

WHAT IS COMPLEMENTARY AND ALTERNATIVE MEDICINE (CAM)?

Adapted from the National Center for Complementary and Alternative Medicine
<http://nccam.nih.gov/health/whatiscam>

Because there are so many different approaches to health care outside the traditional norms of medical practice within the United States, we decided to devote this issue of Parkinson NEWS to understanding what these different approaches might be and what the current understanding of their efficacy is. Also, because of the need in this area, a division of the National Institutes of Health was recently formed to specifically address complementary and alternative medicine, the so-called National Center for Complementary and Alternative Medicine or NCCAM. NCCAM is dedicated to exploring these alternative medical practices in the context of rigorous science, training CAM researchers and disseminating authoritative information to the public and professionals as the following article will demonstrate.

The first question to be answered is

What is complementary and alternative medicine?

Complementary and alternative medicine, as defined by NCCAM, is a group of diverse medical and health care systems, practices and products that are not presently considered to be part of conventional medicine. While some scientific evidence exists regarding some CAM therapies, for most there are key questions yet to be answered through well-designed scientific studies....questions such as whether these therapies are safe and whether they work for the diseases or medical conditions for which they are used.

Are complementary medicine and alternative medicine different from each other?

Yes, they are different. **Complementary** medicine is used **together with** conventional medicine. An example of complementary therapy is using aromatherapy to help lessen a patient's discomfort following surgery.

Alternative medicine is used **in place of** conventional medicine. An example is using a special diet to treat cancer instead of undergoing surgery, radiation, or chemotherapy that has been recommended by a conventional doctor.

What is integrative medicine?

Integrative medicine, as defined by NCCAM, combines mainstream medical therapies and CAM therapies for which there is some high-quality scientific evidence of safety and effectiveness.

What are the major types of complementary and alternative medicine?

NCCAM classifies CAM therapies into five categories or domains:

1. Alternative Medical Systems

Alternative medical systems are built on complete systems of theory and practice. Often these systems have evolved apart from and earlier than the conventional medical approach used in the United States. Examples of alternative medical systems that have developed in Western cultures include homeopathic medicine and naturopathic medicine. Examples of systems that have developed in non-Western cultures include Traditional Chinese Medicine (TCM) and Ayurveda.

- Homeopathic medicine derives from the belief that "like cures like". Thus, highly diluted quantities of medicinal substances are given to cure symptoms which these same substances would produce at more concentrated doses.
- Naturopathic medicine proposes that there is healing power in the body that establishes, maintains and restores health. Thus, nutrition, lifestyle counseling, dietary supplements, medicinal plants, exercise, homeopathy and traditional Chinese medicine are all areas of focus for practitioners.
- Traditional Chinese Medicine proposes that disease is the result of disrupted flow of qi (pronounced "chee"), or vital energy and the imbalance of yin (negative energy) and yang (positive energy). The components of TCM are herbal and nutritional therapy, restorative physical exercises, meditation, acupuncture and remedial massage.
- Ayurveda is a 5000 year old practice on the Indian subcontinent that includes diet, herbal remedies and emphasizes the use of body, mind and spirit in disease prevention and treatment.

2. Mind-Body Interventions

Mind-body techniques that are considered CAM are meditation, prayer, mental healing and creative therapies using art, music or dance. Some techniques that were considered CAM in the past have become mainstream such as patient support groups and cognitive behavior therapy.

3. Biologically Based Therapies

Biologically based therapies in CAM use substances found in nature such as herbs, food and vitamins. Some examples include dietary supplements, herbal products and the use of other so-called natural but as yet scientifically unproven therapies such as using shark cartilage to treat cancer.

4. Manipulative and Body-Based Methods

These therapies include chiropractic, osteopathic manipulation and massage.

- Chiropractic is a therapy that focuses on the

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The Southwest Parkinson News contains information provided as a service and is not intended to constitute medical advice or views. Patients should discuss information regarding medical management with their physician.

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- relationship between bodily structure (primarily that of the spine) and function and how that relationship affects the preservation and restoration of health. Manipulation is the key tool.
- **Osteopathic** is based on the underlying belief that all of the body's systems work together and disturbances in one system may affect function elsewhere in the body.

5. Energy Therapies

Biofield therapies are intended to affect energy fields that purportedly surround and penetrate the human body. The existence of such fields has not yet been scientifically proven. Some forms of energy therapy manipulate biofields by applying pressure and/or manipulating the body by placing the hand in or through these fields. Examples include qi gong, Reiki, and Therapeutic Touch.

- Qi gong ("chee-GUNG") is component of traditional Chinese medicine that combines movement, meditation and regulation of breathing to enhance flow of qi or vital energy in the body, improve blood circulation and enhance immune function.
- Reiki ("RAY-kee") is a Japanese word representing Universal Life energy. It is based on the belief that when spiritual ener-

gy is channeled through a Reiki practitioner, the patient's spirit is healed which, in turn, heals the physical body.

- Therapeutic Touch is derived from an ancient technique called laying-on of hands. It is based on the premise that it is the healing force of the therapist that affects the patient's recovery. Healing is promoted when the body's energies are in balance. Healers can identify energy imbalances by passing their hands over the patient.

Bioelectromagnetic-based therapies involve the unconventional use of electromagnetic fields such as pulsed fields, magnetic fields, or alternating current or direct current fields.

For More Information

NCCAM - website <http://nccam.nih.gov>

Dietary Supplements – website <http://ods.od.nih.gov>

Supplement use – website <http://cfsan.fda.gov>

Alternative Therapies (AT's) for Parkinson's Disease

www.pslgroup.com

52nd Annual Meeting of the American Academy of Neurology; San Diego, May 5, 2000
Pam R. Rajendran, BA; Richard E. Thompson, PhD; Stephen G. Reich, MD.

A statistical analysis of data from structured interviews of 201 patients with Parkinson's disease indicated that almost half of these patients used some form of alternative therapy and most did so without consulting their physician.

The strongest correlate with use of AT in Parkinson's disease was age of onset followed by age itself. This is in agreement with other studies that have found higher use of AT in younger adults. There was no correlation of AT use and degree of severity of Parkinson's disease as measured by Hoehn and Yahr scales. This suggest that people were not turning to AT in desperation unlike the patients with brain tumors who used AT as a consequence of the limited effectiveness of conventional therapies.

There was, as others have also reported, a strong correlation between AT use and higher levels of education and income. The latter reflects the fact that most AT is an out-of-pocket expenditure which can be significant e.g. a nationwide health store reports \$263/mo for its recommended vitamins and herbs for Parkinson's disease.

The most frequently used AT in this study was vitamins, herbs and massage. It should be noted there is a growing body of literature suggesting potentially harmful interaction effects between drugs and vitamins and herbs. It is important to consult with your physician about AT you are considering to make sure there is not interaction potential. This is stressed all the more since the data shows most Parkinson's disease users of AT do NOT consult with their physician. 71% of the motivation to use ATs comes from the media, family and friends.

While there are at least 16 studies of AT for Parkinson's dis-

ease, most are open label and uncontrolled. In contrast, a study called DATATOP was conducted which a well designed, rigorous trial was showing conclusively that 2000 IU of Vitamin E each day had no symptomatic or neuroprotective effect on Parkinson's disease. And yet, vitamin E was the most commonly used AT at a level that was half that shown to be ineffective.

Some of the hypotheses for why patients with Parkinson's use AT were explored. There was no evidence to support dissatisfaction with conventional therapies. The second hypothesis explored revolved around the need for personal control or autonomy; this was also not supported. Instead the hypothesis that best supported AT use was the patient's so-called philosophical congruence i.e. a holistic orientation to health and/or a transformational experience to change one's world view. The diagnosis of Parkinson's disease itself may represent such an experience.

In conclusion, this study of 201 Parkinson's patients indicated 40% used at least one AT. Vitamins, herbs and massage were the most commonly used AT. While vitamin E was shown conclusively to provide no neuroprotective or symptomatic benefit at 2000I.U./day (recommended dose is 400-800 I.U./day), it was still one of the most commonly used ATs. The strongest correlate of AT use amongst Parkinson's patients was age, education and income with younger, more affluent folks subscribing to AT use. This makes sense since ATs are not covered by insurance. The reason people with Parkinson's use ATs is best understood in light of their holistic approach to health as opposed to dissatisfaction with conventional therapies.

Alternative/Holistic Therapies and Parkinson's Disease (PD)

Q&A by Jill Marjama-Lyons, MD

Mo Udall Parkinson's Symposium, 2004

1. What herbs are safe to take and are proven to help persons with Parkinson's disease?

The herbs macuna pruriens, a plant that contains levodopa, can reduce some of the motor symptoms of PD.

Other herbs and many other "over the counter" supplements such as vitamins, enzymes and amino acids are loosely regulated by the FDA which means the quality, purity and content are dependent upon the manufacturing company. As a consumer, you should contact the manufacturer directly with questions about purity and safety as well as consult a licensed herbalist or nutritionist. Some resources are available at the end of this article.

2. Should people with PD take Co-Q10?

Co-Q10 is not a proven treatment for PD. Limited scientific data suggests the level is lower in people with PD and there are some small studies that suggest 4x/day, total dose of 1200mg was effective in providing 44% better motor function but whether or not Co-Q10 truly helps reduce motor symptoms or delays progression of PD is considered unknown. Also, it is expensive. If you decide to take it, look for the liquid form with manufacturer guaranteed absorption and purity. Another important point is that statin drugs that lower cholesterol can also lower Co-Q10 levels so persons taking these drugs should consider taking 100-200mg Co-Q10 whether they have PD or not.

3. Should persons with PD take NADH?

Similar to Co-Q10, Nicotinamide adenine dinucleotide hydrogen (NADH), is an enzyme that is involved in energy production of living cells. NADH is not a proven treatment for PD. Limited, small sample size experiments have given conflicting results.

4. What about Intravenous Glutathione for PD?

Glutathione is not an approved treatment for PD. Similar to Co-Q10, glutathione levels have been shown to be lower in persons with PD but there are no published controlled studies demonstrating its efficacy.

5. What vitamins are recommended for PD?

There are no proven vitamins that specifically help reduce motor symptoms of PD. One theory of the cause of PD is excess free radicals so, if this theory had merit, antioxidant vitamins such as vitamin C and vitamin E might be logical but note there has been a study in which 2000I.U./day of vitamin E was shown to be totally ineffective.

6. Can massage therapy help with PD?

Some people with PD report benefits of massage therapy in lessening muscle stiffness (rigidity) and pain but the benefits are transitory lasting but a few hours or days.

7. Does exercise make a difference?

Unqualifiedly YES. Exercise of any kind that does not increase risk of falling is always recommended to increase endurance, improve oxygen delivery, increase muscle strength and mass, and improve coordination, balance and flexibility. Even someone with advanced PD can benefit from exercise.

8. Can creatine help increase strength?

Yes. It contributes to the process that supplies phosphorus to muscle cells so they can make ATP, the energy source for all cells. People who take creatine report increased strength, muscle mass and improved thinking and memory. Furthermore, the drug is inexpensive.

References

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- What Your Doctor May Not Tell You About PD: A Holistic Program for Optimal Wellness, Jill Marjama-Lyons, MD and Mary Shomon (Warner Books, 2003)
- PDR for Herbal Medicine (First Edition, 1999) Medical Economics Company
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- Tyler's Herbs of Choice: The Therapeutic Use of Phytomedicinals, James E. Robbers and Varro E. Tyler
- Eat Well, Stay Well with PD, Kathryn Holdren, MS, RD (Five Star Living, 1998)
- The Brain Wellness Plan, Jay Lombard, MD and Carl Germono
- American Holistic Health Association; www.ahha.org
- NIH National Center for Complementary and Alternative Medicine; www.nccam.nih.gov
- Mind Body Medical Institute; www.mbmi.org
- American Association of Oriental Medicine; www.aaom.org
- Acupuncture Page; www.acupuncture.com
- The Homeopathy Home Page; www.Homeopathy.com
- Nutritional Web Site www.nutrition.about.com

Ali's Move

Peter Corbett, *The Arizona Republic*

PARADISE VALLEY - Move over, Mike Tyson, boxing champion Muhammad Ali is moving in on your turf. The self-proclaimed "greatest" boxer of all time has bought a home in Paradise Valley with wife Yolanda. The Alis paid cash late last month for a \$1.64 million home in a gated neighborhood south of Camelback Golf Club, west of McCormick Parkway and Scottsdale Road.

In Paradise Valley, where the median sales price last month was \$1.4 million, the Alis' new home is relatively modest. Built

in 1995, the nearly 6,000-square-foot home has six bedrooms, three fireplaces and a pool and spa. The new home of the former heavyweight champion of the world is about two miles from fellow former champ Tyson, who lives in a \$2.1 million, 7,700-square-foot home near Mummy Mountain in Paradise Valley.

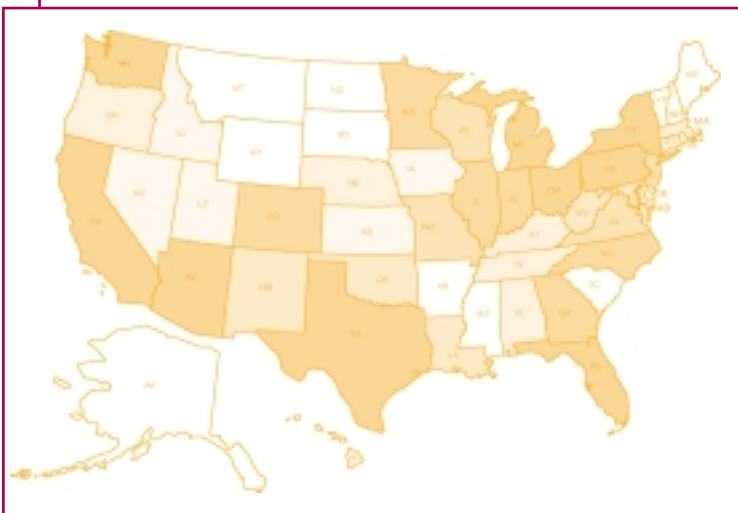
Ali, 63, who is often on the road for public appearances, has a home in Berrien Springs, Mich., north of South Bend, Ind.

He has been a frequent visitor to the Valley because of his relationship with the Barrow Neurological Institute in Phoenix and its Muhammad Ali Parkinson Research Center, which was named in his honor in 1997.

Status of the Parkinson's Disease Registry

As of August 1st 2005 the Parkinson's Disease Registry has 1747 registrants enrolled. Since the last edition of the Southwest Parkinson News our numbers increased by about 250 participants. We now have every state in the country represented by at least one registrant and have registrants in 23 other countries as well. Countries like Canada, India, Iran, Sweden, Australia, New Zealand, Germany, China, Japan and the United Kingdom are included. At this time our questionnaire is only available in English, but in the future we may have it translated into other languages so we can increase enrollment in other countries. Comparing treatment methods and quality of life outcomes between countries would be a valuable research question to be able to explore. For the time being, however, we are focusing on increasing participation across the United States.

The Registry's growth has been largely due to grass roots networking and articles on the Internet and in newspapers and newsletters around the country. Currently 1661 of our registrants live in the US. The National Parkinson Foundation states that approximately 1.5 million Americans have Parkinson's disease (PD). In order to have a study population that is representative of the US PD population we will need to enroll more registrants. This is why our goal is to reach a total of 20,000, which would still only be 1.3% of those estimated to have PD in the US.



The map above illustrates an approximate distribution of registrants who live in each state. The darker colors indicate higher numbers of registrants in those states. We have been able to recruit more participants in areas where we have established contacts or were able to personally meet with potential participants.

Although we want the Registry to grow to larger numbers in order to do certain types of research, we are able

to do some equally important research now. In the coming months we plan to use the data to determine whether the story told by your data as a whole is comparable to what researchers already know about PD. Within the next year we also plan to conduct a validation study to show that the quality of the data is good. Validating the Registry questionnaire will give credence to all future studies conducted using the data.

The following is a sampling of combined demographic information from the Registry at this time. This data, and other pieces of information, will be used to develop a description of our "average" PD patient and allow us to compare it with the "average" PD patient already known to the research community. This too will establish the Registry as a viable research tool in the eyes of scientists everywhere.

In a sampling of 1735 registrants, 1008 (58%) are male and 727 (42%) are female. Of the males, the maximum age is 95 and the minimum age is 28. The average age of males in the Registry is 66 and the most commonly occurring age is 68. The maximum age in our female group is 94 and the minimum age is 26. The average age of females in the Registry is 63 and the most commonly occurring age is 57. Research literature reports that PD affects males and females approximately equally with a slightly higher incidence in males. The trend we show toward younger females has not been described in the literature, but will most likely rise to meet the male average age as the number of participants increase.

Of the 1735, 1603, or 92%, were white/non-Hispanic and 132, or 8% were of other or mixed race/ethnicity. Researchers have found that PD does not afflict any race or ethnicity more often than others. Again, as our numbers increase, we hope to see the percentage of other races and ethnicities increase and more closely reflect the make-up of the country.

There are more participants who completed their enrollment questionnaire over the Internet than those who completed it on a paper copy. The group of Internet participants amount to 1,446, or 83%, and their average age is 63. The number of paper participants amounted to 301, or 17%, and their average age was 74.

So, hopefully we have given you a better idea of how the data looks when it is combined and viewed as a whole. And, if you have not already become a participant in the Registry there are two ways to do so, on the Internet at www.parkinsonsregistry.com or by calling to request a paper copy at 1-877-287-7122. Furthermore, our research potential will expand as the Registry grows, but we are able to do important research today thanks to the efforts of the existing 1747 registrants.

Living Well, Running Hard Lessons Learned from Living with Parkinson's Disease

By John Ball

Reviewed by Malayappa Jeevanandam, PhD

This work is mainly from the author's personal memories and particularly this book reflects the author's own opinions, biases and interpretations of events. This is not the complete story of the author's life but simply a set of stories about learning to live with Parkinson's disease (PD).

The author was 27 years old when the symptoms of PD were diagnosed. In regular life, along with PD, the author was a military pilot, a determined marathon runner and mountain climber learning to live well. Improvements did not mean gaining the upper hand over the disease because there is no accurate measure of the absolute itself. Until the development of Sinemet, Parkinson's was an "invisible" disease because once diagnosed, most people retreated from life. However, the author has never felt victimized by the disease, just forced to live with it and adapt to it. This disease is not considered as one's fate or destiny.

Taking an active role in understanding the disease process and its treatment has been helpful. The key to successful running is to keep everything in balance, whether you have PD or not. Life is a constant balancing act. Achieving balance may require endless maneuvering. We need to keep personal need, fitness, work and family activities in the right proportion to insure our mental and physical health. *Running* a race has been especially rewarding when medications were properly adjusted to the body's needs.

Racing may be about fast times and beating your competition but *running* has more to do with meeting personal goals and expectations. *Running with PD*, as with everything, has a continuous set of accommodations. It's an inconvenience but it is manageable. Having PD may limit the quality of the performance to less than optimum. Major running events and Parkinson's awareness could work together because it juxtaposes two antagonistic notions. A movement disorder takes on the marathon.....the first 12 years with PD and adapting to the ways it reduces capabilities was phase one. The second phase moved from personal concerns to family concerns.....from isolation to sharing. Then running marathons moved into a third phase of understanding.....that PD is a community disease. Its effect extends beyond the individual sufferer and his family to all of society. Participating in fund raising events and support groups, helping to organize a 5K run for PD and speaking to other PD sufferers and several support group meetings moved from isolation to sharing and sharing to support. After PAN (Parkinson's Action Network) conference, it moved from support to action and then to being an advocate.

Parkinson's is no longer considered simply a movement disorder. It can affect movement, thinking and the autonomic nervous system in many subtle ways interfering with everything from heart rate, respiration, and perspiration to urination and defecation. Scientific evidence shows that brains have more built-in repair capabilities than anyone imagined. Running has not only helped repair many thousands of neurons but helped to establish new ones damaged by PD. This repair capacity is called "neuroplasticity".

I'll Hold Your Hand So You Won't Fall A Child's Guide to Parkinson's Disease By Rasheda Ali

Foreword by Muhammad Ali

Reviewed by Gay Samuelson

Rasheda Ali, daughter of Muhammad Ali, was faced with knowing she wanted to enhance the relationship between her children and her father, Muhammad Ali, who has suffered with Parkinson's disease for 20 years. She realized her children needed help in interpreting their grandfather's behavior and needed to be reassured that their grandfather was the same person they had always known and loved. As a result, she decided to write a book to not only help her own children but those countless grandchildren of people with Parkinson's disease. Her recently published book, "I'll Hold Your Hand so You Won't Fall, A Child's Guide to Parkinson's Disease" is a wonderful, simple but accurate book that focuses on questions most children have about their observations of their grandfather or grandmother with Parkinson's disease. Rasheda has done an excellent job of providing accurate, straightforward answers that children can readily understand. She covers a wide spectrum of issues such as tremors, shuffled walking, slurred speech, depression, freezing, swallowing problems, balance problems, hand dexterity and rigidity problems. She also addresses genetics, early stages of the disease and brain surgery, all of which are complex subjects she reduces to simple explanations most children can readily understand.

The foreword to the book by Muhammad Ali is very touching and sets the stage for Rasheda's own "Message from the Heart", her rationale for writing the book.

This book is a must read for any parent or grandparent with or without Parkinson's who has school age children who are engaged in relationships with family members who have Parkinson's.

Thanks Rasheda for an excellent service you have provided for the Parkinson's community and their wonderful, supportive family members, especially the youngest ones!

MAPC Multidisciplinary Assessment Clinic Participants Benefit Positively & Spread the WORD!

The Muhammad Ali Parkinson Center launched its first Multidisciplinary Assessment Clinic on January 11, 2005. Thus far, twenty-seven eager participants with Parkinsons disease along with their care partner joined with therapists on the second Tuesday of each month at Outpatient Rehab. The half-day morning event includes four 1 hour individual sessions to permit a comprehensive evaluation of physical, occupational, speech and psychosocial needs. An extensive amount of educational information is provided at each Clinic to address the importance of fitness and exercise; practical approaches to living well with PD; adaptive equipment; respite and personalized therapeutic interventions. Recommendations generated from the sessions, include referrals to additional community resources such as Massage Therapy, Support Groups, Caregiver Workshops, fitness classes, PD 101, a voice training program along with suggestions for promoting a sense of well being functionally, emotionally and socially.



At the close of the morning sessions, participants in the Clinic review the results of their assessments with each therapist, and a copy is mailed to them and their referring physician. A follow-up phone call is made to the participants to learn how they benefited from the program. Those responses reflect positive outcomes in many ways for both the participant and care partner. Some benefits are captured in the following feedback from individuals who have had Parkinsons for many years. "This was a good experience since it was the only time someone focused intensively on my daily functioning", "I was taught things I can do for myself" "Therapists were all helpful," "Care was expressed which was touching and appreciated." "The focus on quantitative tests that can be used to track progress was excellent."

Also, during a session dealing with psychosocial issues, a care partner with no support systems and a spouse in de-conditioned status shared that she was totally exhausted and desperate for help. Many suggestions were offered

that day, all of which the care partner implemented, ". . .to the letter" upon their return to a rural community in Arizona. Six weeks later a phone call to the participant's home revealed a care partner who reports "...feeling like a brand new person." What happened? A week of respite was implemented which immediately enabled a vacation visit with family in another state. She returned home, refreshed, able to think more clearly and ready to continue with a plan of action. Adult Day Health Care is now providing assistance several days a week, which enables the spouse and the care partner to engage socially with others in the community.

We appreciate that participants who have benefited positively from our Clinic have been spreading the word about their experiences with their friends in the community. If you are interested in finding out more about the Multidisciplinary Assessment Clinic or would like to participate please contact Jean June at 602-406-4266 at the Muhammad Ali Parkinson Center. We look forward to hearing from you.

Recreation and Education — September-December 2005

In order to plan safe and effective classes, **all** classes require pre-registration. Classes are only \$5 per class, payable by class or by session. For further information and to register, please call the Therapeutic Recreation Coordinator, Darolyn O'Donnell, at 602-406-6903

Goodyear

Exercise

The Art of Moving Exercise Class
Thursday 10 am
Skyway Church of the West Valley
14900 W. Van Buren, Goodyear

Carefree / Cave Creek / North Scottsdale

Exercise

The Art of Moving Exercise Class
Date/Time TBA
Location TBA

Chandler

Exercise

The Art of Moving Exercise Class
Wednesday 3:30 – 4:30pm;
September 7 - November 23
Village Oaks Assisted Living
1919 W Carla Vista Drive
(Dobson & Chandler Blvd)

Mesa / East Mesa

Exercise

The Art of Moving Exercise Class
Wednesday 2 – 3 pm;
September 7 - November 23
Mesa Senior Center Downtown
247 N. MacDonald Classroom 4

Exercise

Mondays 1 – 2 pm;
September 19th - November 21st
Red Mountain Multigeneration
Center
7550 E. Adobe Road, East Mesa

Tai Chi

Tuesday 10-11 am;
September 6 - November 22
Thursday 10-11 am;
September 8 - November 17
The Springs of East Mesa
6220 E. Broadway
(Between Power & Recker Roads)

Phoenix

Exercise

The Art of Moving Exercise Class
Tuesday 2 – 3 pm;
September 6 - November 22
Muhammad Ali Parkinson
Research Center
500 West Thomas Road, Suite 720,
Phoenix

Voice Class

Tuesday 3 – 3:30 pm;
September 6th - November 22
Muhammad Ali Parkinson
Research Center

Aquatics

Friday 1:30 – 2:30 pm;
September 9 - November 4
Muhammad Ali Parkinson
Research Center

Tai Chi

Thursday 11 am – 12 pm;
September 8 - November 17
Muhammad Ali Parkinson
Research Center

Scottsdale

Tai Chi

Thursday 10 – 11:00 am;
September 8 - November 17
Pueblo Norte - Auditorium
7090 E. Mescal St., Scottsdale

Exercise

The Art of Moving Exercise Class
Tuesday – 10:00 – 11:00 pm;
September 6 - November 22
Freedom Inn
15436 N. 64th Street
(Greenway & 64th St.)

Sun Cities

Tai Chi

Tuesday – 1 – 2:00 pm;
September 6 - November 22
Care from the Heart
9885 W. Union Hills Drive, Suite
100
(99th Ave & Union Hills)

Exercise

The Art of Moving Exercise Class
Thursday - 9:00 – 10:00 am;
September 8 - November 17
Care from the Heart
9885 W. Union Hills Drive, Suite
100
(99th Ave & Union Hills)

Exercise

The Art of Moving Exercise Class
Monday – 2 classes: 9:00-10:00,
10:00-11:00
September 12 - November 21
Shepherd of the Hills United
Methodist Church
13658 Meeker Blvd, Sun City West
(Meeker & R.H. Johnson)

Prescott

Exercise

The Art of Moving Exercise Class
Tuesday 11 am - 12 pm
Yoga Shalla
322 W. Gurley Street



ART OF MOVING

(Non-MAPC sponsored)
The following Art of Moving classes are also available in the valley at the following locations. The Muhammad Ali Parkinson Center does not directly sponsor these classes. If you are interested please call the appropriate contact. Class fees vary.

Peoria**Exercise**

Tuesday 2:00-3:00 pm
Arrowhead Community Hospital-
Wellness Connection
Instructor and Contact Person:
Ariel 602-973-8693

Scottsdale**Exercise**

Thursday – 2:00-3:00 pm
HealthSouth – Outpatient
(southwest side of the building)
9630 E. Shea Blvd.
Instructor: Melinda Theobald
Contact Person: Melinda Theobald
480- 551-5423

Aquatics

Wednesdays – 12:00-1:00 pm
HealthSouth – Outpatient
(southwest side of the building)
9630 E. Shea Blvd.
Instructor: Melinda Theobald
Contact Person: Melinda Theobald
480- 551-5423

Caregiver Workshops

If you are caring for someone with Parkinson's disease, or are planning to provide care for someone in the future, this workshop is highly recommended. The workshop is for caregivers only (arrangements have been made for people with PD to attend a concurrent program provided by MAPC staff). Topics include: wheelchair mobility, assisting someone out of their chair or wheelchair (transfers), tub/toilet transfers, car transfers; ambulation; swallowing problems, diet and nutrition; adaptive equipment for mobility (wheelchair and walker management), for feeding, for showering and bathing, etc; com-

munity resources; recognizing burnout and taking care of yourself, and any other topic of specific interest to the group.

Mesa (East)**Mesa Senior Center East**

Red Mountain Multi-Generation Center
7550 E. Adobe Road, Mesa, AZ
85207

Time: 9:00 am – 1:00 pm

Date: Friday, November 18

Peoria / Sun Cities**Freedom Plaza Retirement Community**

Dining Room - 7th Floor
13373 Palza Del Rio Blvd., Peoria,
AZ 85381

Time: 9:00 am – 1:00 pm

Date: Friday, November 11th

Fall Prevention**"A Matter of Balance"**

If you have trouble with falling, have a fear of falling or have restricted your activities in hopes of reducing your chances of falling, this session is for you. Based on a group program developed by the Boston University Roybal Center Consortium, the purpose of this program is to help people with PD reduce their fear of falling, thereby enhancing activity levels. This program offers a way to help learn more about fall prevention strategies; follow personal plans to carry out fall prevention strategies; and make changes which help reduce the fear of falling.

Sun Lakes / Chandler**Sun Lakes Health Center**

10440 E. Riggs Road (Riggs/Alma School), Sun Lakes, AZ

Time: Mondays, 10:00-12:00

Dates: January 23rd, 30th

Peoria**Freedom Plaza Retirement Community**

Dining Room - 7th Floor
13373 Palza Del Rio Blvd., Peoria,
AZ 85381

Time: Mondays, 10:00 am–12:00 pm

Date: December 5th & 12th

PD 101

Parkinson's 101 is a 4-week seminar course, 2 hours each session, for people with Parkinson's disease and their families. The course covers basic neurology and the symptoms of Parkinson's disease, medication, nutrition, exercise, mind-body connections such as sleep disorders and depression, caregiving, how to talk to your doctor and any other topics of interest to the group.

Instructors: Margaret Anne Coles
& Darolyn O' Donnell

Phoenix**Muhammad Ali Parkinson Center**

500 W. Thomas Rd, Suite 720
Phoenix, AZ 85013

Time: Wednesdays, 3 – 5 pm

Dates: September 14th, 21st, 28th
and October 5th

Sun Cities / Peoria**Freedom Plaza Retirement Community**

Dining Room - 7th Floor
13373 Palza Del Rio Blvd., Peoria,
AZ 85381

Time: Wednesdays, 10:00 am –
12:00 pm

Dates: October 19th & 26th and
November 2nd & 9th

Carefree / Cave Creek / North Scottsdale**Our Lady of Joy Catholic Church**

36811 N. Pima Road
Carefree, AZ 85377

Time: Wednesdays, 10:00 am –
12:00 pm

Dates: January 25th - February 15th

Mesa**The Springs of East Mesa**

Saguaro Room
6220 E. Broadway Rd
(Between Power & Recker Roads)
Mesa, AZ 85204

Time: Wednesdays, 10:00 am –
12:00 pm

Dates: March 1st - 22nd

Support Group Calendar

Contact Kris Watts at (602) 406-4921 for detailed information regarding meeting locations, dates and topics of a support group near you.

Specialty Groups

Caregiver Wellness Series

Muhammad Ali Parkinson Center
500 W. Thomas Rd Ste 720
Phoenix, AZ 85013
Every Tuesday, 1:30-2:30 pm
Facilitator: Kris Watts 602-406-4921
This is for caregivers only please. Each week a different caregiver needs will be addressed along with discussion time.

Deep Brain Stimulation (DBS)

Medtronic Neurological

2343 W Medtronic Way
Tempe, AZ 85284
Meets Every Other Month
This is for those who have, are going to have or would like to have the DBS surgery

Young Onset Families PD Groups

Desert Cross Lutheran Church
8600 S. McClintock Road
Tempe, AZ 85284
2nd Thursday of the Month,
7:00-8:30pm
This is for those with PD age 30-50

Young Onset Men's Group

Meets every other month
Call for meeting date, time, location and activity
This is for those with PD age 30-50

Young Onset Carepartner Group

Meets every other month
Call for meeting date, time, location and activity
This is for those whose spouse/partner are age 30-50 with PD

Singing Group

"The Tremble Clefs"

Scottsdale Civic Center Senior Center
7375 E. 2nd St.
Scottsdale, AZ 85251
Each Tuesday's a month, 4:00-6:00 pm



East Valley

Ahwatukee/Sun Lakes

Mountainview Lutheran Church
11002 S. 48th St.
Phoenix, AZ 85044
3rd Thursday of the Month, 1:00-2:30 pm
(Call first as some months the group meets in Sun Lakes)

Gilbert

Location TBD
2nd Friday of the Month, 1:00-3:00 pm

Chandler

Solera Community
6360 S Mountain Blvd.
Chandler, AZ 85249
3rd Tuesday of the Month, 2:00-3:30 pm

Mesa

Mesa Senior Center East

7550 E Adobe Rd
Mesa, AZ 85207
1st Monday of the Month, 1:00-3:00 pm
Mesa Senior Center
247 N. McDonald
Mesa, AZ 85201
3rd Monday of the Month, 1:30-3:00 pm

Sunland Village East

Mesa, AZ
3rd Tuesday of the Month, 10:00-11:30am

Central Scottsdale

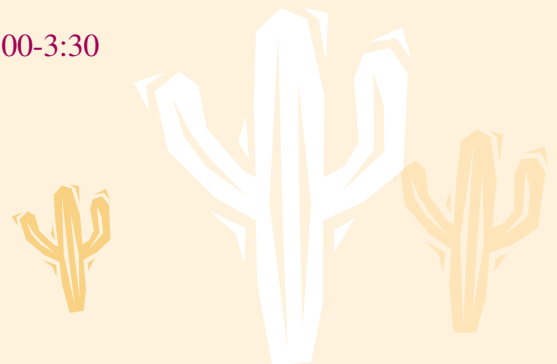
Brighton Gardens
6001 E. Thomas Rd
Scottsdale, AZ 85251
3rd Friday of the Month, 2:00-3:30 pm

North Scottsdale

HealthSouth Rehab Center
9630 E Shea Blvd.
Scottsdale, AZ 85260
2nd Friday of the Month, 1:30 pm

Tempe

Location TBD
4th Wednesday of the Month, 2:00-3:30 pm





Phoenix

North Central

Beatitudes Center D.O.A.R.
555 W. Glendale Ave,
Phoenix, AZ 85021
2nd Thursday of the Month, 1:30-3:00 pm

Black Mountain

Classic Residence Care Center
7501 E Thompson Peak Prky
Scottsdale, AZ
3rd Tuesday of the Month, 10:00-11:30 am

North Phoenix

Location TBD
1st Friday of the Month, 1:30-3:00 pm

West Valley

North Glendale

Location TBD
3rd Friday of the Month, 1:30-3:00 pm

Sun City West

Shepherd of the Hills United Methodist Church
13658 Meeker Blvd.
Sun City West, AZ 85375
3rd Tuesday of the Month, 3:00-4:30 pm

Goodyear

Revolving location, call for details
2nd Tuesday of the Month, 6:30-8:00 pm

Northern Arizona

Prescott

Trinity Presbyterian Church
630 park Ave.
Prescott, AZ 86303
3rd Thursday of the Month, 9:30-11:00 am

VA Hospital

ECRCII Conference Room
2nd Floor
Prescott, AZ 86303
4th Monday of the Month, 4:15- 5:30 pm

Verde Valley

Sedona Winds Retirement Village
405 Jacks Canyon Road
Village of Oak Creek
3rd Friday of the Month, 2:00pm

Payson

Call for details

Kingman

Kingman Regional Medical Center
Dell Webb Conference Room
1st Wednesday of the Month, 1:00-2:00 pm

Lake Havasu City

Senior Center
450 S Acoma Blvd.
Lake Havasu City, AZ 86403
2nd Wednesday of the Month, 1:30-3:30 pm

Outside of Arizona

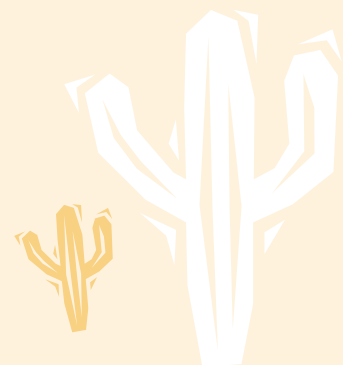
El Paso, TX

Sierra Medical Center Hospital
1625 Medical Center Drive
El Paso, TX. 79902
2nd Saturday of every month
Contact:
Edmundocastaneda@aol.com

Other Movement Disorders

Progressive Supranuclear Palsy

Muhammad Ali Parkinson Research Center
500 W. Thomas Rd Ste 720
Phoenix, AZ 85013
3rd Friday of the Month, 10:00-11:30am
Facilitator: Kris Watts 602-406-4921



Tai Chi: The Mind-Body Connection



Tai Chi has long been practiced by millions of people around the world to promote health and longevity. What makes Tai Chi so beneficial in improving health is gaining the attention of many people who live with Parkinson's disease and self-managing their disease by combining traditional medicine with eastern medicine. Western medicine tends to focus on medications to fix individual problems, while Eastern medicine focuses on ensuring balance and harmony throughout the body.

Tai chi integrates the mind and the body. According to William Kaplanidis, Department Head of Allied Arts at Pacific College, "Tai Chi is a philosophy, the philosophy of yin and yang, and through the movements, you are trying to become in harmony with nature and with your body and with your mind and bringing it all together so that you're becoming more one as opposed to separate." It is believed that this mind body connection is the reason that it is so effective.

Tai chi is thought to engage the brain through concentrated breathing. It involves the practice of combining routines of deep breathing, postures, stretching, swaying and other controlled movements combined with meditation. The gestures are large, slow and flowing as the practitioner drifts from one posture to the next, breathing deeply, in what looks like meditation in motion.

Tai Chi is usually practiced in classes led by a qualified instructor. Classes usually last about an hour and begin with warm-up exercises that focus on proper breathing techniques, postures and gentle stretching. Warm-up exercises progress to loosening the muscles by swaying, swinging the arms and shifting weight onto the legs. The instructor then leads the students through a series of Tai Chi movements that together comprise a "form". The class concludes with cool-down exercise, relaxation and often times meditation. The attire is simple- comfortable, relaxing clothing and flat shoes.

There are many benefits of practicing Tai Chi for people with Parkinson's disease. The gentle moves and unhurried pace are ideal for those with stiff joints, tight muscles and slowness of movement. Because it's low-impact, it may help lubricate your joints and strengthen your body in a way that's not as harmful as high-impact exercises such as jogging or aerobics. Depression and anxiety can be alleviated by the mental and psychological boost this type of relaxing exercise provides. By learning how to relax and concentrate intensely at the same time while actually using the body, Tai Chi is a great stress-releaser. It is also known to help people avoid falls by developing their balance, strengthening bones and muscles and building confidence. If standing is difficult, the moves can be done from the seated position. Other benefits include better sleep and lowered blood pressure.

By incorporating Tai Chi movements into everyday

Roxanne Reynolds is a Certified T'ai Chi Chih® and T'ai Chi Kung instructor who has been studying the Art of T'ai Chi since 1996. Her journey into Tai Chi began in Payson, where she had relocated to raise her teenage sons in a smaller town and to revamp her career life by shortening her long hours as a travel agent. Although she enjoyed the travel business immensely and was able to experience cultures and amazing geography around the globe, her hours were long and created great stress in her life. She was also in the midst of recuperating from a prior serious car accident almost 7 years earlier, which left her with residual neck pain and chronic discomfort. After hearing the words "you need spinal cord surgery", Roxanne went on a quest to heal herself in more natural and efficient ways and found Tai Chi.

Tai Chi brought amazing benefits to Roxanne's quality of life and health. She reduced her stress by finding her calm center. She also noticed that the practice alleviated her persistent neck pain. Since this new alternative approach was helping her in so many ways, she thought about what else she could learn to help herself and others and began to study nutrition. She received her Certificate in Nutritional Counseling through Westbrook University and has been spreading her knowledge through nutritional counseling.

Roxanne practices Tai Chi daily - it is a part of her daily existence. Tai Chi is something that can be practiced daily, but done less frequently will still generate health improvements. Roxanne's students from her PD class have noticed wellness benefits from their weekly participation and have requested an additional class. MAPRC classes in east Mesa are now held on Tuesday (in addition to Thursday). She recommends that beginners take a class from a qualified instructor. Knowledgeable instructors know how to adapt classes to meet the needs of the individuals.

The ancient and elegant system of Chinese exercise known as T'ai Chi is designed primarily to maintain and enhance health by giving full expression to the life force, or chi of the universe, embodied in each of us. The purpose of T'ai Chi is to generate, circulate and balance the body's energy. This results in improved circulation, breathing, flexibility, balance and coordination. Medical research has proven that it lowers blood pressure and reduces stress and tension. T'ai Chi employs movements that are slow and non-strenuous, so it can be done safely and easily by people of all ages. Tai Chi can be done from the seated position as well.

In addition to teaching T'ai Chi for Muhammad Ali Parkinson's Center, Roxanne leads Art of Moving classes and just completed a workshop with John Argue, author of Parkinson's Disease & the Art of Moving. These exercises help prevent, anticipate and delay symptoms of Parkinson's by maintaining optimum motor function by increasing strength, flexibility, balance and coordination plus improve communication, voice power and speech clarity. Roxanne also teaches at Adult Day Care Centers, retirement and senior communities, churches and local fitness centers.

Roxanne has two grown sons. One son is in the Army and recently returned home safely from Iraq, the other son lives in the Valley and is in management. She welcomed her first grandbaby this December, precious little 7-month-old Faith.

Roxanne's mission is to make a difference in people's lives. She genuinely cares about all of her students and wants them to have the best quality of life possible.

In addition to enjoying her work passionately as a hobby, Roxanne has many additional interests including gardening, music, photography and hiking with her pet boxer Molly.

life, people with Parkinson's can develop a manner of purposeful movement. Often times people with Parkinson's lose their ability to move automatically, so it becomes very important to train the mind and body to work together to perform movement. John Argue's Art of Moving method utilizes many Tai Chi moves to help people with Parkinson's disease integrate the exercises into everyday movements and functional tasks.

Researchers at Emory University are studying just how effective Tai Chi may be for people with Parkinson's disease. The trial is one of three new studies in the Emory University Center for Research on Complementary and Alternative Medicine (CAM) in Neurodegenerative Diseases. The National Center for Complementary and Alternative Medicine at the National Institutes of Health awarded the Emory a five-year grant for the Center and three individual research grants totaling \$5.7

million. Dr. Wolf, professor in the department of Rehabilitation Medicine, Emory University School of Medicine, has previously studied the effects of Tai Chi on the elderly. A three-year investigation, which concluded in 1994 found that Tai Chi exercises can significantly reduce the risk of falls among older people and may be beneficial in maintaining strength in people age 70 and older.

To start the practice of Tai Chi, it is recommended to take a class in order to practice and learn the forms. Although some individuals benefit from videos, videos lack the interactive communication with the instructor about the nuances of the art form, including special instruction for those who are less mobile or are have problems with coordination. The M.A.P.C. offers classes specifically for those with Parkinson's disease at a nominal fee of \$5.00 per class.

An Affair to Remember

The An Affair to Remember committee is pleased to announce its third annual fundraising gala will benefit West Valley programs of the Muhammad Ali Parkinson Center. This year's event will be held on Saturday, February 4, 2006 at Palmbrook Country Club in Sun City, Arizona. Rasheda Ali, the daughter of Muhammad Ali, is serving as Honorary Chair, and is scheduled to attend.

"We're thrilled to be working with the Muhammad Ali Parkinson Center this year," said Susan Dahlquist, Chair of the 2006 An Affair to Remember committee. "We had so many worthy non-profits apply to be our 2006 beneficiary, but this program really touched our hearts and we're proud to be able to contribute to their West Valley activities."

The Muhammad Ali Parkinson Center provides excellence in treatment, research and education for patients and families affected by Parkinson's disease and other movement disorders, regardless of ability to pay, ensuring that they enjoy the best possible quality of life.

The An Affair to Remember committee is comprised of West Valley businesses and professionals committed to enhancing the lives of older adults in the community. Each year, the An Affair to Remember gala raises funds for donation.

For more information, or to become a sponsor of the 2006 event, please contact Co-Chairs Susan Dahlquist of Sun View Care Center at (623) 977-6532 or Cindy Saverino of Interfaith Community Care at (623) 815-1100.



Recreation Update

This fall begins our third year of community programs throughout the Valley of the Sun. It is exciting to report that last year there were approximately 2200 attendances in the recreation and exercise program. We would like to thank all of you who made the call to enroll in classes designed to help you take control and manage the disease through exercise. Not only did you sign up, you faithfully showed up-rain or shine, week after week, and actively participated with your heart and soul, and sense of humor. We would also like to thank the dedicated caregivers that provided transportation, encouragement, support and assistance- you are all inspirational and a great support to each other. As a result, caregiver support groups are beginning to meet during class times.

We could not have community programs without our experienced, committed and knowledgeable instructors. We thank you for having such a sincere interest in helping people with Parkinson's disease and sharing your backgrounds in fitness and health to make a difference in other's lives. Many have been with us from the beginning, and we welcome the new instructors who are helping us with the expansion of the programs. This is a large valley to cover and we have a long way to go to meet our goals, but we will get there. Look for new classes in the Carefree and Avondale areas.

Finally, we would like to thank all of the churches and healthcare facilities that so kindly donate the space to hold safe classes. Your staff is always there to warmly greet us each season and assist us when needed.

We are very excited about this upcoming year and we encourage all of you to contact us with any ideas and suggestions for new programs. We always do our best to make great things happen, no matter how big or small, simple or grandiose.

Research Corner

Research Studies at Barrow Neurological Movement Disorders Clinic

Barrow Neurological Movement Disorders Clinic is currently enrolling patients in four clinical research studies for Parkinson's disease. These research studies include two for genetic research, one for reduction of dyskinesia with the use of an investigational medication and one medication "Off" time study. The "Off" time study is evaluating a medication that has been approved by the FDA and is available by prescription. The two medication studies offer "Open Label" follow up studies to all patients who complete the initial study. An "Open Label" study is one in which every patient receives the study drug and has no placebo.

There is no cost for any of the studies. All clinic visits, tests and medications are paid for by the study sponsors. The patients will be followed closely by the clinical research study staff Holly Shill, MD, Richard S. Burns, MD, Anwar Ahmed MD and Lynn L. Marlor BSN.

If you or someone you know might be interested in participating in a study or receiving further information please call Lynn L. Marlor, BSN Research Nurse Clinician at 602-406-6259.

Several studies are planned to start in the fall. Two new studies for early untreated Parkinson's disease, a study for advanced PD, a diagnostic PD study and a cervical dystonia study. We will also be conducting a Phase -1B inpatient study for moderately affected PD patients.

Barrow Neurological Movement Disorders Clinic is continually starting new research studies. Therefore if a patient is interested in participating in a project they should call the research nurse clinician at 602-406-6259 for complete information as these listings may change.

The studies currently enrolling are listed below:

DNA Repository for Patients with Parkinson's Disease: NET SS01-2003

The National Institute of Neurological Disorders and Stroke (NINDS) is the sponsor of this project.

The goal of the study is to bank DNA and Clinical data on individuals with Parkinson's disease and related disorders and healthy control subjects. The DNA samples in the repository will be available for research into the genetics and epidemiology of PD and related disorders. Investigators with studies deemed to be of scientific merit will be allowed to access the DNA samples and clinical information. Personal identifying information will not be released to any researchers. Healthy control subjects specifically spouses, siblings of spouses and spouses of siblings of participating PD and Parkinsonism patients will be targeted. If a healthy control is unavailable, other healthy controls may participate. The study consists of a single visit with completion of a form and a blood draw.

Genetic Linkage Study in Parkinson's disease: Gene-PD

The sponsor of this study is the National Institute of Health, National Institute of Neurological Disorders

The purpose of this study is to examine changes in DNA caused by Parkinson's disease to see how inheritance may play a role in neurological disease. Eligible subjects are sibling pairs and parents and children diagnosed with PD. A child with a deceased parent who has been diagnosed with PD is also eligible. Family members can be local or out of the area. If the relative is out of state the questionnaire can be administered by telephone and the blood samples drawn at their local lab. The study consists of one visit where subjects are asked to respond to a questionnaire and have blood samples drawn.

There are no limits to the number of participants.

A prospective, multi-center, randomized, open-label study with blinded raters to evaluate the effects of immediate versus delayed switch to Stalevo on motor function

and quality of life in patients with Parkinson's disease with end of dose wearing off: Stalevo/CELC200A

This study's purpose is to evaluate the effects of immediate versus delayed switch to Stalevo on motor function and quality of life in patients with Parkinson's disease with end of dose wearing off. All patients will receive open-label treatment with Stalevo tablets. Patients will be randomized on a 1:1 ratio into 2 groups; the immediate-switch group and the delayed switch group. The treatment phase will last up to 20 weeks. All patients completing this phase will be eligible to continue Stalevo for an additional 8 weeks.

A double blind, placebo-controlled, multicenter, multinational Phase III study to evaluate the safety and efficacy of Sarizotan HCL 1 mg bid in patients with Parkinson's disease suffering from treatment-associate dyskinesia: PADDY 2

This study is being done to test the efficacy and safety of the drug Sarizotan over several months in the treatment of dyskinesias. The study will last 34 weeks. Subjects will be randomized to Serizotan or placebo. An open label study will be offered to all patients who successfully complete the study.

Brain Bank Project

In an effort to learn more about PD, we are currently enrolling individuals with PD willing to donate their brains to science upon their death. There is no charge to enroll, all individuals will undergo yearly assessments of motor and cognitive function, and upon death a brain autopsy report will be provided to your family and doctors at no charge. Scientists at the Sun Health Research Institute in collaboration with Mayo Clinic Scottsdale will then proceed with neuropathologic and neurochemical studies of the brain looking for answers to many of the questions that surround the causes and improved treatment of PD. Contact the Brain Donor Program at 623-876-5328 for more information.

Parkinson's Disease and Movement Disorders Center, Mayo Clinic Scottsdale

All drug studies are free of charge to the patient, with all clinic visits, tests, and drug costs being paid for by the sponsors of the study. Studies conducted by Dr. Charles Adler, Dr. John Caviness, Dr. Gerry Evidente, Dr. Erika Driver-Dunckley, or Marlene Lind, RN.

Carbidopa/levodopa vs Stalevo (STRIDE-PD)

This study will compare carbidopa/levodopa (Sinemet) to carbidopa/levodopa/entacapone (Stalevo) in patients with Parkinson's disease requiring initiation of levodopa therapy. Patients must be between 30 and 70 years of age and have no prior exposure to levodopa or COMT inhibitors (Comtan or Tasmar). There will be 18 study visits over a 3 year period. Contact Dr. Adler or Marlene Lind, RN for more information, 480-301-4981.

Speech Perception in Parkinson's disease and Other Movement disorders

We are currently recruiting individuals with Parkinson's disease who have difficulty being understood when medication wears off or is not working. Subjects are asked to give a speech sample for one hour and a brief exam. Contact Dr. Caviness at 480-301-8100.

Study of Mitochondria Function (measured in the blood) in PD

PD patients with and without memory problems who are willing to have blood drawn at a single visit to study mitochondria function are being recruited. Patients will undergo a brief exam and have their blood drawn. This is a one time study and there is no cost. Contact Dr. Caviness at 480-301-8100.

We are also participating in the Brain Bank Project in collaboration with Sun Health and the MAPRC. Contact Dr. Adler at 480-301-8100.

Be a Santa to a Senior

Nov 26 to Dec 19, 2005

Home Instead Senior Care, Muhammad Ali Parkinson Center, and local companies will collaborate to bring Santa to seniors afflicted with Parkinson's disease who might be overlooked in the hustle and bustle of the holiday season.

The program will run from mid November to mid December 2005 with Christmas trees at participating Maricopa County companies, where employees will purchase the gifts. The trees will have ornaments that feature the first names of gift recipients and his/her gift requests.

If you are interested in participating and/or know of someone who might be interested (a "nominee"), you will be asked to provide the following information:

1. Your first name or the first name of your nominee
2. 3 items you want or you think your nominee might want (please include size, color preference and any other identifiers)

Please call Kris Watts at 602-406-4921 with the above information.

Those interested in volunteering for providing gifts and/or wrapping and distributing gifts should call Debbie Seplow, CSA President, Home Instead Senior care 602.588.7725.

MAPRC.com Website Statistics



We wanted to share some interesting statistics on the Muhammad Ali Parkinson Center website at www.MAPRC.com. Year to date website statistics between July 8, 2004 and July 14, 2005 revealed an average of 995 hits/day with 71 distinct visitors. This indicates that, on average, each visitor viewed about 14 pages on our website, an impressive number. The total hits during this period were 369,040 representing 26,279 distinct visitors. The peak time for website use is 4pm with usage gradually declining until about 4am. The 7-11am time slot is the least used time period.

It will be interesting to follow these statistics over time and validate what appears to be a trend of gradually increasing usage.

Equine Parkinson's Support Group

Are you actively involved with horses? Do you still ride or own horses?

If you answered yes to either of these questions and find that riding has become more difficult and less safe but you would still like to ride then join us for the Equine Parkinson's Support Group. The group is for those that would like to continue to ride or be around horses. Issues discussed will include skills that you and your horse can learn to make riding safer and techniques others have learned to deal with physical changes and riding.

If you are interested in participating in this group please contact Kris Watts at 602-406-4921.

Interested in Skiing?

If you have interest in learning how to ski or sharpen your skiing skills, please contact Darolyn O'Donnell at 602-406-6903. She is planning on facilitating a trip to Durango where she will help with hotel accommodations and obtaining skiing discounts. This trip is likely to be in the February, 2006 time frame, contingent on interest.



John Argue Workshop

Both the staff of the Muhammad Ali Parkinson Center and John Argue, founder of the Art of Moving, are committed to improving the quality of life for people with Parkinson's disease. The two share the same philosophy: to provide and promote exercise programs specific to Parkinson's disease on at least a weekly basis to help manage and delay the motor and non-motor symptoms. Using their combined energies, the two parties presented an Art of Moving instructor-training workshop this July to increase the knowledge base of community instructors and thereby enlist these dedicated individuals to help deliver the message.

John Argue's program is different from most exercise programs because so much of it is aimed at developing a mental ability. John's method recognizes the importance of learning to move and speak consciously because in Parkinson's disease, previously automatic actions are no longer reliable. Therefore, it is important to learn to move and speak in an artful manner. John defines an artful action as one that is graceful, mindful, and complete. Participants practice ways to bring these qualities to everyday tasks such as walking, turning, sitting down, standing up, and reaching. The program is based on ten lesson plans that are repeated and perfected until participants begin to move consciously in order to compensate for any decreased automatic movements.

The clinic was a great success and accomplished its objectives. It was well attended by future instructors from around the Valley and state, as well as others who traveled from as far as Idaho and New York. Even National Parkinson Foundation coordinators stopped in to meet and observe John Argue from as far away as Hawaii. All of the attendees came to experience and learn, and left excited to put their learning into action. Not only will this new pool of instructors enable the MAPC to expand its programs, other Art of Moving classes will soon be available in additional locations throughout the country.



Health & Wealth Raffle to Benefit St. Joseph's and Barrow



9950 prizes worth \$5.6M
78,000 single tickets for \$100
32,000 three-pack tickets for \$250

Important Dates

- Friday, Oct 21 – Cut-off for Early Bird Drawing
- Monday, Oct 31 – Early Bird Draw for two prize packages
- Midnight, Friday, Nov 18 – Cut-off to buy tickets for Final Draw
- Monday, Nov 28 – Final Draw

Top Prizes

- \$1M in cash
- Luxurious Chaparral Pines mountain home in Payson, plus golf cart and \$50,000 cash
- \$250,000 in cash
- Exotic, 7-night dream vacation for 8 people on Peter Island in the British Virgin Islands, plus \$35,000 in cash

Early Bird Prizes

- Custom-built Porsche 911 Carrera plus 5 night trip to Stuttgart, Germany to tour Porsche factory plus \$30,000 in cash
- "His and Hers Mercedes" – SLK 350 Roadster and MLV350 SUV models plus \$27,000 in cash

1 in 18 chance to win!

Raffle brochures mailed to AZ residents. Entries available for purchase 24X7 at www.HealthWealthRaffle.org or calling 1-800 390-9034.

Entries may also be purchased at kiosks in St. Joseph's Hospital or mailing a check or money order to Health & Wealth Raffle, P.O. Box 16377 Phoenix, AZ 85011-6377

See the Person Inside

April Curfman

If I were blind – I know you'd show me the way
If I were deaf – you'd find a way to communicate
But I stand here & shake – it's as if my body's in chains
The pills that I take – make it seem I'm OK

My steps are slow – I often hesitate
Embarrassed by my shuffling – limping – uneven gait
Don't walk on ahead – let your smiling eyes say
That I still walk with grace – see the thanks on my face

I'm a real lady – look in my eyes
Don't just see the disease – see the person inside
Parkinson's is part of me – but not why
I choose JOY, I choose HOPE, I choose LIFE
Let your respect show – leave me dignity of soul
It means more than you know

I cannot do the things that I used to do
I struggle each day – trying so hard to fight off the blues
And the humiliation – if you only knew
What it's like being stuck – in this body of mine

I'm the same person I was yesterday
Who walked tall and so proudly lead the way
Parkinson's took, I had not choice, had say
Still, I choose to make noise, to deny fear a voice
I choose to celebrate
A cure would be bliss – time won't wait so I live
Each day as a gift

It's an Age Thing Beginning September 4th on Channel 8

Sundays at 1:30pm

This 13 week program will explore:

- Staying Active
- Nursing Homes
- Senior Housing
- Working Past 65
- The Future of Aging
- Retirement Communities

More program information can be found by visiting <http://www.itsanagething.org/>

Program Sponsored by Home Instead Senior Care

"Caring for Seniors where they live, allowing them to age in place with dignity and respect."

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Greater Phoenix (602) 265-8228
South Valley & Scottsdale (480) 827-4343
www.homeinstead.com



Without these gentlemen,
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Charles Barrow's gift in 1959 enabled Dr. John Green and St. Joseph's to build the Barrow Neurological Institute.

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Our job is to show you how. Please contact the Office of Philanthropy at St. Joseph's Hospital and Medical Center (602-406-3041) for more information.

P.S. We are very tax deductible.

Southwest Parkinson Report, 500 West Thomas Road, Ste. 720, Phoenix, AZ 85013, (602) 406-4931

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St. Joseph's Hospital and Medical Center Marketing Department, layout

The Southwest Parkinson Report contains information provided as a service and is not intended to constitute medical advice or views. Patients should discuss information regarding medical management with their physician.

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**CHW Arizona
Muhammad Ali Parkinson Center
Resource Center**

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