

THE PARKINSON PATH



The Parkinson Association of Northern California is an organization dedicated to enhancing the lives of people with Parkinson's, their families and care partners.



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“Fuhgeddaboutit” – Parkinson’s Disease Dementia

By Michel Medina MD; Miguel Ruvalcaba MD; Suketu Khandhar MD, Kaiser Permanente, Northern California, North Valley

What Exactly is Dementia?

“Isn’t dementia just another word for Alzheimer’s? What do you mean by types of dementia—isn’t it all the same?”

When hearing the word “dementia,” it is easy to imagine an elderly individual who is losing their ability to remember their loved ones. The term almost always evokes a negative emotion. We would like to dispel any misinformation and misunderstandings about dementia. **Plainly stated, dementia is a term that describes a person who has had a significant decrease in their cognitive abilities to the point that it is affecting their independence and daily activities.** This can happen because of many different brain disorders, of which Alzheimer’s Disease (AD) is indeed the most common cause and responsible for over 50% of cases. However, less known is that Parkinson’s Disease can also lead to dementia and its presentation can be quite different from other types.

Lewy Body Dementia

“So just what is Parkinson’s Disease Dementia? I have heard that it is related to Lewy Body Dementia? Is this correct?”

The answer can be a bit confusing. In fact, you may still find that some clinicians use the terms LBD, PDD, and DLB interchangeably. However, the correct terms are:

- Lewy Body Dementia (LBD), is an umbrella term that refers to two types of dementias that start with different symptoms but are very similar:
 - Parkinson’s Disease Dementia (PDD), starts with motor symptoms, and dementia develops later. Most individuals with PD have cognitive impairment by 15 years of disease duration, either mild cognitive impairment (MCI) (36%) or PD dementia (48%)
 - Dementia with Lewy Bodies (DLB), starts with cognitive symptoms. Parkinsonian symptoms develop on average 2 years after onset of dementia, are often milder, and respond less well to medications.

“Did Robin Williams have LBD?”

Yes, he did, and his diagnosis brought LBD awareness to the forefront. After his death, Susan Schneider Williams (Robin’s wife), bravely revealed to the public that Robin’s brain autopsy revealed diffuse Lewy Bodies consistent with advanced stages of LBD. Susan continues to be an advocate for LBD awareness, research, and education.

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The Parkinson Path is published four times a year by the Parkinson Association of Northern California.

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Message from the Executive Director

PANC: 2022 In Review

2022 found the Parkinson Association of Northern California (PANC) successful in dealing with the repercussions of COVID. We came through relatively healthy, and proactively moving into the future.

Although some of our support groups folded due to the lack of in-person opportunities during COVID, a number of groups converted to virtual meetings. We are pleased to report that many new groups were initiated this past year and a couple that folded have revived! PANC ended 2022 with a net surplus of Support Groups leaving us with 39 PANC-affiliated entities that provide hands-on support throughout the region. The first Spanish speaking support group is now operational in Sacramento which just held its third meeting for an extremely appreciative audience.

2022's PANC Board of Directors was a dynamic working group with a broad range of experience and an earnest level of dedication to furthering the work of the organization. The members have tirelessly been dedicated to the work of PANC including the execution of another extremely successful annual education conference. An enhanced Support Group committee provides a monthly facilitator meeting, developed individualized brochures and business cards for each support group and coordinated an extensive list of speakers who are available to Support Group meetings. The 2022 Directors firmed up our financial position, hired me as Executive Director, to manage the organization, and envisioned new programming and initiatives that will be coming to life in 2023.

Here are a few other milestones that PANC hit last year:

- Respite grants awarded: 80
- Individual contributions made to PANC: \$136,365
- Largest individual donation in 2022: \$10,000
- Because of a matching donor our best Big Day of Giving
- More than 64 sponsors and exhibitors supporting our projects and events
- Attendees to Annual Conference In-person: 586/Virtual: 221
- The Lions Club Cancel Out Parkinson's (COP) Walk was better than ever!
- New Project Initiated: Bridging the Gap – Meeting the Need
- Four quarterly issues of the Parkinson Path newsletter with the lead article translated into Spanish
- Outreach Coordinator funded by a Davis Phinney grant to support outreach to the Spanish speaking community
- Directors voted to update the website and upgrade back-end technology (2023)

After 26 years in operation PANC has continued to be a stable and invaluable community resource for the Parkinson's community. Thank you to the many individuals who help us do this work. We look forward to serving in 2023 and many years ahead.



Jan Whitney, Executive Director for PANC



Like us on Facebook
Follow us on twitter



Registration Now Open!

6th Annual Cancel Out Parkinson's (COP) Walk

April 1 at Maidu Park in Roseville

The Embarcadero Lion's Club is hosting another uplifting event of movement and friendship benefiting PANC and our local PD community at Maidu Park in Roseville on Saturday, April 1.

In honor of Robert G. Smith, a long-time Lion's Club member and Sacramento deputy sheriff who courageously fought his battle with Parkinson's disease, the COP Walk is a festive opportunity to pull out your sneakers, stroll with old and new friends alike, learn from vendors, share lunch, and sport your 2023 Cop Walk t-shirt (included in early registration fee).

100% of the event's proceeds benefit PANC's NorCal support groups, respite grants, educational initiatives, and more. Register as an individual, as a team in honor of your special someone, or by proxy with a donation in support of loved ones. The walk itself is a gentle course designed specifically for people with Parkinson's to be successful.

Visit www.rgsmith.com for event details and to register. Prospective sponsors and exhibitors can email Jan at jan@panctoday.com. We look forward to walking beside you in support of the many PD champions across Northern California!



REGISTRATION NOW OPEN!

**6TH ANNUAL
ROBERT G. SMITH
WALK TO
CANCEL OUT PARKINSON'S**

**APRIL 1, 2023
MAIDU PARK, ROSEVILLE**

Join for a special day of celebration,
friendship, and determination!

Registration/exhibitor booths -- 9:00 am
Walk -- 10:30 am
Lunch & Awards -- 11:30 am - 1 pm

Hosted by the Embarcadero Lion's Club and benefiting the
services of the Parkinson Association of Northern California (PANC)

Registration starts at \$40
Information, registration, and donation link at
www.rgsmith.org



“Fuhgeddaboutit” – Parkinson’s Disease Dementia

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Unique Features of PDD that is different from AD

The typical cognitive pattern of PDD is problems with attention, executive function, and visuospatial ability. These are the main issues early on; more significant memory impairment occurs later. There are also two distinct cognitive features commonly seen in PDD but not in AD:

Cognitive fluctuations: Often described as having good and bad days cognitively. Person may appear confused, staring off into space, and be difficult to get their attention. These are profound changes in attention and alertness that can last hours and then resolve on their own. The changes can be so drastic that sometimes we hear that others are concerned whether the individual is ‘faking’ their symptoms because they can seem so much better in between these episodes! Fluctuations in cognition are common in PDD but not in AD.

Visuospatial dysfunction: not a problem with the eyes, but rather the visual part of the brain that makes sense of the information collected by the eyes. May have seen an eye doctor and been told that the eyes are working well but still having problems with reading, judging distances, and reaching for objects.

Although not ‘cognitive’ symptoms per se, recurrent visual hallucinations and a history of REM sleep behavior disorder are also much more common in PDD compared to AD.

Medications

- Medications should be reviewed to identify those that could worsen symptoms or are best avoided in older adults with dementia.
 - Particularly in the context of PD dementia, the potential contribution of antiparkinsonian medications should be assessed. Anticholinergic medications used to treat tremors (trihexyphenidyl, benztropine), dopamine agonists, and amantadine are associated with worsened cognition and psychosis. Gradual tapering of these medications can result in cognitive-behavioral improvement
 - Anticholinergic/antimuscarinic (eg for genitourinary symptoms). Of note that Benadryl/diphenhydramine is highly anticholinergic and should be avoided. Tylenol PM contains diphenhydramine.

- Antipsychotic/neuroleptics—in circumstances when these must be used: Quetiapine (Seroquel), Pimavanserin (Nuplazid), and Clozapine (Clozaril) are preferred. Pimavanserin is FDA approved for PD psychosis
- Benzodiazepines—can worsen cognitive function, increase risk of falls, and have a risk of potentially being addictive.
- Tricyclic antidepressants (TCAs)—these are some of the earliest antidepressants developed; they have fallen out of favor and mostly replaced by newer antidepressant medications (SSRIs, SNRIs, etc) when it comes to treatment of depression. Sometimes, TCAs are used to treat conditions other than depression, such as neuropathic pain—and this is more likely a reason that you may encounter these types of medications.
- Treatment: No degenerative dementia, such as PDD, can be cured with medications. However, medications have a role in symptom management and improving of quality of life:
 - Cholinesterase inhibitors are used for the cognitive symptoms. They can be helpful as well for the cognitive fluctuations and hallucinations.
 - These include medications such as Donepezil (Aricept), Rivastigmine (Exelon), and Galantamine (Razadyne). Rivastigmine is FDA approved for PD dementia.
 - Memantine (Namenda) is different than the above medications and is FDA approved for moderate to severe AD. It is also sometimes used in PDD and DLB as recent studies show that it can be helpful as well.



Non-Medication Recommendations:

“Acceptance does not mean Resignation.”

“Our Challenges don’t define us. Our Actions do.”

—Michael J. Fox

We cannot emphasize enough how useful a regimen of physical, mental, and social stimulation can be. The old saying ‘Use it or lose it’ applies to cognitive function as much as it does for motor symptoms in PD. These work best when combined and from a cognitive standpoint, the goal is to use exercise to oxygenate the brain and then use the social and mental activities to ‘exercise’ the brain.

Here’s a few tips:

Exercise

Go on a walk! You don’t need to start running marathons or lifting big, heavy weights. 20-30 minutes of daily walking outside is great for brain health and your motor symptoms. As you get stronger, try taking longer walks and increasing your endurance. Getting sun and fresh air can do wonders and can improve your mood as well.

Social Engagement

Play a card game! Try to organize game nights with friends and family. This can be a good “exercise” for your brain, while also being fun. There are many types of games out there to try, so you’ll surely find a game that suits you and your friends. Even just having a conversation with a friend is helpful. Telling stories and jokes is a good way to keep your brain AND your sense of humor strong!

Supplements

Take your multivitamin! You will hear and read about many new supplements that are specifically created for “brain health.” There are many out there and it is hard to keep track! Many of these supplements, unfortunately, don’t have strong data to support their claims. A multivitamin has most of what you need, including Vitamin D (which you get on your walks!) and vitamin B12, which is good for your nerve health. At the end of the day, a healthy, balanced diet is most important.

PANC Represented at the Michael J Fox Foundation, Parkinson’s IQ + You Conference

By Myron Jantzen

In early December, PANC President Myron Jantzen and Executive Director Jan Whitney attended the Michael J Fox Foundation’s regional meeting in Oakland to represent the organization. Myron and Jan hosted a booth in the vendor hall which was located next door to the main auditorium. The PANC table was placed at the entrance to the hall and it quickly became a very popular destination for conference attendees. We had many people stop and talk to us, take our newsletters and brochures, and want to learn more about PANC and other information. Almost 70 folks signed up to receive our newsletter and almost as many were interested in our support groups.

PANC is making efforts to attend more community events to spread the word about our mission and were thrilled to be included by the MJF Foundation at this significant gathering of PD constituents. If you know of other large community events where PANC could potentially host a table at no charge to help spread the word, please email Jan at jan@panctoday.org.

Together, We’re
A Force For Good

May 4, 2023

BigDayofGiving.org

Big
Day of
Giving



“Olvidalo” (Fuhgeddaboutit)–Demencia del Parkinson

By Michel Medina MD; Miguel Ruvalcaba MD; Suketu Khandhar MD, Kaiser Permanente, Northern California, North Valley

¿Exactamente qué es Demencia?

“¿Qué no es demencia simplemente otra palabra para Alzheimer? ¿Qué se implica por tipos de demencia—¿no son todos lo mismo?”

Al escuchar la palabra “demencia” es fácil imaginar a un anciano que pierde la habilidad de reconocer a sus seres queridos. El término casi siempre evoca una emoción negativa. Deseamos descartar malentendidos y desinformación tocante demencia. **Para aclarar, demencia es un término que describe a una persona con reducción significativa en su habilidad cognitiva al punto que afecta su independencia y actividades cotidianas.** Esto puede suceder por varios trastornos cerebrales diferentes, de los cuáles el Alzheimer (AD) es la causa más común y responsable por más del 50% de los casos. Sin embargo, es menos conocido que Parkinson también puede llevar a la demencia y su presentación puede ser distinta de otros tipos.

Demencia Lewy Body

“¿Qué es la Demencia del Parkinson? He oído que está relacionado a Demencia Lewy Body. ¿Es cierto?”

La respuesta puede ser algo confusa. De hecho, aún se encuentran algunos médicos que usan los términos LBD, PDD, y DLB indistintamente. Sin embargo, los términos correctos son:

- Demencia Lewy Body (LBD), un término general que refiere a dos tipos de demencias que empiezan con diferentes síntomas pero que son muy similares:
 - La Demencia de Parkinson (PDD), empieza con síntomas motrices y la demencia se desarrolla después. Muchos individuos con PD padecen discapacidad cognitiva a los 15 años de padecer de la enfermedad, ya sea discapacidad cognitiva leve (MCI) (36%) o demencia PD (48%)
 - Demencia con Lewy Bodies (DLB), empieza con síntomas cognitivos. Síntomas de Parkinson se desarrollan en por medio de 2 años tras el inicio de la demencia, tienden a ser más leves, y no responden tan bien a medicaciones.

“¿Tenía Robin Williams LBD?”

Sí padecía de esto, y su diagnóstico trajo conocimiento de LBD al frente. Después de su muerte, Susan Schneider

Williams (esposa de Robin), valientemente reveló al público que la autopsia del cerebro de Robin reveló Lewy Bodies esparcidos consistente con etapas avanzadas de LBD. Susan sigue abogando por conciencia, estudios y educación de LBD.

Características Únicas de PDD que son diferentes de AD

El patrón cognitivo típico de PDD son problemas de atención, función ejecutiva, y habilidad visual/espacial. Estos son los problemas principales al inicio; después ocurre más discapacidad significativa de memoria. También hay dos distintas características cognitivas comúnmente vistas en PDD pero no en AD:

Fluctuaciones cognitivas: Se describe como tener buenos y malos días cognitivamente. La persona puede aparentar confundida, tener mirada ausente, y ser difícil de captar su atención. Estos son cambios profundos de atención y lucidez que pueden durar horas y luego resolverse por sí mismos. Los cambios pueden ser tan drásticos que a veces oímos que hay aquellos que se preocupan de que el individuo esté ‘fingiendo’ sus síntomas porque ¡parecen estar mucho mejor entre estos episodios! Las fluctuaciones en cognición son comunes con PDD pero no en AD.

Disfunción Visual Espacial: no es un problema con los ojos, sino con la parte visual del cerebro que le da sentido a la información que los ojos transmiten. Puede haber ido con un oculista y le puede haber dicho que sus ojos están bien pero aún padece problemas con poder leer, juzgar distancias, y en agarrar objetos.

Aunque no son síntomas ‘cognitivos’ per se, alucinaciones visuales recurrentes y un historial de trastornos de sueño REM también son mucho más comunes en PDD comparado a AD.

Medicaciones

- Deben revisar medicinas para identificar las que pueden empeorar los síntomas o que son mejor evitar en personas mayores con demencia.
 - Particularmente en el contexto de demencia PD, deben evaluar el posible aporte de medicina contra el Parkinson. Medicina anticolinérgica usada para los temblores (trihexyphenidyl, bztropine), dopamine agonists, y

amantadine son asociadas con empeorar cognición y psicosis. Una reducción gradual de estas medicinas pueden resultar en mejoría cognitiva y de conducta.

- Anticolinérgica/“antimuscarinic” (p.ej. para síntomas genitourinarias). De nota que Benadryl/ diphenhydramine es sumamente anticolinérgico y se debe evitar. Tylenol PM contiene diphenhydramine.
- Antipsicótico/neurolépticos—en circunstancias que se deben usar: de preferencia Quetiapine (Seroquel), Pimavanserin (Nuplazid), y Clozapine (Clozaril). Pimavanserin es aprobado por FDA para psicosis PD
- Benzodiazepines—puede empeorar la función cognitiva, aumentar el riesgo de caerse y correr el riesgo de ser posiblemente adictivo.
- Antidepresivos tricíclicos (TCAs)—son de los primeros antidepresivos creados; han perdido aceptación son reemplazados por antidepresivos más nuevos (SSRIs, SNRIs, etc) para el tratamiento de depresión. A veces usan TCAs para tratar condiciones aparte de depresión, tal como dolor neuropático—y esta es la razón más probable que encuentre estos tipos de medicinas.
- Tratamiento: La demencia degenerativa, tal como PDD, no se cura con medicinas. Sin embargo, medicinas ayudan con los síntomas y mejoran la calidad de vida:
 - Inhibidores de “Cholinesterase” se usan para síntomas cognitivos. También pueden ser útiles para fluctuaciones cognitivas y alucinaciones.
 - Esto incluye las medicinas Donepezil (Aricept), Rivastigmine (Exelon), y Galantamine (Razadyne). FDA ha aprobado Rivastigmine para la demencia PD.
 - Memantine (Namenda) es diferente de la medicinas mencionadas y aprobada por FDA para AD moderado a severo. A veces se usa en PDD y DLB ya que recientes estudios muestran que puede ser eficaz también.

Recomendaciones No Farmacológicas:

“Aceptar no implica resignarse.”

“Nuestros Desafíos no nos definen. Sino Nuestras Acciones.” —Michael J. Fox

No dejamos de decir lo importante que es tener un régimen físico, mental, y de estímulo social. El dicho ‘úsalo o piérdelo’ se aplica tanto a función cognitiva como a síntomas motrices en PD. Estos funcionan mejor en combinación y desde el punto de vista cognitivo, la



meta es usar el ejercicio para oxigenar el cerebro y usar la actividad social y mental para ‘ejercer’ el cerebro.

Unos consejos:

Ejercicio

¡Salga a caminar! No necesita correr maratones ni levantar grandes pesas. Caminar 20-30 minutos diarios afuera es excelente para su salud cerebral y sus síntomas motrices. Al ponerse más fuerte, intente caminatas más largas y aumente su aguante. Salir al sol y aire fresco puede mejorar su ánimo también.

Compromiso Social

¡Juegue diferentes juegos! Organice noches de juego con amigos y la familia. Puede ser buen “ejercicio” para su cerebro, a la vez que se divierte. Hay muchos tipos de juegos así que seguramente encontrará uno que le guste a Ud. y sus amigos. Aún conversar con un amigo es de beneficio. Relatar cuentos y chistes es un buen modo de mantener su cerebro ¡Y su sentido de humor fuerte!

Suplementos

¡Tome su multivitamina! Va a oír y leer sobre muchos nuevos suplementos específicamente creados para “salud cerebral.” ¡Hay muchos y es difícil mantenerse al tanto! Muchos de estos suplementos no tienen fuertes datos para apoyar sus afirmaciones. La multivitamina tiene mucho de lo que necesita, incluyendo Vitamina D (¡qué se consigue al caminar afuera!) y vitamina B12, que es buena para sus nervios. Al fin de cuentas una dieta sana es lo más importante.

Honor, Memorial, Support and Celebration

November 2022 – January 2023

IN HONOR/SUPPORT/CELEBRATION OF

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Thank You! Your tax-deductible donation to PANC ensures the programs and services we provide to our Northern California community are there when you need them. Looking for other ways to donate? Ask us about stock transfers, auto donations, and including PANC in insurance policies.

2022–A Productive Year for PANC and the Support Groups

PANC's Motto is "BUILDING COMMUNITY FOR THE JOURNEY".

A key component in the Parkinson community is the support group, with research showing that social isolation worsens the function of PwP as much as exercise improves it. In the fall of 2021, PANC's board established a Support Group Advisory Committee dedicated to working closely with our affiliated support groups.

In the United States, it is reported that 30% of Parkinson's support groups ceased operation in the last 2 years, many due to Covid. Some of our support groups lost their leadership as well. We are happy to report that new leaders are volunteering to continue these groups, including Steve Briscoe in Woodland, Christine Grmolyes In Lincoln, Mary Ann Cardy in Eskaton Carmichael, Susan Lopez-Payan in the Sacramento area young onset group, Karen Hancock re-engaging in Auburn, and most recently Kati Rozack with the Roseville Maidu group. In addition, the Placerville group was re-established, though we still need a long-term facilitator there. We discovered a wonderful support group in Humboldt County, led by Ken and Rose Bond, and they accepted our invitation to affiliate with PANC. With a Davis Phinney Foundation grant, PANC hired Kimberly Arredondo-Blanco, who enabled our outreach to the Hispanic community, and established our first Hispanic support group. We are now in contact with still independent small groups In Ukiah, Jackson and Fairfield, and are talking to a person interested in restarting a group In San Rafael. The end result is that we now have as many active affiliated support groups as before the pandemic.

Responding to past facilitator surveys by our Board, we have started a special program to help our facilitators with their work, called "Bridging the Gap - Meeting the Need". with the generous sponsorships of Abbott Neurosciences, AbbVie, and Supernus Pharmaceuticals, we have been able to supply our facilitators with customized local brochures and business cards to help publicize their groups. Moreover, the committee worked with PANC's Medical Advisory Panel to create an after-visit article

on the benefits of joining a support group. They are now giving these to their patients. In addition, we have created new, easy-to-understand educational articles in English and Spanish, for our facilitators and the public, with many more to come!

A big ask from the facilitators was help finding speakers for their group meetings. Jennifer Westoby has compiled a large speakers list of professional people interested in talking to support groups, and it has been distributed. Dr Lowe worked with Dr. Laurie Mischley, and free subscriptions to her Parkinson's School have been provided to all our facilitators. Working with the Davis Phinney Foundation, many facilitators are now using their Every Victory Counts book on living well with Parkinson's to educate their members and lead group discussions.

The icing on the cake is our monthly facilitator meeting, via Zoom, where, information, successes and challenges are shared, and the attendees come together as a facilitator community. Now we look forward to our facilitator workshop on May 6th, 2023.

We thank everyone for their hard work, support, and interest!

PANC Support Group Advisory Committee

*Frederick Lowe, M.D. - Chair, Jennifer Westoby - Co-Chair
Marcie Larkey, Danielle Hand-Nichols, Dr. Ralph Sett,
Myron Jantzen, and Carolyn Loveridge*



Regional Support Groups

For additional information, visit www.panctoday.org

Don't see a support group in your area? Let us help you start one!

Contact us at 916-357-6641 or panc@panctoday.org

EN ESPAÑOL

Grupo De Apoyo para los Hispanos y/o Latinos con la Enfermedad de Parkinson

4 to Martes 6:00 p.m. (Reunión de Zoom)

Kimberly Arredondo 916-884-7767,
kimberly@panctoday.org

Grupo De Apoyo para los Hispanos y/o Latinos con la Enfermedad de Parkinson

3er martes 6:00 p.m.

ACC Senior Center, 7334 Park City Dr., Sacramento

Kimberly Arredondo 916-884-7767,
kimberly@panctoday.org

BUTTE COUNTY

Chico Parkinson's Support Group

1st Wednesday (In person)

Sycamore Glen Senior Community
1199 Diablo Ave, Chico

3rd Wednesday 1:00 p.m. (Zoom)

Terry Donnelly 650-743-6871,
tmdonnelly68@gmail.com

Bob Murray 530-321-6157, ordferry@yahoo.com

EL DORADO COUNTY

El Dorado Hills/Folsom Parkinson's Carepartner Support Group

1st and 3rd Friday 11:30 a.m.

Round Table Pizza, 2793 E Bidwell St., #100, Folsom
Larry Alver 916-933-2465, ldalver@sbcglobal.net

Folsom/El Dorado Hills Parkinson's Support Group

2nd Thursday 1:30 p.m. (Zoom)

4th Monday 10:30 a.m. (In person and Zoom)
Folsom Senior Center, 48 Natoma Drive, Folsom
Donna Rixmann 916-712-9642,
donna@yogapeace.net

Placerville Parkinson's Support Group

3rd Tuesday 2:00 p.m.

First Lutheran Church, 1200 Pinecrest Ct., Placerville
Kimberly Arredondo 916-357-6641,
kimberly@panctoday.org

HUMBOLDT COUNTY

Humboldt Parkinson's Carepartner Support Group

1st and 3rd Wednesday 9:00 a.m. (Zoom)

Tom & Lisa Bethune 707-822-7923,
thomasbethune@gmail.com

Humboldt Parkinson's Support Group

Every Wednesday 9:00 a.m. (Zoom)

Ken & Rose Bond 707-826-7764,
ken95524@suddenlink.net

Tom & Lisa Bethune 707-822-7923,
thomasbethune@gmail.com

NAPA COUNTY

Napa Valley Parkinson's Support Group

2nd Sunday 4:00 p.m.

New Life Napa Church, 2525 1st Street, Napa
Colleen Winters 209-602-1536,
cfwinters@yahoo.com

NEVADA COUNTY

Grass Valley/Nevada City Parkinson's Carepartner Support Group

4th Thursday 11:00 a.m.

Communal Cafe, 233 Broad Street, Nevada City
Jennifer Westoby 530-268-2563,
jennifer.westoby@gmail.com

Grass Valley/Nevada City Parkinson's Support Group

3rd Thursday 1:15 p.m.

Nevada County Library, Gene Albaugh Room
980 Helling Way, Nevada City
Jennifer Westoby 530-268-2563,
jennifer.westoby@gmail.com

Truckee Parkinson's Support Group

1st Friday 11:45 a.m.

Tahoe Forest Center for Health
11012 Donner Pass Road, Truckee
Ellen & John Roumasset 650-759-3666,
dr.eroumasset@gmail.com

PLACER COUNTY

Auburn Parkinson's Carepartner Support Group

3rd Tuesday 11:30 a.m.

The Club Car Restaurant, 836 Lincoln Way, Auburn
Karen Hancock 530-885-0950,
karen@hancockonline.net

Auburn Parkinson's Support Group

2nd Tuesday 11:30 a.m.

Awful Annie's Restaurant, 13460 Lincoln Way, Auburn
Karen Hancock 530-885-0950,
karen@hancockonline.net

Lincoln Parkinson's Support Group

3rd Tuesday 10:00 a.m.

Lincoln Hills Community Church
950 E Joiner Pkwy., Lincoln Hills
Christine Grmolyes 916-769-0449,
christine@seniorcrs.com

Roseville Parkinson's Support Group-Maidu Area

1st Tuesday 1:30 p.m.

Maidu Community Center
1550 Maidu Drive, Roseville
Kati Rozak 916-799-9381

kati.rozak@brightstarcare.com

Roseville-West Parkinson's Support Group

4th Tuesday 11:00 a.m.

St. John's Episcopal Church
2351 Pleasant Grove Blvd., Roseville
Ken and Arlene Fujino 916-474-4688,
kmfujino@outlook.com

Diane Herold 916-788-9110

PANC Advisory Support Group Facilitators and attendees should be aware that not all medications, treatments or theories about Parkinson's disease are 'right' for every person. If presentations or discussions within your Group raise issues in your mind regarding your personal condition or treatment plan, you are advised to bring those questions to your treating physician for further exploration prior to making any changes in your medications or routines.

SACRAMENTO COUNTY

Elk Grove Parkinson's Support Group

3rd Wednesday 10:30 a.m. - 12:00 p.m.

Senior Center of Elk Grove
8230 Civic Center Dr, #100, Elk Grove
Myron Jantzen 916-804-6497, mpjantzen@aol.com
Sherry Reser 916-320-7189,
SherryLReser@gmail.com

El Dorado Hills/Folsom Parkinson's Carepartner Support Group

1st and 3rd Friday 11:30 a.m.

Round Table Pizza, 2793 E Bidwell St., #100, Folsom
Larry Alver 916-933-2465, ldalver@sbcglobal.net

Folsom/El Dorado Hills Parkinson's Support Group

2nd Thur 1:30 p.m. (Zoom)

4th Monday 10:30 a.m. (In person and Zoom)
Folsom Senior Center, 48 Natoma Drive, Folsom
Donna Rixmann 916-712-9642,
donna@yogapeace.net

Gold River Lewy Body Dementia Support Group

2nd Thursday 10:00 a.m. (Google Meet)

Denise Davis 800-272-3900, denise.davis@alz.org

Sacramento-Arden Arcade Parkinson's Support Group

4th Thursday 9:30 a.m. social / 10:00 a.m. meeting

Dante Event Center, 2330 Fair Oaks Blvd., Sacramento
Jim Morris 916-359-4859, jimor1940@gmail.com
Betty Tronson bettytronson@sbcglobal.net

Sacramento Area Young Onset PD Group

1st Tuesday 6:30 p.m.

St. Michael's Episcopal Church
2140 Mission Avenue, Carmichael
Susan Lopez-Payan, Danielle Hand-Nicholls,
Sacyopd@hotmail.com

Sacramento Parkinson's Carepartner Support Group

3rd Tuesday 11:00 a.m. (Zoom)

Gain Saetern 916-728-9333, gsaetern@deloro.org

Sacramento Post DBS Support Group

Once a month see panctoday.org/support-groups.html for flyer with dates-topics

Email HS-DBS@ucdavis.edu for Zoom meeting link

For more information call 916-731-1610

Sacramento South Area Parkinson's Support Group

2nd Thursday 10:00 a.m.

ACC Senior Center, 7334 Park City Dr., Sacramento
Jerry Miyamoto 916-441-1020,
jmiyamoto72@gmail.com
Faye Baya-Wright 916-910-5152,
fayeja21@gmail.com

SAN JOAQUIN COUNTY

Lodi Parkinson's Carepartner Support Group

3rd Monday 10:00 a.m.

Gracepoint Church,
801 S. Lower Sacramento Road, Lodi
Charlene Martin 916-600-5769,
lodiparkinsonsgroup@gmail.com

Lodi Parkinson's Support Group

1st Monday 10:00 a.m.
Gracepoint Church,
 801 S. Lower Sacramento Road, Lodi
Maureen Olsen 209-329-1185
Robin Bray 209-269-1080,
 lodiparkinsonsgroup@gmail.com

SAN MATEO COUNTY**Foster City Parkinson's Support Group**

Atria Senior Living, 707 Thayer Ln., Foster City
Will Corkern 650-534-7799, wcorkern@aol.com

SHASTA COUNTY**Redding Parkinson's Support Group**

1st and 3rd Friday 9:30 a.m.
Coffee in Enterprise Park, 4000 Victor Avenue, Redding
 2nd Friday 1:30–3:00 p.m.
Church of Christ, 3434 North Street, Anderson
Kim Hawkins 530-945-7628,
 kim.reddingpsg@gmail.com

SOLANO COUNTY**Benicia Parkinson's Support Group**

2nd Saturday 10:00 a.m.
Benicia Lutheran Church, 201 Raymond Drive, Benicia
Bradford Miller 707-515-9216,
 bradfordmiller807@gmail.com

Vacaville Parkinson's Support Group

4th Wednesday 1:30 p.m.
McBride Center, 91 Town Square Place, Vacaville
Rick Newman 707-999-6845,
 newman.rick@yahoo.com
John Alonso 707-689-6613,
 johnalonso2@gmail.com

SONOMA COUNTY**Parkinson's Support Group of Sonoma County**

2nd Saturday 1:00 p.m.
Christchurch United Methodist
 1717 Yulupa Avenue, Santa Rosa
Marc Alexander 707-431-8767,
 malexander109@comcast.net
 Carepartners Group 1st and 3rd Friday 10:45 a.m.
 (Zoom)
 Women's Group 3rd Wednesday 12:30 p.m.
Marie Kay Hansen briza1@comcast.net

STANISLAUS COUNTY**Modesto Parkinson's Support Group**

3rd Wednesday 1:30 p.m.
Trinity Presbyterian Church, Room 505
 1600 Carver Road, Modesto
Beth Bollinger 209-668-9434,
 sbboyandcagirl@hotmail.com

SUTTER, YUBA, COLUSA COUNTIES**Tri County Parkinson's Support Group**

2nd Monday 1:00 p.m.
Sutter North Clinic
 969 Plumas Street #208, Yuba City
Susan Vantress 530-701-0039,
 suze2u@hotmail.com
Victoria Baker Victoriabaker530@gmail.com

YOLO COUNTY**Davis Parkinson's Carepartner Support Group**

2nd and 4th Thursday 11:00 a.m.
Davis Senior Center, Games Room
 646 A Street, Davis
Karen Eagan 530-564-4323,
 kareneagan747@gmail.com

Davis Parkinson's Support Group

3rd Thursday 1:30 p.m.
Davis Senior Center, 646 A Street, Davis
Susan Curry 530-304-9927 smcurry@sbcglobal.net

Woodland Parkinson's Support Group

1st Wed 1:30–3:00 p.m.
Woodland Community Center
 2001 East Street, Woodland
Steve Briscoe hellostevebriscoe@gmail.com

More PANC Happenings

In Honor of Parkinson Awareness Month

April is Parkinson's Awareness Month

Parkinson's Awareness Month has been observed since 1983. April was chosen to honor Dr. James Parkinson, a neurologist, who published a paper in 1817 identifying the disease in an article called *An Essay on the Shaking Palsy*.

April 6–29

Once again Archival Gallery, in East Sacramento, is participating in Parkinson's Awareness Month with a group show 'Gone Fishin' in memory of Ron Wagner* and supporting the Parkinson Association of Northern California (PANC). PANC educational materials will be available throughout the show.

Archival Gallery
 3223 Folsom Blvd, Sacramento, CA 95816
 Gallery Hours: Tuesdays–Saturdays, 11:00–4:00 p.m.
 Second Saturday Reception: April 8, 5:00–8:00 p.m.

* Wagner, a truly amazing man, was one of the artists featured in the April 2022 exhibition featuring Artists with Parkinson's or associated diseases.

Redding Parkinson Support Group Annual Conference

"Staying Healthy with Parkinson's Disease"
 Friday, April 14th, 8:30 a.m. – 4:00 p.m.
The Gaia Hotel & Spa
 4125 Riverside Place, Anderson, CA
For more information, call 530-945-7628

Benicia Parkinson's Awareness Rally and Memorial Walk around the city's Central Park

Saturday, April 15th
For more information, contact Bradford Miller at bradfordmiller807@gmail.com or 707-515-9216

Parkinson's Awareness Book Displays in Public Libraries

Cities include Benicia, Carmichael and Vallejo. The display will include PANC educational articles, support group brochures, and a curated book list.



PARKINSON ASSOCIATION OF NORTHERN CALIFORNIA
 1024 Iron Point Road #1036
 Folsom, CA 95630

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The Parkinson Association of Northern California (PANC) exists because of your contributions. We rely on donations to provide programs and services for people with Parkinson’s disease, their families and care-partners throughout the Northern California region. Your donation is a great investment and helps us remain a vibrant partner in the Parkinson’s support community.

Donations or memorial gifts of any size are most welcome.

Please accept my tax-deductible donation of \$ _____

Name: _____

Address: _____

Telephone number: _____

This gift is _____ in honor of _____ in memory of

Name: _____

Send acknowledgment to: _____

Please make checks payable to Parkinson Association of Northern California and send to:
1024 Iron Point Rd, Ste. 1046, Folsom, CA 95630

We also accept donations with a credit card online or by phone. Visit www.panctoday.org to complete your secure transaction. For information or assistance please call 916-357-6641.

