

SEPT. 2026



AMERICAN  
PARKINSON DISEASE  
ASSOCIATION

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Meet Sarah, Optimism Walk participant, and her beautiful family.

## More Than a Walk

Living with Parkinson's can sometimes feel isolating, especially when facing challenges that others may not fully understand. The Optimism Walk is a powerful reminder that no one has to navigate this journey alone. It brings together people living with Parkinson's, care partners, families, and friends who share a common understanding and a commitment to supporting one another.

As Sarah Smith shares, "Living with Young Onset Parkinson's often feels lonely. The Optimism Walk is a very real and visual re-

minder that I am part of a loving, supportive, and joyful community. We do not walk alone."

That sentiment captures the true spirit of the Optimism Walk. It is a celebration of resilience, a reflection of the connections that sustain us, and a reminder that while every Parkinson's journey is unique, none of us has to face it by ourselves. Together, we share challenges, victories, hope, and the belief that community makes every step a little easier.

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# NOTE FROM EXECUTIVE DIRECTOR

## Is there anything better than fall in Iowa?

I must admit...it's one of my absolute favorite times of the year! My mind immediately goes to football Saturdays (Iowa vs. Iowa State-let the debates begin!), the beauty of a bountiful harvest, and the incredible agricultural heritage that makes our state so very special. I think about my favorite cozy sweater, crisp fall mornings, changing leaves, and of course...pumpkin spice everything!

(If you're picturing me curled up with a pumpkin spice coffee in my favorite sweater while reading through this newsletter, you wouldn't be wrong!)

What I'm also thinking about—and I hope you are too—is joining us for our annual Optimism Walk on **Saturday, September 19!** This special day is about so much more than a walk. It's an opportunity to come together as a Parkinson's community, raise critical funds, increase awareness, celebrate hope, and show our support for the thousands of Iowans living with Parkinson's disease and their families.

If you haven't registered yet, there's still time, and I would love to see you there! If you can't join us in person, you can still be part of this important event by creating a virtual team, sharing our mission with others, or making an online donation. Every step and every gift make a difference!

Inside this newsletter, you'll find more information about the Optimism Walk, along with stories, resources, and articles designed to help you live life to the fullest.

So, grab your favorite fall drink (pumpkin spice encouraged!), settle in, and enjoy the latest edition of the APDA Iowa Chapter Newsletter.

Happy Fall!

**Shelly Charter**

Executive Director  
APDA Iowa Chapter



## Giving Highlight

Boost your giving power by donating appreciated stock to APDA. This allows you to receive a charitable tax deduction for the full market value and may avoid capital gains taxes, maximizing your gift.

**For more information or questions, please reach out to Shelly Charter at: 515-207-2296 or [scharter@apdaparkinson.org](mailto:scharter@apdaparkinson.org)**



# STRATEGIES FOR COMMUNICATING EFFECTIVELY WITH YOUR DOCTOR

By: Sydney Settle OTD, OTR/L

Parkinson's disease is complex and is best managed with an interdisciplinary team of providers. A neurologist is a key player on your Parkinson's healthcare team. Their role is to provide treatment and coordinate care with other providers.

Appointments with your neurologist are incredibly valuable, therefore it is critical you make the most of this time. The more prepared and equipped you are for these appointments, the better personalized treatment they can provide.

Follow these strategies before, during, after, and between appointments to effectively communicate about your Parkinson's experience with your neurologist.

## Starting 1 Month – 2 Weeks Prior:

### Track and monitor motor and non-motor symptoms

Consider how long and often symptoms occur. Record how disruptive symptoms are, and the impact on your daily life. Use a journal, your cell phone, or worksheets to track and record symptoms.

### Update medication list

Update your medication list to include all the prescription medications, over the counter medications, and supplements you are currently taking. Be sure to include dosage, time taken, and any side effects noted. Also beneficial to include any previously tried medications and reason for discontinuing.

## Determine top 3 priorities

Frame your priorities around the expertise of the neurologist. Remember that the neurologist's role is treatment. Choose your top 3 priorities you'd like to discuss at the visit.

### Ask a trusted person to join you

A trusted person can assist with logistics, such as parking and finding the office. They can be helpful in answering questions and providing an additional perspective to the neurologist. Additionally, they can take notes during the appointment, so you are able to fully engage with the neurologist but have the option to review information later.

## 1 Week – 1 Day Before:

### Plan for logistics

Make sure you have the neurologist's office address and directions. Consider time of appointment and expected traffic when planning for travel time.

### Gather items to bring

Compile the items to bring to the appointment including symptom list, medication list, extra dose of medication, water/snack, and a journal or phone for taking notes.



## Day of Appointment:

### Arrive early

Parkinson's symptoms can make it difficult to get out of door for an appointment. Allow plenty of time to get ready and arrive at the appointment early.

### Stay focused on priorities

During the appointment, stay focused and discuss your priorities. Make sure the conversation stays focused on updates since your last appointment, along with your future treatment plan.

## Ask:

### Best way to follow-up between appointments

Make sure you have the correct information and way to get in touch if something comes up before your next appointment.

### Referral to other providers

If needed, ask for a referral to other providers such as physical therapy, occupational therapy, speech therapy, or counseling.

### Clarification, if needed

Do not hesitate to ask clarifying questions if something is unclear.

## After Appointment:

### Review notes

After the appointment, review the notes taken during the appointment, noting any significant changes in the treatment plan.

### Implement changes

Incorporate these changes into your daily routine.

### Set-up online healthcare portal, if applicable

If your doctor uses an online healthcare portal, make sure you have username and password. Set up your account and make sure you can message them if needed.

## Schedule healthcare appointments

If you receive a referral to another healthcare provider, call and schedule your appointment.

## Between Appointments:

### Don't adjust treatment

Resist the temptation to adjust your treatment without notifying or discussing with your neurologist or nurse practitioner. This can limit their ability to make decisions regarding your treatment plan moving forward.

### Continue to track and monitor symptoms

Track any significant changes and disruptive symptoms. Do not hesitate to call the nurse practitioner or use the online healthcare portal to share these symptoms with your neurologist.

## CONNECT WITH APDA IOWA CHAPTER

Engage with the many free in-person and virtual programs offered by the APDA Iowa Chapter. Join us for an exercise class, support group, and educational program near you!

Implement these practical strategies so you can become a more confident, active participant in your Parkinson's care.

## Looking for Support?

Contact APDA to learn about local exercise classes, support groups and other resources near you.

**515.207.6296**

**[apdaiowa@apdaparkinson.org](mailto:apdaiowa@apdaparkinson.org)**

## COMMUNITY FEATURE

### AN HONEST CHAT WITH SARAH SMITH

My name is Sarah Smith. I am married to Byron and we have three boys. I love my job and have been employed with the same school district for twenty years; the last nine years I have served as a Middle School Associate Principal. Over the past 15-20 years I have seen several neurologists and have undergone many tests only to be told they weren't sure what was wrong with me. In 2022, I saw a new Movement Disorder Specialist and did not expect to receive any diagnosis. But this time was different, and at the age of 40 I was diagnosed with Young Onset Parkinson's. I wasn't sure what to expect or even what this diagnosis meant. That day, my doctor told me, "If you've met one person with Parkinson's, you've met one person with Parkinson's." He was right.

I read what I could and joined some groups but never felt like I fit in or belonged. It was hard for me to attend groups or engage in PD activities which usually take place during the day when I am working. I am typically the only person who is still working, has children in the house, and many of the symptoms I experience are different. I struggle thinking about the future.



**I decided that I would not hide my diagnosis, and I would learn to let people help me when I need it (I'm still learning). I have had to come to terms with not being able to do everything I once could, but that doesn't mean I can't do my job, attend my children's special events, or continue to do things I enjoy. It does mean that it will look different.**

Some days are more difficult than others. I think people have an idea of what a person with a disability looks like, and that person does not look like me. It's hard to come to terms with words and looks of judgement

people give me when I need to use an assistive device, can't move my feet, need help walking; it's even more difficult when my kids are around. It is for these reasons that I have been open with my family and anyone I meet about my symptoms. I hope this helps us all be more kind to ourselves and each other.

I have learned that there is so much that is unknown about Parkinson's Disease. I have also learned to appreciate what I have and can do; nothing in life is guaranteed. I am grateful for my family and friends, and I hold on to hope that new treatments will become available.

#### **Young Onset Parkinson's Disease**

is defined as anyone diagnosed with Parkinson's between the ages of 21 and 50. If you have young onset Parkinson's and would like to be added to our YOPD monthly newsletter, please reach out to Stephanie Wilson at: [swilson@apdaparkinson.org](mailto:swilson@apdaparkinson.org).

# EXERCISE CLASS SCHEDULE

Register online at [www.apdaparkinson.org/community/iowa/](http://www.apdaparkinson.org/community/iowa/)

## IOWA

### ANKENY

#### StoryPoint Siena Hills

Movement Training – Level 1  
Wednesdays, 10:00am

### CLIVE

#### Walnut Ridge Senior Living Center

Aquatic Movement – Level 2  
Fridays, 10:00am

### CRESTON

#### Salem Lutheran Church

Movement Training – Level 2  
Mondays, 1:30pm

### DES MOINES

#### Des Moines Ballroom

PD Moves Dance Class – Level 1  
Mondays: Oct. 19th - Nov 16th, 6:00pm

### DES MOINES

#### Northside Senior Center

Movement Training – Level 1  
Wednesdays, 10:00am

### FAIRFIELD

#### Fairfield Community Center

Movement Training – Level 1  
Wednesdays, 2:45pm

### GRIMES

#### Climb Iowa

Rock Climbing for Parkinson's: Levels 1-3  
1st & 3rd Tuesdays, 10:00am

### IOWA CITY

#### Iowa City Senior Center

Movement Training – Level 2  
Wednesdays, 10:00am

### JOHNSTON

#### Brio of Johnston

Tai Chi - Level 1  
Saturdays, 10:00am

### OSCEOLA

#### Skills Nursing Lab – Clarke County Hospital

Movement Training – Level 1  
Wednesdays, 11:00am

### PLEASANT HILL

#### StoryPoint of Pleasant Hill

Movement Training – Level 1  
Fridays, 9:45am

### SHENANDOAH

#### Shenandoah Medical Center

Movement Training – Level 1  
Thursdays, 11:30am

### WAUKEE

#### Independence Village

Movement Training – Level 2 & 3  
Mondays, 11:00am – Level 2  
Fridays, 11:00am – Level 3

## SKILL LEVELS

### LEVEL 1:

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

### LEVEL 2:

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

### LEVEL 3:

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

## VIRTUAL SUPPORT GROUPS

### ADULT CHILDREN OF PARENTS WITH PD

#### 1st Tuesdays

6:30 - 7:30 PM CST

Call 515.207.6296 for Zoom Link

### PWP, CARE PARTNERS, FAMILY/FRIENDS

#### Last Tuesdays

2:30 - 4:00 PM CST

Call 515.207.6296 for Zoom Link

# SUPPORT GROUP SCHEDULE

Register online at [www.apdaparkinson.org/community/iowa/](http://www.apdaparkinson.org/community/iowa/)

## IOWA

### ACKLEY

Ackley Civic Center  
2nd Wednesday, 2:00pm

### ALTOONA

Prairie Vista Village Chapel  
3rd Thursday, 10:00am

### AMES

Sixty Forward: Conference Room  
3rd Thursday, 3:00pm

### ANAMOSA

Jones Regional Medical Center  
1st Monday, 3:00pm

### ANKENY

StoryPoint Senior Living  
2nd Tuesday, 1:00pm

### BETTENDORF

Palmer Hills Retirement Center  
3rd Saturday, 10:00am

### BURLINGTON

Great River Medical Center –  
Black Hawk Room  
3rd Thursday, 2:00pm

### CARROLL

St. Anthony's Regional Hospital  
Every Thursday, 11:00am

### CEDAR FALLS

UnityPoint Prairie Parkway: Meeting Room 1  
Last Tuesday, 4:00pm

### CENTERVILLE

MercyOne Hospital  
3rd Thursday, 5:30pm

### CRESTON

Salem Lutheran Church  
3rd Monday, 2:00pm

### DES MOINES

Wesley on Grand  
1st Wednesday, 2:00pm  
Life Time  
3rd Thursday, 12:00pm

### DUBUQUE

UnityPoint Finley Hospital  
3rd Saturday, 10:00am

### FAIRFIELD

Jefferson County Health Center  
1st Thursday, 10:00am

### FOREST CITY

YMCA  
3rd Friday, 10:00am

### FORT DODGE

Friendship Haven, Schmoker Bldg  
1st Wednesday, 11:30am

### GRINNELL

St. Francis Assisted Living  
Call for information

### INDIANOLA

The Village  
3rd Thursday, 10:00am

### IOWA CITY

Grand Living at Bridgewater  
3rd Tuesday, 6:00pm

### JOHNSTON

Brio of Johnston  
2nd Monday, 2:00pm

### LEON

Decatur County Hospital  
3rd Tuesday, 11:30am

### LOGAN

Logan United Methodist Church  
Every Tuesday, 10:30am

### MARSHALLTOWN

Our Savior Lutheran Church  
2nd Tuesday, 10:30am

### MASON CITY

Southbridge Mall  
3rd Thursday, 2:30pm

### NEWTON

Newton Village  
2nd Saturday, 10:30am

### NORTHWOOD

Viking Activity Center  
2nd Thursday, 1:30pm

### OSCEOLA

Clarke County Hospital  
2nd Wednesday, 1:00pm

### OTTUMWA

YMCA  
1st Tuesday, 1:00pm

### PELLA

Pella Manor at Hearthstone  
2nd Thursday, 2:00pm

### SHENANDOAH

Shenandoah Medical Center  
2nd Thursday, 11:00am  
Odd # months Care Partner Discussion following

### SIOUX CENTER

Crown Pointe Estates  
2nd Thursday, 10:00am

### SIOUX CITY

Siouxland Center for Active Generation  
4th Monday, 1:00pm

### SPIRIT LAKE

Bedell Family YMCA  
1st Tuesday, 9:30am

### STORM LAKE

St. Mark Lutheran Church  
2nd Tuesday, 1:30pm

### WAUKEE

Independence Village of Waukee  
3rd Friday, 1:30pm

### WAVERLY

Waverly Health Center  
3rd Thursday, 1:30pm

### WEBSTER CITY

Van Diest Medical Center  
3rd Tuesday, 11:00am

### WEST DES MOINES

Cedar Ridge Village  
3rd Thursday, 1:30pm  
Edgewater Senior Living  
3rd Wednesday, 1:00pm  
Grand Living Tower Place  
3rd Saturday, 10:00am  
Rock Valley Physical Therapy  
2nd Tuesday, 12:30pm

## Thank you to our APDA Iowa Parkinson's Conference *Sponsors!*

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## » Upcoming Events and Programs

**PRESS ON™** is an eight-week education and support program for those who have been living with PD for **5 or more years** and their care partners.

Join us on **November 5<sup>th</sup>** in **Iowa City** or in **West Des Moines** starting **September 28<sup>th</sup>**

**PRESS™** is an eight-week education and support program for those who have been diagnosed with PD **within the past 5 years** and their care partners.

**Two Locations!**

**Iowa City** - Starting **September 10<sup>th</sup>**

**Des Moines** - Starting **September 30<sup>th</sup>**

### Parkinson's Education Programs

- **Burlington Parkinson's Education Program**
  - **Thursday, October 15<sup>th</sup>** from 12:00 - 4:00 pm
  - Southeast Iowa Regional Medical Center, Wellness Plaza – The Blackhawk Room

Visit our **Upcoming Events & Programs** page for details and to stay up to date on everything happening with APDA Iowa.

Go to: <http://apda.link/iaupcoming>

### 2026 Iowa Optimism Walk

Our largest community celebration! There's still time to register!

**Saturday, September 19<sup>th</sup>** at Walker Johnston Park in **Urbandale, IA!**

» Need help with registration? Give us a call at **515.207.6296!** We're happy to assist and can register you over the phone.

# PARKINSON'S DISEASE AND THE POWER OF PHYSICAL THERAPY: STAYING ACTIVE, MOBILE, AND CONFIDENT

By: Angie Saskowski

Exercise is especially important for individuals with Parkinson's. Research shows that regular, targeted exercise can improve movement quality, reduce stiffness, and support overall function. Physical therapists teach safe exercises that address common challenges such as shuffling steps, difficulty turning, freezing of gait, and reduced arm swing. Therapy sessions often include walking programs, balance training, stretching, and strengthening activities to support daily movement, focusing on moving with bigger motion in the upper and lower extremities through repetitive, high-effort movement. Physical therapy helps patients to learn to walk with larger steps, improve posture, and move more efficiently during daily activities.

## Improving Balance and Reducing Falls

Balance issues and falls are common concerns for people with Parkinson's. Physical therapists assess balance, walking patterns, and fall risk, then provide targeted training to improve stability and safety. Therapy may include balance exercises, leg and core strengthening, and practice navigating stairs, curbs, and uneven surfaces.

As balance improves, many patients feel more confident

moving around their homes and communities. This increased confidence often leads to greater independence and reduced fear of falling.

## Home Modification Recommendations

Physical therapists also help make the home environment safer. They may recommend removing loose rugs or clutter, improving lighting, installing grab bars in bathrooms, adding railings on stairs, or rearranging furniture to create clear walking paths. Therapists can also recommend assistive devices, such as canes or walkers, and provide training on how to use them safely. These simple changes can greatly reduce fall risk and support independence at home.

## Confidence and Safety in the Community

Staying active outside the home is important for physical, emotional, and social well-being. Physical therapists help patients practice skills needed for safe community mobility, such as crossing streets, walking longer distances, getting in and out of cars, and managing symptoms in busy or distracting environments.

Through education, practice, and encouragement, physical therapy empowers people with Parkinson's to stay active, mobile, and confident helping them continue doing the things that matter most.



### 3 KEY TAKEAWAYS

**Physical therapy helps people with Parkinson's stay active and independent.**

A personalized physical therapy program improves strength, flexibility, posture, balance, and walking ability, helping individuals maintain mobility and continue participating in daily activities.

**Targeted exercise can improve movement and reduce fall risk.**

Regular, high-effort exercise and balance training can reduce stiffness, improve walking patterns, and build the confidence needed to move safely at home and in the community.

**Small changes can make a big difference in safety and confidence.**

Physical therapists provide home safety recommendations and community mobility training, helping people navigate everyday environments more safely while maintaining their independence.



**Practical Tip: Take Bigger Steps**

When walking, focus on taking slow, deliberate, bigger steps while swinging your arms naturally. This simple practice can help reduce shuffling, improve posture, and make walking feel more stable. Start by practicing for 5–10 minutes in a safe, open area each day.

**Try This Today:**

As you walk through your home, say to yourself, “Big steps, tall posture, swing your arms.” Using this simple cue can help reinforce better movement patterns.



### Looking for Support?

Contact APDA to learn about local physical therapy programs and resources near you.

**515.207.6296 | [apdaiowa@apdaparkinson.org](mailto:apdaiowa@apdaparkinson.org)**

# The Exercise Prescription for Parkinson's Disease

Incorporating a well-rounded exercise regimen is essential for managing PD.

The following exercise prescription encompasses four key components: aerobic exercise, resistance training, flexibility exercises, and neuromotor activities. This balanced approach aims to improve motor and non-motor symptoms, enhance overall function, and potentially slow disease progression.



| FITT (Fitness, Intensity, Time, Type) Recommendations |                                                                                                                                                                                                 |                                                                                                                                                                                                                                  |                                                                                          |                                                                                                                                                     |
|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                       | Aerobic                                                                                                                                                                                         | Resistance                                                                                                                                                                                                                       | Flexibility                                                                              | Neuromotor                                                                                                                                          |
| Frequency                                             | 3–4 days/week                                                                                                                                                                                   | 2–3 days/week                                                                                                                                                                                                                    | 2–3 days/week with daily being most effective                                            | 2–3 days/week                                                                                                                                       |
| Intensity                                             | High-intensity (80–85% HRmax) for mild – to – moderate PD; Moderate intensity (60–65% HRmax) for deconditioned individuals or those with more advanced PD; attempt to progress to 80%–85% HRmax | 30%–60% of 1RM for beginners; 60–80% 1RM for advanced                                                                                                                                                                            | Full extension, rotation, or stretch to the point of slight discomfort                   | N/A                                                                                                                                                 |
| Time                                                  | ≥30 minutes accumulated high-intensity exercise (not including warm-up/cool down or rest intervals)<br>Progress to total of 150 min/week                                                        | 1–3 sets of 8–12 repetitions<br><br>Progress to 2–3 hours/ week                                                                                                                                                                  | Hold static stretch for 10–30 seconds.<br>2–4 repetitions of each exercise               | 30–60 min                                                                                                                                           |
| Type                                                  | Prolonged, rhythmic activities using large muscle groups (e.g., walking, running, cycling, swimming, rowing, elliptical)                                                                        | Major muscle groups of upper and lower body – challenging all major muscle groups on nonconsecutive days. Avoid free weights for those in advanced disease stage, use weight machines, body weight, and resistance bands instead | Slow static stretches for all major muscle groups working on increasing range of motion. | Exercises involving motor skills (e.g., balance, agility, coordination, gait, dual tasks), multidirectional step training, and instability training |

\*HRmax = maximum heart rate; 1RM = one repetition maximum

Source = [pmc.ncbi.nlm.nih.gov/articles/PMC11091645/table/jpd-14-jpd230277-t00](https://pmc.ncbi.nlm.nih.gov/articles/PMC11091645/table/jpd-14-jpd230277-t00)

2951 86th St. Suite 125  
Urbandale, IA 50322



AMERICAN  
PARKINSON DISEASE  
ASSOCIATION

## Join The Iowa Optimism Walk Today!

**Saturday, September 19th**

12:30 pm Check In, 1:30 pm Walk Start

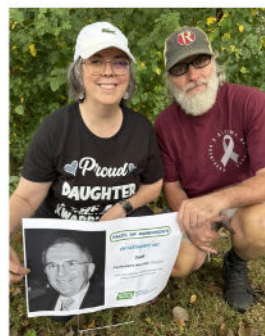
**Walker Johnston Park**

9000 Douglas Avenue, Urbandale, Iowa

*Scan the QR code with your smart  
phone camera to register*



*One Walk.  
One Mission.*



Submit your 2026 Faces of PD Optimism Walk  
tribute sign in honor or memory of your PD  
warrior by emailing:  
[nwinterbottom@apdaparkinson.org](mailto:nwinterbottom@apdaparkinson.org)  
or calling 515-207-6296.

## APDA IOWA CHAPTER

2951 86th St. Suite 125  
Urbandale, IA 50322  
515-207-6296

Office Hours: 9am - 4pm | Tuesday - Friday  
Staff available by phone on Mondays

## LET'S CONNECT

[apdaparkinson.org/ia](http://apdaparkinson.org/ia)  
[@apdaiaowa](https://www.instagram.com/apdaiaowa)

