

Greater Fresno Parkinson's Support Group

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

Our group meets the second Saturday of every month, taking the month of August off.

 **Our Next Meeting is on** 

Saturday, November 14, 2009
10:00 a.m. – 12:00 p.m.

HAPPY THANKSGIVING!!!

OUR PROGRAM:

**"Needing and Providing Care:
We're in this Together"**

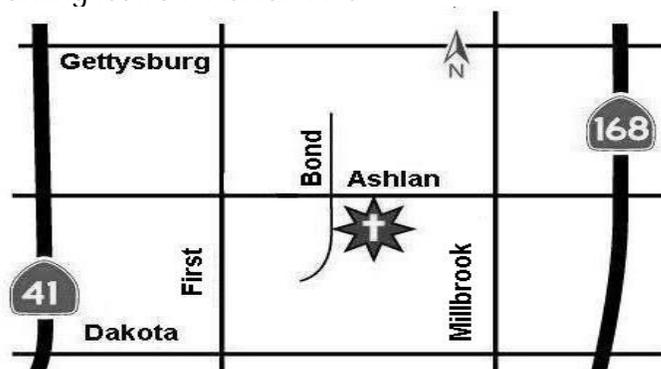
Residential Homecare Services is a referral/case management service for those in search of retirement, companion caregiver services, and assisted living or residential care communities for their loved ones. **Nancy Altschuler**, owner, is a local CSUF graduate in Recreation Administration with specialty in geriatrics. She has worked in the field for 30 years, consulting in a variety of settings with family members and providing educational seminars for administrators and support groups. Nancy is passionate about advocating for the needs of the elderly, those with chronic conditions, and their family members.

Parkinson's disease is not a new subject to Nancy; she was the respite caregiver for her father for many years. Not only did she serve as his caregiver, she was also his cheerleader through exercise and swim programs.

Residential Homecare Services has been in business since 1987. It now incorporates a listing of over 300 communities from Bakersfield to Modesto.

WHERE:

At THE BRIDGE EVANGELICAL FREE CHURCH in 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 Ave.



Chuckle of the Month:

Hello. Welcome to the Psychiatric Hotline

If you are obsessive-compulsive, please press 1 repeatedly.

If you are co-dependent, please ask someone to press 2.

If you have multiple personalities, please press 3, 4, 5, and 6.

If you are paranoid-delusional, we know who you are and what you want. Just stay on the line so we can trace the call.

If you are schizophrenic, listen carefully and a little voice will tell you which number to press.

If you are manic-depressive, it doesn't matter which number you press. No one will answer.

If you are anxious, just start pressing numbers at random.

If you are phobic, don't press anything.

If you are anal retentive, please hold.

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.

Getting To Know: JIM and LANI PETERSON



Lani was born in Oakland and grew up in Berkeley and in El Cerrito. She attended San Francisco State for two years in the 1960's. She tended to "back burner" her education for her social life and now finds herself with three children with Master's Degrees, while Lani is still working on her AA! Because of her strong business background, Lani spent most of her career working as a "Kelly Girl" while raising her family. She had various jobs, including at a radio station in Seattle and at a convention in Honolulu where she attended the birthday party for President Johnson's daughter, Luci. Lani's busiest period was 1970 when she lived in three states in one year—California, Hawaii and Alaska.

"It throws me when I hear myself referred to as a 'PWP' ('Person With Parkinson's'). Jim and I met at 'PWP' ('Parents without Partners') in 1981. We'd joke: 'If you feel you already have enough children, don't join a group like PWP: You'd wake up one morning and ask, 'Who are all these kids and why are they in my house?' We blended our family 28 years ago: Jim was widowed and I was divorced. We each have two girls and a boy.

Those early years were tough. Besides the usual traumas, we had several major ones: Jim lost his first wife to pneumonia. Shortly after we married, my mom had a major stroke. I commuted from Seattle to Berkeley for 12 ½ years, taking care of her and cleaning out her home. (Being a 'pack rat' it took me a long time to complete the task. I became an expert on 'stuff' and became an antique dealer.) My eldest child was a DUI victim at 15 ½ and was in a coma for two weeks. She survived and in June of this year graduated as a Registered Nurse in Washington State. I spent eight years as an active member of Mothers Against Drunk Driving ('MADD'), serving on both the King County and Washington State Boards.

Several years passed when life was actually almost normal! Then, in March 2005, I was diagnosed with Level Two Parkinson's. This was not tops on MY game plan of life! My symptoms were minute: writing became small; fingers would lock when using a calculator; walking became sluggish. I was referred to a Neurologist and was introduced to the new chapter of my life when she swept into the room before I even removed my sweater and said, 'My! I think you have a touch of Parkinson's.' I've tried to adopt the attitude that 'I have Parkinson's, but Parkinson's doesn't have me;' but it's not easy. I work very hard at staying active: water aerobics, walks, biking, and in-house exercises. After months of frustration, agony, and experimentation with PD drugs, we finally found an acceptable combination the summer of '08. That fall, we visited our children. The California kids had wanted us to move south, so last Thanksgiving we bought into Westlake Park Senior Mobile Home Community. In April of this year, we left our home of 10 years in Bellingham, Washington, and became Fresnoans.

Due to all my reading, including both of Michael J. Fox's books, I've learned a lot about Parkinson's disease. I know I'm dealing with a 'progressive, debilitating disease,' but I hope to keep it at bay as long as I can. Using a combination of my strong, Christian faith, stubborn Scottish roots, sense of humor, and my delightful caregiver, Jim with his own upbeat sense of humor. I'll do just fine."

OFFICERS

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Russell Templeton

Treasurer/Alternate Emcee:

Barbara Burmeister

Membership Committee:

Sue & Doug Jackson

Faye & Jack Smith

Care Partners Group Leader:

Anne Guenther

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Bill Houk

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PEER COUNSELORS FOR OUR CARE PARTNERS

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Sue Jackson: (559) 434-7928

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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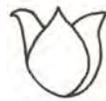
Clovis, CA 93612

www.FresnoParkinsons.org

(559) 593-9953

Word of the Month:

Vestibular: (vē-stĭb'yə-lər) adj. 1) Having to do with a structure that is a vestibule (entrance), such as the vestibule of the ear. 2) Having to do with the body's system for maintaining equilibrium.



IN MEMORIAM



Sister Eugene Baggio

Hugh "Tine" Johnston
(Husband of Louise Johnston)

Synopsis of Our October 10, 2009, Meeting:

An overview of the *"Fallproof! Balance and Mobility Group Class"* was given by Toni Tyner, Physical Therapist, Assistant Professor, Dept. of Physical Therapy, California State University, Fresno, 2345 East San Ramon Avenue, M/S MH29, Fresno, CA 93740-8031, (559) 278-4862, tonit@csufresno.edu, www.csufresno.edu/physicaltherapy.

The eight-week program of one-hour sessions, two times a week, is offered during the academic school year (fall and spring semesters). A release form from your doctor is required. The program includes *Center of Gravity Training*—activities that enhance a person's ability to move the body through space such as safely reaching for something above the head; *Multisensory Training*—activities that enhance the use of our three sensory systems (visual, vestibular, and somatosensory) for balance; *Postural Strategy Training*—exercises that aid in recovering from loss of balance during daily activities; *Gait Training*—activities that promote getting around in the community, adjusting to changes in surfaces, changes in speed, and successfully negotiating obstacles; *Strength and Endurance Training*—specific exercises to increase strength and endurance, which also enhances one's normal balance; *Flexibility Training*—selected neck, upper, and lower body flexibility exercises.

Causes for falling include problems with: posture/center of gravity; range of motion; strength; sensory systems; joint receptors in our ankles; vision; the vestibular system (where you are in space); and vertigo. Parkinson's disease can bring on or increase these difficulties. Toni demonstrated how to get up from a fall.

One intervention treatment includes use of *"Wii,"* a computerized exercise program developed by Nintendo which allows individuals to engage in "virtual" activities including dancing, bowling, golf, baseball, and tennis. Toni, along with our Group's Member **Riley Jones** and his daughter **Kimberly Moore**, demonstrated how *"Wii"* works.

To learn more about the program or to enroll, contact Toni (see above) or contact Leslie Zarrinkhameh ("Dr. Z"), D.P.T., Clinical Services Coordinator, CA Wellness, Foundation Grant/Instructor, Dept. of Physical Therapy, College of Health and Human Services, 2345 East San Ramon Avenue, M/S MH29, Fresno, CA 93740-8031, (559) 278-1439, Fax (559) 278-3635, lesliez@csufresno.edu, www.csufresno.edu/physicaltherapy.

After the program, cake was served to celebrate the marriage of our Group's Members Ellen Jablonski and Kirby Eskelsen for which they were very appreciative.

Treasurer's Report by Barbara Burmeister:

GFPSG: The September 25 – October 26, 2009, Wells Fargo Bank Statement shows a Beginning Balance of \$710.27. Debited from the account during this period were five checks totaling \$314.65 for expenses incurred in September and October. Credited to the account was \$156.00 in donations made at the October 10 Support Group meeting leaving an Ending Balance of \$634.25. Subsequent to the end of this statement period, a check in the amount of \$100 was received in memory of Hugh "Tine" Johnston, husband of Louise Johnston, leaving an Adjusted Ending Balance of \$734.25.

I would like to thank everyone for your continued support and for the generous donations made in October. Monies donated directly to our Support group are not tax deductible; however, they do help cover refreshment and Newsletter-related expenses and are greatly appreciated. Thank you so much for your continued generous support.

Fresno Regional Foundation: The "Parkinson's Support Fund" activity from January 1, 2009, through September 30, 2009, shows a total of \$1,275.00 in donations made to the Support Group Fund through the Fresno Regional Foundation. There were two grants disbursed during this period: 1) \$649.22 on January 28, 2009, for the purchase of a projector, educational DVD and books; and 2) \$500 on September 2, 2009, to replenish the GFPSG Wells Fargo checking account used for monthly operational expenses. Earned was \$6.58 in interest and dividends, and deducted from the account was \$74.07 in administrative fees, leaving an ending fund balance of \$3,394.71. There were no contributions made in October, and the October investment earnings and fees have not yet been posted. Donations and gifts made to our Support Group through the *Foundation* are tax deductible. Call (559) 226-5600 or go to www.fresnoregfoundation.org for additional information.

OTHER SIGNS AND SYMPTOMS OF PD THAT ARE NOT PART OF THE TEXTBOOK DEFINITION MAY INCLUDE:

Rapid Eye Movement Sleep Behavioral Disorder ("RBD"): This disorder is characterized by bursts of physical activity during the night. Nearly 40% of men diagnosed with RBD in one study eventually developed PD with an average of 13 years between the beginning of RBD and the diagnosis of PD. If you or a loved one has RBD, talk with your doctor. Some medications have been shown to be effective in controlling this disorder.

Loss or Decline of Sense of Smell: Many people living with PD state that they had a decreased sense of smell long before PD diagnosis.

Excessive Daytime Sleepiness ("EDS"): EDS—including long naps during the day, insomnia, grogginess for more than 30 minutes after waking up, and awakening frequently during the night—is associated with a greater risk for the later development of PD. Because EDS can be caused by many medications for PD, you should talk with your doctor.

Pain in the Shoulder, or Tingling Sensations in the Limbs: Pain, stabbing, burning, or tingling sensations can precede the motor symptoms of PD, often by years. Medications may be helpful for this sort of pain. Talk with your doctor about what you can do. There are different types of pain associated with PD, and proper treatment depends on the reason for the pain.

Depression or Anxiety: Depression in people with PD is often unrecognized and undertreated. Many medications are effective in relieving depression, and psychotherapy may be effective as well. Anxiety, like depression, can develop years before the motor symptoms of PD. And like depression, there are many effective treatments—but talk with your doctor, because some anti-anxiety medications should not be used to treat people with PD.