touching tribute to her father who had Parkinson's. We look forward to this event every year and we hope you will join us on Saturday, March 14, 2020!

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DO IT YOURSELF FUNDRAISING

THE SHOWDOWN

B.E. FIT Athletics hosted their 1st annual 3 on 3 indoor basketball tournament on April 27th at Seattle Central College. B.E. FIT owner Dante Patriarca whose grandmother has Parkinson's was able to raise $280 for APDA Northwest in his very first fundraiser. B.E. FIT is bridging the gap between recreational activities and strength/performance training in the Seattle area.

PINTS FOR PARKINSONS

On April 17th, friends new and old came together to make a toast and bring attention to Parkinson's Awareness Month. Thanks to the Optimism Walk Event Committee for hosting this fun and social gathering to benefit the local PD community. A total of $900 was raised, cheers!

JEWELRY FOR A CAUSE

Heidi Kuipers of Park Lane Jewelry has demonstrated true commitment to APDA Northwest, by donating proceeds from two of her 2019 events. From Puyallup to Sammamish, guests delight in their jewelry purchases as they learn about Parkinson's and over $2,800 in proceeds have been donated to APDA so far. Heidi will partner with famed cosmetics guru Trish McEvoy at her next event benefiting APDA, "Beauty and Baubles" on June 5 at Warr-King Wines in Woodinville. Visit **apdaparkinson.org/Northwest** for more information.

WINTER RENDEVOUS

In its 6th year, "Winter Rendezvous Seks—Year of the Vikings," one of the most outrageous parties in historic downtown Poulsbo, WA, was held the weekend of February 9th. This Nordic Village breaks out the fun with culturally based activities, a huge influx of the boating community, and lots and lots of giving through the One Eighty Foundation. APDA Board of Directors Dwight Jones and Sandi Reudt attended and were awarded a $3,500 donation for APDA.

MOVE & LIVE WITH OPTIMISM!

Connect with others, build community, and be active!

The APDA website: apdaparkinson.org/Northwest is a clearinghouse for Support Groups and Wellness Programs throughout our 5 state region (Washington, Oregon, Idaho, Alaska, and Montana). Select your state and find a group active in your community!

No group in your community? APDA can help! We provide technical assistance, training, and expertise in how to get a group started in your area. Call 206-695-2905 to learn more.

Check back often as new programs are added regularly!

No access to the Web? Call us we will help you find a group that is right for you or we can send you a complete list.

Having a hard time finding classes and training close to you?
The Parkinson's Fitness Project has you covered...

We offer 2 great options for in-home training.

Daily Dose PD

Online Training for PD
Free for 30 days and just
$29/month after that.
New workouts each and every week!
www.dailydosepd.com

Concierge In-Home Training

Let us bring the workout
directly to you!
Servicing the East Side of Seattle
Call today for more info: 304-506-3876
www.theparkinsonsfitnessproject.com

SEATTLE, WA
Weekend Yoga for PD

Sundays 4:30 – 6:00pm

Northgate - UW Northwest Hospital

Peter Lynch, (206) 719-8007
thagrdnr@yahoo.com

**funded by an APDA Community Grant*

NEWCASTLE, WA
Pedaling for Parkinson's

Wednesdays 1:00 – 2:00pm

Coal Creek YMCA
13750 Newcastle Golf Club Road

Diane Wenzel, (425) 282-1500 ext 3410
dwenzel@seattleymca.org

Support Group Leader Training & Resources

In March, APDA Northwest held a training for a group of amazing support group facilitators. It was a spirited gathering of leaders from across the Northwest, full of active discussion and sharing of ideas.

APDA recognizes that support groups are vital for people impacted by Parkinson's to create a community to respond to the emotional and physical needs created by PD. APDA is here to provide support, resources and expertise to Parkinson's support group leaders. Whether you want to start a new group in your community or are an experienced leader looking for new ideas, APDA Northwest is here to help.

All Support Groups in APDA Northwest's 5-state region are listed on our website www.apdaparkinson.org/Northwest

Want to start a new group, or is your group not listed? Contact APDA and we can help! We will provide you with an APDA support group leader manual, along with with educational materials, access to webinars, help with difficult situations, and ideas for sparking group discussion. And you will be invited to the next leader training!

Save the Date!

Living Well through Education

At APDA Northwest we believe that education and learning are critical components in your journey with Parkinson's disease. That is why APDA Northwest offers an array of in-person educational programs designed to inform and empower those living with Parkinson's and provide opportunities to connect with experts in the field. All programs are open to everyone impacted by Parkinson's.

Registration & Information can be found on our website and your inbox as additional events are added!

APDA Education IS Empowerment

JUNE
18

Tuesday, June 18th, 2019
10:30 - 3:00pm
Virginia Mason Medical Center, Seattle, WA

APDA is proud to partner with Virginia Mason Medical Center to present a one day educational symposium designed to educate, inspire and empower those living with PD.

APDA Take Control Series

Second Monday of every other month
1:00 - 3:00pm
Mercer Island Community Center, Mercer Island, WA

JULY
8

What is Your Gut Telling You?
Dr. Samantha Evans
Naturopathic Physician
Seattle Integrative Medicine

Speech & Swallowing in PD: Prehab and Expiratory Muscle Strength in PD
Julie Fechter
Speech & Language Pathologist
Sound Speech and Swallow

SEPT
9

Neurorehabilitation in Parkinson's Disease
Dr. Karen Torres
Neuropsychologist
UW & Harborview Medical Center

Staying Safe In & Outside the Home
Jennifer Fox
Physical Therapist
CHCS Services

PARKINSON'S Live Well ALASKA

SEPT
14

Saturday, September 14th, 2019
10:30 – 3:30pm
Anchorage Senior Center, Anchorage, AK

APDA Northwest returns to Alaska with a one-day conference in Anchorage. Live Well Alaska provides those impacted by Parkinson's disease an opportunity to learn from a team of esteemed local and national experts as well as connect with others in their community.

apda AMERICAN PARKINSON DISEASE ASSOCIATION
NORTHWEST CHAPTER

Strength in optimism. Hope in progress.

180 Nickerson Street, Suite 108
Seattle, WA 98109

SUBSCRIBE TO OUR NEWSLETTER!

Sign up for our newsletter by visiting our website **apdaparkinson.org/Northwest** or emailing **apdanw@apdaparkinson.org**

FREEWILL

What will your legacy be?

Creating a will is a powerful way to support the people and causes you care about most. Make your will for free today, in less than 25 minutes, with a new tool available on our website and have a lasting impact on the future of Parkinson's disease.

Secure your legacy for the people and causes you love today.

Find it online at:
www.freewill.com/APDAParkinson

OUR MISSION

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