

Parkinson's Patients Support Groups, Inc.

Spring Quarterly 2007

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Will a Parkinson's "OFF" State Interrupt Your Lives Today?

If you have Parkinson's disease and are experiencing daily mobility problems, even with your levodopa medication, you may want to consider this study.

For more than 30 years, many Parkinson's disease (PD) patients have benefited from taking a levodopa-based medication. Known to facilitate dopamine levels in the brain, levodopa helps most patients by reducing the symptoms of slowness, stiffness and tremor associated with the disease. However, up to 50% of patients who are treated long-term with levodopa experience a "wearing off" complication that results in motor fluctuations and problems with mobility.

Today, local doctors are conducting a medical research study evaluating the safety and effectiveness of an investigational medication for the treatment of Parkinson's disease, when used in conjunction with a levodopa-based medication.

Qualified participants will receive a study-related medical evaluation and the investigational medication at no cost. Reimbursement for time and travel may also be provided.

To pre-qualify for this study, you must:

- ?? Be 30 years of age or older, AND
- ?? Have a medical diagnosis of Parkinson's disease, AND
- ?? Currently be taking a levodopa-based medication for your Parkinson's disease, AND
- ?? Be experiencing at least 2 hours of "OFF" time each day.

For More Information on This Local Study, Please Contact Parkinson's Institute – 408.734.2800

Wednesday, February 7, 2007 (SF Chronicle) Marijuana-like substance in brain could help treat Parkinson's, researchers say

Carl T. Hall, Chronicle Science Writer

(02-07) 10:59 PST SAN FRANCISCO -- Neuroscientists have found that a substance similar to the active ingredient in marijuana but produced naturally in the brain helps to control mobility -- and may offer a novel target for treating Parkinson's disease.

Stanford University researchers reported today in the journal *Nature* that marijuana-like "endocannabinoids" -- one of the many chemicals used in the brain to transmit signals from one neuron to another -- form part of the neural machinery that directs normal movement. THC, the active ingredient in marijuana, activates the same class of receptors as the natural chemicals but has effects throughout the brain, and no demonstrated benefits in terms of improved mobility.

In the latest study, experiments in mice found that a shortage of the natural marijuana-like compounds in a deep part of the brain known as the striatum seemed to help explain the tremors, rigidity and other symptoms of Parkinson's, one of the most common neurological disorders. Researchers hope to use the insight to find new ways to alleviate symptoms and perhaps improve current treatments.

The shortages arise when another signaling system in the brain, driven by the neurotransmitter dopamine, starts to break down. Without enough

dopamine, the scientists found, the striatum stops producing endocannabinoids in the proper amount, creating an imbalance in the brain's delicate motor-control system. Researchers used mice specially bred to have brain cells that could be identified and recorded when they were given toxins to mimic the symptoms of Parkinson's. A drug combination -- potentially a precursor of a new human therapy -- was administered to test the findings.

One drug, called quinpirole, boosted dopamine -- a standard medical strategy in human cases. The other drug -- known as KDS-4103, being developed as a possible pain medication by an Irvine biotech company called Kadmus Pharmaceuticals Inc. -- blocked the action of an enzyme that degrades endocannabinoids in the brain. In effect, this allowed the brains of the rodents to make better use of the natural signaling molecules of movement.

The result of this one-two punch was a dramatic improvement in symptoms, according to the study authors, Dr. Robert Malenka and Anatol C. Kreitzer. "The hope is that if the same sorts of things are going on in human brains, that maybe by using these drugs that boost levels of endocannabinoids, you will reduce the amount of dopamine drugs people have to be taking, or extend the usefulness of dopamine drugs, with less side effects," Malenka, who was senior author of the *Nature* study, said during an interview.

If the combination proves to have a more potent effect than standard therapy in patients, "it might allow people to move better, walk better, play tennis better," Malenka added. That would take clinical studies to prove, and possibly years of preclinical research to even reach the human testing stage.

Independent experts said it was an intriguing new lead for a condition that afflicts 1.5 million people in the United States. Endocannabinoids were long suspected to play a critical role in the neurobiology of movement. The new study "specifies one of the exact mechanisms by which endocannabinoids can influence motion and mobility in Parkinson's," said Dr. George Kunos, who has studied the brain chemicals as scientific director of the National Institute on Alcoholism

and Alcohol Abuse, a part of the National Institutes of Health. Authors of the *Nature* study "raise the possibility of a combination therapy that would allow the dopamine part of the combination to be reduced," Kunos said, which "could reduce the unwanted side effects, and that could make a difference." One thing the findings don't suggest is that smoking marijuana might help alleviate Parkinson's. Malenka described the brain's natural system as an exquisitely sensitive combination of neurons and signaling molecules that inhibits movement, and a parallel circuit that activates movement. Tiny amounts of the endocannabinoids work in the inhibitory circuit. Any useful therapy would have to be given in ways that enhance the desired inhibition, without overwhelming the balance of the brain's control apparatus, he said. Smoking marijuana, by contrast, floods cannabinoid receptors scattered throughout the brain with THC, the active ingredient in the plant that mimics the brain's own signaling compound. That has potent effects but there's no evidence it can help problems in the dopamine-endocannabinoid system affected by Parkinson's disease. "When you smoke a joint, or have THC on the brain, you're activating these receptors indiscriminately, all over the place," Malenka said. "What you want is a more sophisticated and subtle perturbation of this endocannabinoid signaling system than you can get by smoking a joint. That's like hitting your brain with a sledgehammer."

Magnolia-Millbrae

*Are you missing endocannabinoids
to control your movement?*

**Join us for a lecture by the
renowned Dr. Robert Malenka**

Nationally recognized authority in basic research on
diseases of the brain

**“Breakthrough research in cracking the peculiar
pathology of Parkinson’s”**

Thursday, March 8, 2007 – 1:30 -3:00 PM

**The Magnolia of Millbrae
201 Chadbourne Avenue, Millbrae**

RSVP: Leon Rosenthal – 650.348.3480

Characteristics of increased risk for compulsive gambling linked to Parkinson's disease medications

12-Feb-2007(EurekAlert) - Patients with Parkinson's disease who are younger when they develop the condition, have a personality trait known as novelty-seeking, or whose personal or family history includes alcohol abuse may be more likely to develop pathological gambling as a side effect of medications used to treat their condition, according to a report in the February issue of Archives of Neurology, one of the JAMA/Archives journals.

Behaviors associated with impulse control—including compulsive shopping, hypersexuality, binge eating and pathological gambling—have been associated with dopamine agonists, medications used to treat Parkinson's disease. In studies examining the relationship between dopamine agonists and compulsive gambling, the likelihood of gambling problems was unrelated to the medication dosage. This suggests that an underlying trait may interact with the drugs and make an individual more vulnerable to this adverse effect.

Valerie Voon, M.D., National Institute of Neurological Disorders and Stroke, Bethesda, Md., and colleagues compared the characteristics of 21 patients with Parkinson's disease who developed pathological gambling habits after beginning to take dopamine agonists with 42 patients with Parkinson's disease who did not develop compulsive behaviors. The participants, who all visited a clinic in Toronto, Canada, between June 2003 and October 2005, were examined by neurologists and completed assessment scales that measured their levels of impulsivity, substance abuse, mood and anxiety disorders. An additional inventory measured the extent to which the patients displayed novelty-seeking traits, characterized by impulsive and risk-taking behavior and excitement in response to new experiences.

"In keeping with our hypothesis, patients with Parkinson's disease who developed pathological gambling when receiving dopamine agonists had a younger age at Parkinson's disease onset, higher

novelty-seeking scores, a personal or immediate family history of alcohol use disorders and impaired planning on an impulsivity scale," the authors write. "A robust association was found with medication-induced mania [a psychiatric disorder involving excessive physical and mental activity and impulsive behavior]." Pathological gambling was also weakly linked to younger age Parkinson's disease that began in the brain's left hemisphere and a high score on a scale measuring the impulsiveness of behaviors.

www.nwpcf.org

TEVA Neuroscience Announces AZILECT® Is Now Available In Pharmacies — The First, Once-Daily Treatment For Parkinson's Disease

Kansas City, MO. (7/31/2006) Teva Neuroscience announced today the launch of AZILECT® (rasagiline tablets), the first, once daily treatment for Parkinson's disease (PD) now available in pharmacies by prescription only. This is important news for the majority (83%) of respondents in a survey of those living with PD who report taking their PD medications up to five times/day.

AZILECT® is indicated for use as initial monotherapy in early PD and as adjunct therapy to levodopa in moderate to advanced disease. Based on survey results of 276 persons living with PD, Teva has created the *PD Exercise Kit* in conjunction with the launch of AZILECT®. Teva is committed to providing resources that can help people effectively manage PD. The Kit includes information on the availability of once-daily AZILECT®, an online fitness tracker, and PD-specific exercise options created by actress and health and fitness guru Marilu Henner. The company is also offering the AZILECT® My Exercise Contest with the opportunity to win a trip to the Parkinson's Unity Walk. For more information, visit www.azilect.com.

AZILECT® was approved by the Food & Drug Administration May 17, 2006.

***This newsletter was assembled by
The Morgan Center. Thank You!***

You Just Found Out You Have Parkinson's disease

By Phil McCrillis

You just found out that you probably have Parkinson's Disease. "Probably" because in the best of cases the only real way to know is to track the symptoms and their response to treatment. Already you are lucky. You can read this article. You can plan and think and consult with people. Many can't.

But it is a low blow when you get the news. You don't hear all that's said. The only picture that comes up in your mind is old people, heads bent over, shuffling along or slumped in a wheel chair. Active life as you know it seems to be slipping away.

At first the people who find out about the diagnosis add to the confusion. They are wondering how you are and watching you to see, remembering scattered comments of an alarming nature they have heard about PD.

And you with your own concerns think. What do I do now? What's going to happen to me? How will I handle this strange disease? There are lots of answers to your questions. Medications and treatments that are available. Things that the PD patient can do to slow the progress of the disease that are available in the months and years ahead. **But the crucial thing now is your attitude.** The stronger you are, the better the chances are that you will be able to cope with the development of the disease. We are not talking about cure here. I mean we can use our skills, reactions, our ingenuity, our imagination to thwart the progress of the disease

Remember your body may be able to do anything it always has done. It just doesn't know it because it's not getting the signals. So your job is to find ways to get the message to your body to do the things you want it to do.

What's a good attitude, you ask?

1. **The first thing is to determine that you will *not* give in to the disease and let it take over your life.** Make no mistake, it will if you let it. It will make you fearful and tentative. It will convince you that you can no longer do the things you have always done. But it is not an acceptable choice to become a PD victim. If you find yourself talking about it all the time, beware.

2. **It takes courage to beat this disease.** If it can make you afraid, it will. To face up to your need for help while not losing your sense of your own independence takes guts.
3. **It takes humor.** A lot of the PD experiences are downright funny. For example, while you might not find it funny that your tremor causes you to spray peas everywhere, your grandchildren will probably love it.
4. **It takes generosity.** If you stay focused only on yourself, PD will defeat you. But if you can place the needs of others before yours it will go a long way toward keeping you from being a victim. Visit someone who can't get out. Help some one else, not a member of your family. Become a volunteer, anywhere you can.

PD is not a nice disease. Now at the beginning is the time to put it in its place. If you can take charge now, you should be able to enjoy a long and full life.

Phil McCrillis recently joined PPSG as a Board Member. Prior to joining the Board, Phil had been volunteering at the Parkinson's Institute, greeting patients when they came in for doctors' appointments. Being a patient himself, he understood that a person may feel lost and confused when first being diagnosed with a disease, so it was important that he showed the support.

At the January Board meeting, Phil was asked to write an article about what he did and what he thought that was helpful for other Parkinson's patients. We hope this article gives you inspiration!

On February 1, 2007, Phil passed away suddenly! Good-bye, Phil! We will miss you!

Energy Saving Tip from Marge Shively:

PG&E has a group called Enery Partners. They help low and fixed income folks weatherize and make their homes more enrgy efficient to save money on their bills. They inspect the home, get contractors and bring the home up to "code, all for FREE. My mom's home had insulation put in the attic, the water heater wrapped and strapped, furnace fixed, weather stripping, new light bulbs and shower heads put in. In some cities they will help get energy efficient appliances too. These folks can be on a special billing because of the fixed income.

For information call 1-800-813-1975

Reverend Philip E. McCrillis

The **Reverend Philip Edward McCrillis**, a retired priest and former vicar for parish and pastoral ministries of the Diocese of San Jose, died in the peace of the Lord on Thursday, February 1, 2007, at Stanford Hospital in Palo Alto, California, at the age of 72.

Philip McCrillis was born on December 24, 1934, in Los Angeles, California. His parents were Elton Newell McCrillis and Mary Elizabeth Crowley.

He entered St. Joseph's College Seminary in Mountain View where he finished his philosophical studies. He took his theological courses at St. Patrick's Seminary in Menlo Park.

On June 6, 1961, he was ordained to the priesthood for the Archdiocese of San Francisco by Bishop Merlin Guilfoyle in St. Mary's Cathedral on Van Ness Avenue.

His first assignment as priest was associate pastor at St. Anne of the Sunset Church in San Francisco. Subsequently, he was appointed associate pastor at St. Albert the Great Parish in Palo Alto, St. Thomas of Canterbury Parish in San Jose, and St. Nicholas Parish in Los Altos. Later he was appointed director of field education at St. Patrick's Seminary. He also served as chaplain of San Jose State University Newman Center.

In 1991, he was made administrator and subsequently, a year after, pastor of Holy Spirit Parish in Almaden. In 1996, he was appointed vicar for parish and pastoral ministries of the Diocese of San Jose.

Father McCrillis retired from active ministry on July 1, 2003.

He is survived by his sister Sally, brother-in-law Tom, their children and grandchildren, and the many people whose lives he changed for good.

His mother, Elizabeth, who had retired from teaching last November, died earlier on the same day Father McCrillis died. She was buried in Southern California on Tuesday, February 6, 2007.

Visit our website: www.ppsg.org

Stress Management

What can I do about stress?

Stress is an unavoidable part of life. While some stress is normal and even necessary, too much of it can affect your quality of life and your health. You can reduce the effects of stress by identifying its causes in your life, understanding and accepting what you can control and what you can't, and learning stress management skills.

Stress affects each of us differently, and the most effective ways to relieve it are different for each person. You can try different methods to find out which ones work best for you. Some techniques for relieving stress include:

Exercise. Regular physical activity is one of the most effective stress management techniques.

Writing. Research shows that expressing yourself in writing can be a very effective way to reduce your stress level.

Expressing your feelings. Talking, laughing, crying, and expressing anger are normal parts of the emotional healing process.

Doing something you enjoy. A hobby or other healthy leisure activity that is meaningful to you can help you relax. Volunteer work or work that helps others can be a powerful stress reliever.

Body-centered relaxation. This includes breathing exercises, muscle relaxation exercises, massage, aromatherapy, yoga, and the traditional Chinese relaxation exercises tai chi and qi gong.

Mindfulness activities. These include learning how to relax your body through self-hypnosis, meditation, imagery exercises, listening to relaxing music, and using humor to reduce stress.

In addition to relieving stress, it is also important to reduce the amount of stress in your life. **Ways to reduce and avoid unnecessary stress include:**

Time management techniques. Scheduling and prioritizing your commitments can make you more productive and efficient.

Effective coping strategies. Identifying ways of dealing with stress that don't really help and

finding the best ways to cope can reduce your stress level.

Healthy lifestyle choices. Balancing your obligations, getting plenty of rest, eating well, not smoking, and limiting how much alcohol you drink are all important in reducing stress.

Support from friends and family. People who have a strong social support network are better able to handle life's challenges.

Changing ways of thinking. Stopping thoughts that cause stress, working on problem solving, and learning to communicate well are all useful tools for reducing stress.

Stress can be overwhelming. While confiding in a friend or family member can be helpful, you may also want to see a professional counselor.

Written by **Stuart J. Bryson**; edited from www.health.yahoo.com

In Honor

PPSG recently received gift donations honoring the following individuals: Philip Croel, Victor Pachoco, Parkinson's patients, Paul Mason, Larry McDermott, and Bernice Sarina

In Memory

PPSG recently received gift donations in memory of the following individuals: Mark Brown, Herbert S. Chu, Kenneth Cope, Betty Gado, Barbara Harris, Lillian Harris, Art Kezer, Dave Lorentson, Jack Moresco, David Norman, Lowell Pannell, Ilga Rajeff, Dave Russell, Elliot Schrier, Gus Sotir, Willy Stok, and Ruth R. Young.

Thank you so much for your donations! Please use return address labels, to help us acknowledge your donations properly. Your generous contributions go to support newsletters, education and community awareness of Parkinson's disease.

If you would like to be removed from our mailing list or know someone who would like to be included, please take a minute, call us at **408.734.1593**, or e-mail ppsginfo@yahoo.com, and let us know.

PPSG Board Meetings

You are welcome to drop by our board meetings and share ideas with us! We meet on the **3rd Monday** of the month between **1:30 and 3:30 PM** at the Parkinson's Institute. To confirm meeting dates and time, please call us at 408.734.1593. If you are planning to attend, please call Charmaine Eng at 408.723.8116 (dial *82 before the number).

PPSG SUPPORT GROUPS

Berkeley 3rd Mon 10-12 North Berkeley Senior Center, 1901 Hearst Av, Roddy Raikow 510-231-1998 or Mitzi Cahn 510-527-9075 **Fremont** 4th Mon 7:00 pm Fremont Senior Center 40086 Paseo Padre Parkway, Lettie Webb 510-656-6393 or Bob Coon 510-794-7988 **Fremont Caregivers** Contact Nancy Rothschild, Caregiver Project Coordinator, 510-574-2035 **Marin County** 4th Tue most mo., 2-4 Redwoods Auditorium 40 Camino Alto, Mill Valley, Gloria Rashti 415-381-6680. Redwoods 415-383-2741 **Mt. Diablo Parkinson's Network General Meetings** 2nd Sat 10-12, Grace Presbyterian Church, 2100 Tice Valley Blvd, Walnut Creek, Nancy Walls, 510-236-7065, Philip Wheeler, 510-527-3588, Margy Hansell, 925-939-4210, or Ronalee Spear, 925-284-2189 **Oakland** 1st Thur 1:30-3:30 Easter Seals Bay Area, 180 Grand Av, Suite 300, Robert Lemon 510-526-2078 **Petaluma** Last Sat 1:30-3:30 Sunrise of Petaluma, 815 Wood Sorrel Dr, John & Mamie Strong 707.763.3522 **Pleasanton Tri-Valley** 2nd Sat 10-12, Senior Center, 5353 Sunol Blvd, Norm & Jackie Bardsley 925-244-1231 or 925-831-9940 **San Leandro** 1st Thur (except Jul & Aug) 10-11:30, (NEW LOCATION) San Lorenzo Community Church, 945 Paseo Grande, Harry Santi 510-351-3224 **Sonoma County** 1st Sat (not Jan, Jul, Sep) 1-3, First Congregational Ch, 2000 Humboldt St, Santa Rosa, Ron & Colleen Trowse 707-526-4373 **Vallejo** 3rd Mon (except 2nd Mon, Jan & Feb) 2:00 Kaiser Medical Center, 975 Sereno Drive, Evelyn Fox 707-644-3390

---PENINSULA REGION---

Daly City 1st Tue 3-4 Doelger Senior Center, 101 Lake Merced Blvd, Leonard Ke 415-587-1285 **Los Altos Young Parkinson's Support Group** 2nd Sat 10-12, United Methodist Ch/Los Altos, Foothill at Magdalena, Dean Prescott 408-738-2505 or dean53@yahoo.com **Magnolia-Peninsula** 2nd Thur 1:30 main conference room Magnolia Apart, 201 Chadbourne Av, Millbrae, Leon Rosenthal, 650-348-3480 **Palo Alto** 2nd Wed 2:00-3:30 Avenidas Senior Center dining room, 450 Bryant St, 650-289-5400 **Redwood City Positive People Against Parkinson's** 3rd Fri 1-2:30, (No meetings Aug, Nov, Dec) Sequoia Hospital, Health & Wellnes Ctr, 749 Brewster Ave, Tom Constantino 650-366-7166 **(NEW) San Francisco Caregivers** Thur (varies) 12-12:50 Veterans Affairs Med Ctr, Parkinson's Ctr conf room, Bldg 203 Room 1B26A, Susan Heath 415-379-5530 or Aliza Benditsky 415-221-4810 X3470 **San Mateo Atypical Parkinsonism (PSP, LBD, MSA, CBD) Bay Area Caregivers** Sundays 5-7 about every 6 weeks, Mimi's Café 2208 Bridgepointe Parkway, San Mateo, Robin Riddle 650-233-9277 or rriddle@stanfordalumni.org **San Mateo Caregivers** 1st Wed 2:30-4:30 Ellsworth Room 100 San

Mateo Dr., Call Carol Hoffman, Mills Health Center 800-654-9966 **Sunnyvale** 2nd Wed 1-3 First United Methodist Ch, 535 Old San Francisco Rd, Phyllis & Henry Ng 408-733-5648 **YOPD** (Young Onset Parkinson's Disease) 2nd Tue 6:30-8:00, Board Room, Lucille Packard Child Hosp, 725 Welch Road, Palo Alto, Bill Lev 831-662-3825

---SOUTHERN REGION---

Hollister 1st Tue 1:30-3:30 First Presbyterian Ch, 2066 Cienea Road, Shirley Kennedy 831-637-3839 or John Skinner 831-637-6755 **Monterey** 3rd Mon 2:30-4:00 SHARE Room, Monterey Adult School, 200 Coe Av, Seaside, Helen Garrett 831-657-4241 or Kathy Warthan 831-372-7510 **Salinas** 4th Wed 2:00-3:30 Salinas Adult School, 20 Sherwood Place, Sherry Whitcomb, 831-796-6920 **San Jose-Berryessa** 1st Wed 1:00-2:30 Berryessa Community Center, 3050 Berryessa Rd, Bob & Jane Pomeroy 408-263-8485 **San Jose Caregivers** usually 4th Wed 1:30-3:30 St Francis Episcopal Church, 1205 Pine Ave, Charmaine Eng 408-723-8116 **San Jose-Willow Glen** 1st Fri 10-12 St Francis Episcopal Church, 1205 Pine Ave, Betty Havens 408-269-2167 **Santa Cruz** 1st Wed 12:30-2:00 St. Stephen's Lutheran Church, 2500 Soquel Ave, David Donahoe 831-479-4485 **Saratoga** 3rd Tue 2-4 19449 Via Real, Lois McPherson 408-867-1807

---CENTRAL VALLEY REGION---

Fresno, North 2nd Sat 10 at San Joaquin Valley Rehab Hosp 7173 N. Sharon Ave, Dottie Rosenberg 559-322-0138 **Merced** 4th Thur 10AM (Nov 17, Dec no meeting) Mission Gardens 1450 E. 27th St., Amie Marchini (sp?) 209-384-3300 **Modesto** 3rd Wed 1:30-3:00 Centenary United Methodist Ch, Fireside Room 1911 Toyon Av, JoAnn & David Ryan 209-529-5643 or davejoann@sbcglobal.net **(NEW) Pine Grove** 1st & 3rd Thur 2-4 Calvary Chapel Patio Bldg 18400 Ridge Road, Sarah Johnson 209-296-2575 **Roseville** 1st Tues 1:30-3:00 Roseville Maidu Comm Ctr, 1550 Maidu Drive, Linda Krisa 916-261-1321 **Tulare-Kings** 1st Fri 10:30 Visalia United Methodist Church, 5200 W. Caldwell Av, Mary Dickerson 559-622-9044, Church Office 559-627-1660 **(FORMING) Turlock** Donald Jackson 209-606-9127 November 22, 2006

EXERCISE CLASSES

Berkeley: Vista College, Joan Nielsen, 510-981-2800
Berkeley: Mon. 10:30-11:30 & 1-2:30, John Argue 510-985-2645
Daly City: Tue./Thur. 1-2, Doelger Sr. Ctr. Pat Armstrong 650-991-8012
Gilroy: Gavilan College, Dave Ellis, 408-848-4878
Hayward: Kaiser Permanente, Wed. 10-11:30, John Argue 510-985-2645
Kensington: Tue. 1:30-3:00, John Argue 510-985-2645
Marin Cty: Tue. 10-11:30; 12-1:30. Osher Marin JCC, San Rafael. 415-479-2000
Monterey: Monterey Peninsula College, Mark Clements, 831-646-4231
Orinda: Tue. & Fri. 1:00-2:30, In Forma Gym. Dean Dallman 925-283-5019
Palo Alto: CAR, Aquatic Therapy, 650-494-1480
Palo Alto: Mon. & Fri., 9:15-10:15, Sr. Ctr. 450 Bryant St. 650-289-5400

Redwood City: Canada College, 4200 Farm Hill Blvd. Barbara McCarthy 650-306-3473

Salinas: Hartnell College, Melissa Stave, 831-755-6876
Saratoga: Mon. – Fri. 9-12; 1:30-3, W. Valley Comm. Coll. Joan 408-741-2420

San Bruno: Mon. & Wed. 1:10-2:30, Tue. & Thur. 12:35-1:50, Skyline Coll. Bess 650-738-4286

San Francisco: Fri. 11-12, SFSU, Marsha Melnick 415-338-1360.

San Jose: Mon. & Wed. 10:30-11:45, Houge Ctr. Tue. & Thur. 10-11:45, Evergreen Ctr. Deanna, 408-369-6435

San Jose: Easter Seals Comm Ctr. Aquatic Exercise programs, 408-295-0228

San Jose: Evergreen Valley College, Rich Wagner, 408-274-7900 X 6447

San Mateo: College of San Mateo, 1700 W. Hillsdale Blvd., John Hogan, 650-574-6469

Sunnyvale: Tue. & Thur. 9-10, Sr. Ctr. 550 Remington Dr. Ruth Hanes 408-864-8873

Sunnyvale: Wed. 10-12 noon, The Parkinson's Institute, 1170 Morse Ave., Marilyn Basham: 408-734-2800.

Exercise Classes – New Addition

Palo Alto

Tai Chi/Chi Kung for Parkinson's in the Atrium at Stanford Medical Center

Every Saturday 10:00 am – 11:30 am (short break inbetween).

Mwezo & Jane

Kujiweza Healing Arts Institute

Call Jane: (408) 315-1179

Email: Kujiweza@sjyogataichi.com

San Jose

The Villages Golf & Country Club

Parkinson's Exercise Program (PEP)

Balance, Gait, Posture, Tai Chi/Chi Kung

Mondays 11:30 – 12:30 pm

Optional 3 day program

Mwezo & Jane

Kujiweza Healing Arts Institute

Call Jane: (408) 315-1179

Email: Kujiweza@sjyogataichi.com

Los Gatos

The Terraces of Los Gatos

Parkinson's Learning Lifelong Useful Skills (PLLUS)

Balance, gait, posture & Tai Chi/Chi Kung

Mon. 2:00 pm & Wed. 10:30 am

Mwezo & Jane

Kujiweza Healing Arts Institute

Call Jane: (408) 315-1179

Email: Kujiweza@sjyogataichi.com

**“The secret of life isn't what happens to you,
but what you do with what happens to you.”**

-Norman Vincent Peale

Disclaimer

This document is published to promote a greater awareness of the problems caused by Parkinson's disease. Neither the Parkinson's Patients Support Groups, Inc., its members and employees, nor the individuals involved in its production make any warranty, express or implied, assume any liability or responsibility for accuracy, completeness, or usefulness of any information or represent that it will not infringe privately owned rights. Mention of any product, material, or service shall not, nor it is intended to imply approval, disapproval, or fitness for any particular use.

Sunnyvale

3/14 Speaker **Art Schwartz** will talk to us about how using sea-sick patches helps his PD symptoms.

4/11 Speaker TBA.

Board Members

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Dean Prescott

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Larry Naritomi

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Steven Russell

Le Sotir

Magnolia-Millbrae

3/8 **Dr. Robert Malenka** from Stanford University will talk about his newly-published research on Parkinson's disease.

4/12 11 AM- **Dr. Melanie Brandabur** from the Parkinson's Institute.



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ADDRESS SERVICE REQUESTED

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