

Greater Fresno Parkinson's Support Group

"Helping to optimize the quality of the lives of *People With Parkinson's* and their *Care Partners*."

We meet the second Saturday of each month except August and November or unless otherwise notified.



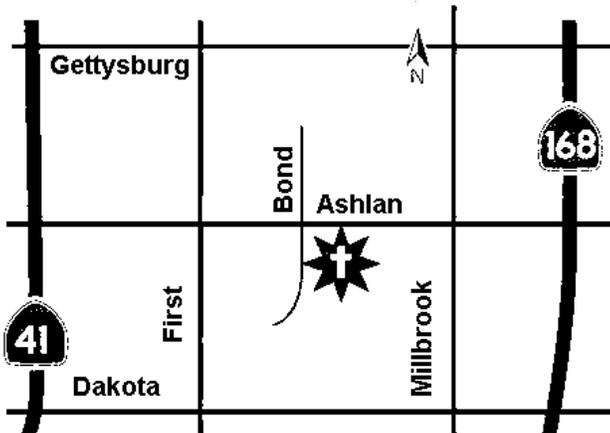
Our next meeting is:



SATURDAY, MARCH 10, 2012

10:00 a.m. – 12:00 p.m.

at **THE BRIDGE EVANGELICAL FREE CHURCH** in the "Café" (formerly the "Chapel") at **3438 E. Ashlan Ave., Fresno, CA 93726**, at the southeast corner of Ashlan & Bond between First & Millbrook. Enter the parking lot from Ashlan Avenue.



BRING ON THE CURE!

Happy St. Patrick's Day!

OUR MARCH 10, 2012, PROGRAM:

The speaker is *Craig Clark* from *The Bone Store*. He will be showing and talking about medical items that can help you with your disabilities. *The Bone Store* was very helpful in a past presentation answering questions on what is available to help specific needs. Please come with your questions as there will be a question and answer session

A WALK IN THE PARK

Join us for a docent-led private tour of Shinzen Japanese Garden at Woodward Park. Docent and President of the Garden, Richard Kassabian, will be our exclusive guide on Monday, March 26, 2012, at 11:00 am. The five-acre Japanese stroll garden is laid out in the four seasons landscape design style. Richard will concentrate on the spring season elements and horticultural specimens of the Garden and in turn, will emphasize their features and agricultural adaptability to the central California climate.

This is a free tour for all our members and guests. Entry to the park is also free for seniors over 62 and older. And all persons with disabled persons placards and license plates may enter the Park as well at no charge.

There will be a lunch afterwards at Huckleberry's Restaurant at Champlain and Perrin around 12:30 pm, in the banquet room.

Questions and signups: Call Bruce Medlin at (719) 375-4293 (local call).

Please respect the *confidentiality* of personal medical information revealed to one another in our meetings. Always *check with your own doctor* before changing your medications or treatments based on what you read in this Newsletter or hear at our meetings from others, even medical experts, as Parkinson's disease is such a complex disease and our respective bodies react differently to the disease and to the medications and treatments prescribed to treat it.

TREASURER'S REPORT BY BARBARA BURMEISTER

Greater Fresno Parkinson's Support Group (GFPSG) Checking Account Report:

The January 27 – February 24, 2012, Wells Fargo Bank Statement shows a beginning balance of \$1,226.58. Debited from the account during this period were four checks totaling \$230.46 for Support Group newsletter and newsletter-related expenses, refreshments, and a new microphone for use at our meetings. Credited to the account was \$63.00 in donations received at the February meeting. The current statement ending balance is \$1,059.12.

Thank you to those who have provided refreshments for some of our meetings. This helps keep our expenses down and is greatly appreciated. Also, if you have an email account, but receive a hard-copy of the newsletter, please consider contacting Ellen to have your newsletters delivered electronically. This would reduce the expense of printing and postage, and would also save Ellen valuable time.

*Monies donated directly to our Support Group are **not** tax deductible; however, they do help cover the cost of newsletter, refreshment, and operating expenses. Thank you for your support.*

Fresno Regional Foundation (FRF) Fund Report: As of February 29, 2012, the FRF Parkinson's Support Fund Statement shows an ending Fund balance of \$3,800.01. There was an \$8.33 debit from the Fund in February for FRF administrative fees. There were no gifts nor donations made to the GFPSG Fund held at the FRF in February.

Donations or gifts to our Support Group through the *Foundation* are tax deductible and can be made online, or by check, Visa, or MasterCard. Make your check out to the Fresno Regional Foundation and specify that the donation or gift is for the Greater Fresno Parkinson's Support Group Fund. The mailing address for the Fresno Regional Foundation is: 5250 N. Palm Avenue, Suite 424, Fresno, CA 93704. For additional information, you can call them directly at (559) 226-5600, or visit their website at www.fresnoregfoundation.org to make a gift online.

Word of the Month

Basal Ganglia:

('bā·səl 'gaŋ·glē·ə)
[Gr.] 1. a knot, or knotlike mass.

A group of nerve cells in the base of the forebrain responsible for coordination of automatic movements.

Chuckle of the Month

Sign at a towing company:
We don't charge an arm and a leg: We want tows.

At an optometrist's office: If you don't see what you're looking for, you've come to the right place.

OFFICERS

Co-Leaders/Emcees:

Doug Jackson
Bruce Medlin

Treasurer

Barbara Burmeister

Membership Committee:

Sue & Doug Jackson
Faye & Jack Smith

Care Partners Group Leader:

Anne Guenther

Librarians:

Mac & MaryAnn MacDonald

Newsletter Editor:

Ellen Jablonski

STEERING COMMITTEE

Arlene Beard

Bill & Barbara Burmeister

Anne Guenther

Ellen Jablonski

Doug & Sue Jackson

Riley and Linda Jones

Mac & MaryAnn MacDonald

Bruce Medlin

Jack & Faye Smith

Jan Templeton

Martin and Marianne Weil

WEBMASTER

Frédéric "Fredo" Martin
WorkingArts Marketing, Inc.™

PEER COUNSELORS FOR OUR CARE PARTNERS

Anne Guenther (559) 322-7076
Sue Jackson (559) 434-7928

Fresno-Madera Area Agency
on Aging: (559) 453-4405 or
(800) 510-2020

Or online:

Caring From a Distance:

www.cfad.org

Family Caregiver Alliance:

www.caregiver.org

Natl. Family Caregivers Assoc.:

www.thefamilycaregiver.org

Well Spouse Association:

www.wellspouse.org

*FOR MORE INFORMATION,
TO UPDATE OUR MAILING LIST,
OR TO SUBMIT MATERIALS OR
SUGGESTIONS, CONTACT:*

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SYNOPSIS OF OUR FEBRUARY 11, 2012, PROGRAM: Thirty-three people attended.

Our Support Group Member Paul Smith shared with us his experience with Deep Brain Stimulation (DBS). He was diagnosed with PD in 2006 and had the surgery in 2011. He said he would do it (DBS) again.

Speech Language Pathologist **Brenna Hughes** and Speech Language Pathologist II **Crystal Cortez** of *Community Regional Medical Center* informed us about swallowing problems, changes that occur with speech and voice, and symptoms regarding aspiration all which can occur as part of Parkinson's disease or from medications used to treat Parkinson's disease. You can watch Brenna Hughes perform a swallow study online at youtube.com/watch?v=jsUmU7JHLU4.

DROOLING AND PARKINSON'S DISEASE:

Drooling can be an embarrassing problem for some people with Parkinson's disease. To those with the problem, it can feel as if the mouth is producing too much saliva. The term "*hypersalivation*" used to describe the problem reinforces this notion. However, drooling in Parkinson's is *not* caused by excessive production of saliva. Ask for a referral to a Swallowing specialist if you have this problem as drooling can be treated.

Drooling in Parkinson's is not caused by over-active production of saliva but by poor saliva management; more specifically, infrequent and/or weak swallowing known as *sialorrhea*. Individuals without Parkinson's sense when it is appropriate to swallow their own saliva and do so hundreds of times a day. Individuals with Parkinson's may not process sensory information from the mouth efficiently, and so may not realize that they need to dry swallow to clear excess saliva. To compound the problem, individuals with Parkinson's may also have a weak swallow that does not completely remove the excess saliva and leaves a residual quantity in the mouth and throat. A flexed head position exacerbates the problem and the backup of saliva is leaked through the mouth. If saliva is not leaked through the mouth, it may build up in the throat increasing the risk for aspiration.

Aspiration occurs when food, liquid, and saliva "go the wrong way" and enter the larynx and the trachea. Thus, *sialorrhea* is an important symptom that should not be overlooked because up to 86% of Parkinson's' patients who drool also have more serious swallowing problems. Swallowing problems (*dysphagia*) can lead to malnutrition, dehydration, and complications such as pneumonia.

Management strategies for *sialorrhea* include the following:

- 1) Therapy with a Speech-Language Pathologist which may focus on improving head posture, lip closure, and increasing volitional dry swallows.
- 2) Anticholinergenic medications may be used to reduce saliva production. These options include but are not limited to sublingual atropine drops, scopolamine patches, and ipratropium bromide. These medications have side effects and are not appropriate for all individuals. Medication options should be discussed with a physician.
- 3) Botulinum toxin (Botox) can be injected into the salivary glands to reduce saliva production. The injections must be administered by a physician experienced in the use of Botox and may not be appropriate for those with severe dysphagia. The effects of a Botox shot may last up to 6 months. Botox is an option for those who cannot take the anticholinergic medications. Muscle weakness is a risk of this therapy and this can result in difficulty chewing or swallowing- so this therapy is not for everyone.
- 4) In extreme cases, surgical removal of the salivary glands.

Taking Care of YOU: Self-Care for Family Caregivers Part 5 of 8

Tool #4: Communicating Constructively

Being able to communicate constructively is one of a caregiver's most important tools. When you communicate in ways that are clear, assertive and constructive, you will be heard and get the help and support you need. The following shows basic guidelines for good communication.

Communication Guidelines:

Use "I" messages rather than "you" messages. Saying "I feel angry" rather than "You made me angry" enables you to express your feelings without blaming others or causing them to become defensive.

Respect the rights and feelings of others. Do not say something that will violate another person's rights or intentionally hurt the person's feelings. Recognize that the other person has the right to express feelings.

Be clear and specific. Speak directly to the person. Don't hint or hope the person will guess what you need. Other people are not mind readers. When you speak directly about what you need or feel, you are taking the risk that the other person might disagree or say no to your request, but that action also shows respect for the other person's opinion. When both parties speak directly, the chances of reaching understanding are greater.

Be a good listener. Listening is the most important aspect of communication.

Tool #5: Starting to Exercise

You may be reluctant to start exercising, even though you've heard it's one of the healthiest things you can do. Perhaps you think that physical exercise might harm you or that it is only for people who are young and able to do things like jogging. Fortunately, research suggests that you can maintain or at least partly restore endurance, balance, strength, and flexibility through everyday physical activities like walking and gardening. Even household chores can improve your health. The key is to increase your physical activity by exercising and using your own muscle power.

Exercise promotes better sleep, reduces tension and depression, and increases energy and alertness. If finding time for exercise is a problem, incorporate it into your daily activity. Perhaps the care recipient can walk or do stretching exercise with you. If necessary, do frequent short exercises instead of those that require large blocks of time. Find activities you enjoy.

Walking, one of the best and easiest exercises, is a great way to get started. Besides its physical benefits, walking helps to reduce psychological tension. Walking 20 minutes a day, three times a week, is very beneficial.

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Family Caregiver Alliance National Center on Caregiving, 180 Montgomery Street, Suite 900, San Francisco, CA 94104, (415) 434-3388, (800) 445-8106, Web Site: www.caregiver.org, E-mail: info@caregiver.org. This is one part of an 8-part series. For the complete document, please contact Parkinson Association Northern California ("PANC"), (866) 979-PANC.