

# THE network

FALL 2014



**WPA**  
The Wisconsin  
Parkinson Association  
Serving Wisconsin & Neighboring States



**CREATURE COMFORT:**  
How Animals Help  
People with Parkinson's

...pages 11-12

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The mission of the Wisconsin Parkinson Association is to expand medical professional and public awareness and understanding about Parkinson disease that will lead to maximum support, the best individual health care, assistance for caregivers and families, and increased funding for research.

**Cover photo:** Yorkshire terriers Liebchen (left) and Blümchen undergo training through Pet Partners with their handler, Janet Horning, to bring cheer to people living with Parkinson’s and other challenges.



## LETTER FROM THE President by: **Richard Schumann**

WPA Board President

Dear Friends of the WPA,

The WPA Open against Parkinson Disease, our big fund-raiser of the year, was a fantastic success. Held September 16 on a spectacular fall day at The Legend at Brandybrook in Wales, Wisconsin, the golf outing hosted almost 90 golfers and 125 people for the evening's dinner. We netted approximately \$35,000 to help those with Parkinson's in our community. **Please turn to page 5 to see photos from the day's festivities.**

We have many people and organizations to publicly acknowledge. First of all, our sponsors, who helped to underwrite the outing: HeatTek – which led the support as presenting title sponsor – Teva Neuroscience, the Nancy Crowley Vojtik Memorial, Greenfield Rehabilitation Agency, the Prescott Family Foundation, Cosentino Financial Group, Ixonia Bank, WIPFLi, Anick & Associates, U.S. Cellular, Eppstein Uhen Architects, Lake Country Health Center, Dr. Daniel Murray in memory of William Murray, Western Snowplows, and Generac.

I particularly want to thank New Belgium Brewing Company and Seven-UP Bottling Company even though their representatives were not able to attend; we are very grateful for your contributions. Additionally, we wish to recognize RocketLawnchair and Schlossmann Auto Group for their in-kind services.

We cannot thank enough the tremendous staff at The Legend at Brandybrook – including Jack Gaudion, Risa Kuhlman, and David Bobber – and,

most especially, we owe a big debt of gratitude to our guest of honor, Cherie Zaun, former LPGA Tour golfer, and our master of ceremonies, Tom Pipines, anchor and reporter for Fox Sports. Cherie's inimitable brand of charm sprinkled a lot of fun throughout the day, and Tom's warmth and kindness at dinner served to emphasize the purpose of the fund-raiser: to help others. We thank you all.

My wife, Deanne, and I thank our friends from Watertown Country Club who helped to support this event. I am grateful to my friends, who generously answer when I put out the call. And we truly appreciate the volunteers: in addition to community members Christine Kuhaupt, Jack Hunter, and Mark Greiten, employees from U.S. Bank and U.S. Cellular gave of their time to lend a hand.

Last but absolutely not least, to Dr. Daniel Murray, the chairman of the golf event committee, and to the entire golf committee, my deep thanks. This was the most engaged, most excited, most hands-on event committee in my experience. Congratulations on a job well done to committee members Dr. Daniel Murray, Knut Apitz, Jeanine Bly, Dennis Estenson, Ken Foster, Phil Holland, Kathy Hust, Rob McDonald, Jeremy Otte, Craig Plowman, and Jerry Zimmerman. A great event results from great leadership and participation, and you did yourselves proud.

Mark your calendars for next year – The Legend at Brandybrook on Tuesday, September 15!

Sincerely,

*Richard Schumann*

**Pictured above, the HeatTek foursomes: Richard Schumann, third from left.**

# "Falling" TOWARD THE YEAR-END APPEAL



**by: Jeanine Bly, B.S.W., M.B.A.**

Executive Director

Wisconsin Parkinson Association

The annual ritual of people making their seasonal fall comments has started:

"Can you believe it is November already?" "Where did the summer go?" "It will be winter and the holidays will be here before we know it!" These remarks and so many others are part of the ritual of fall as we move toward the end of the year. And though many of us may not want summer or 2014 to come to an end, one fact is certain – end 2014 will.

During 2014 here at the WPA we have talked about how "together we can make a difference" in the lives of those affected by Parkinson disease when we all do our part. No matter how large or small we may think our part is, when we come together in our efforts it makes a difference. This year membership numbers are up, and it is because of your efforts. We have started to come together in support of those with Parkinson disease in our area and we are so thankful.

In 2014 we also have been challenged to use what is "uniquely us" in a way to help raise awareness and funds to help the WPA better serve those with Parkinson disease and their families. Through many of these unique community and support group events, the WPA has financially benefited. These events ranged from picnics and motorcycle rides to art shows and softball tournaments, paintings and

golf outings, Elvis tribute artists, and run/walks. All these fund-raisers combined together are not only what financially keeps the WPA able to focus on its mission but they are what the WPA actually is. The WPA is its membership and it is you – a community trying to raise awareness and raise funds.

As together we fall toward the end of 2014, I would encourage you to help us continue making a difference. We could not do any of this without your help and generosity. The WPA is a private, nonprofit organization that is completely dependent on the generosity of its members and the community. It is dependent on all the "unique you"s coming together.

Please join with us and reply when the year-end appeal arrives at your house. An appeal is more than another letter asking for money. According to the dictionary, it is "an earnest request for aid, support, etc.; an entreaty or plea." The year-end appeal is a way not only to help your personal tax position but a bold, unique way to say you will continue to work together with us.

Also be sure to check with your employers, as many have started matching gift programs. This year the WPA has been the beneficiary of several matching funds donations, and it has been great to have these businesses come together with us all because someone asked a question.

Remember – together we can! 

## Richard Cosentino Named to the WPA Board



At the meeting of August 13, 2014, the WPA's board of directors approved the nomination of Richard Cosentino for board membership and welcomed him.

A financial professional and principal of the Cosentino Financial Group, L.T.D., Dick has been a registered advisor for AXA Advisors for thirty-eight years, offering variable and traditional life insurance and annuity products of AXA Equitable and more

than one hundred other companies. He specializes in retirement plans, estate planning, and long-term-care insurance.

Dick is a past board member of the Arthritis Foundation and Diabetes Foundation. He has become involved with the WPA as his wife is newly diagnosed with Parkinson's, and he would like to bring his expertise in finance, legacy planning, wealth transfer, and risk management solutions to the board. 🌱

### CHECK-IN, CHECK-OUT AT THE WPA RESOURCE LIBRARY!

Might you have a copy of a book or DVD from the WPA's resource library?

We certainly understand that a book or DVD may have been mislaid. However, if you are no longer using that item, would you please return it to the WPA so that others can use it?



Each item is identified by a sticker showing the WPA logo. Our library is missing, among other things, copies of LSVT BIG and LOUD DVDs, John Argue

exercise DVDs, *Always Looking Up* and *Lucky Man* by Michael J. Fox, and *My Father, My Brother, and Me* by Dave Iverson.

Please check on materials you might have, and if you do find an errant book or DVD, please send it to Raven Hamilton, WPA, 945 N. 12th Street, Suite 4602, Milwaukee, WI 53233.

Conversely, if you would like to borrow materials from the resource library, please give us a call at 414-219-7061! Our list of materials is available at [www.wiparkinson.org](http://www.wiparkinson.org) > **Living with PD** > **Educate Yourself** > **Read**, or we would be happy to provide a list of titles to you by fax or mail.

## WPA OPEN AGAINST PARKINSON DISEASE Scores the Green

The Legend at Brandybrook, one of the most beautiful courses in Wisconsin, set the scene for a glorious day of golfing on September 16. The WPA's fund-raiser netted approximately \$35,000.



The birdie sponsor representatives from Teva Neuroscience had a day of great golf! From left, Virgil Hammond, Randy Riemer, Jason Majdecki, and Dale Rabas.



The WPA Open's golf committee chairman, Dr. Daniel Murray, shared the success of the event during dinner while he thanked sponsors and attendees.



The presenting title sponsor, HeatTek, Inc., entered eight golfers into the event; from left: John Schumann, Jack Bast, Richard Schumann, Jim Lastuski, Craig Plowman, Jim Chamberlain, Jason Plowman, and Gregg Martin.



Following the golfing, an elegant dinner took place in the clubhouse at which guest of honor, Cherie Zaun (center), a former LPGA Tour golfer and spokesperson for Parkinson's, chatted with table mates that included Dee Schumann and members of the HeatTek golf teams.



Tom Pipines, Fox 6 sports anchor and reporter, did a fantastic job as auctioneer for the live auction items - which included autographed Badger and Packer helmets, a glamorous night at the Four Seasons Hotel Chicago, a Steve Stricker-autographed driver, a day of golf at The Legend at Brandybrook, and a case of Napa Valley cabernet sauvignon - at the fund-raiser.

## The Tulip Club: **MEMBERSHIP AND SPECIAL RECEPTION**

We thank the following Tulip Club members who have joined the WPA at the membership level of \$250 or more. We appreciate your joining with us in support of those with Parkinson disease.

Our Tulip Club members are invited to attend, from 4:30 to 6:00 p.m. on December 10, a special thank-you reception hosted by Jeanine Bly and Richard Cosentino. The reception is being sponsored by Cosentino Financial

Group and will be held at the Westmoor Country Club in Brookfield. Watch the mail for your invitation!

If you are not yet a member of the Tulip Club, please consider becoming one! Simply complete and return the enclosed envelope with your Tulip Club-level membership donation or call 800-972-5455 to donate and let us know by December 1 that you wish to attend this special Tulip Club reception on December 10.

### **Tulip Club (\$250 or more)**

Don and Barbara Abrams  
Jack Bast  
Ron and Darla Becker  
Claire Boles  
Neal and Helen Buteyn

James and Lynn Cantrell  
Thomas Cassidy  
Beverly Gloudeman  
Ken and Joan Hunt  
William Jambrek  
Richard and Linda Lundin  
Kathleen Miller  
Ken and Carol Muderlak

Ron and Nancy Muehlhausen  
Harold Nigbor  
Cheryl Prescott  
George and Judi Prescott  
Donald and Beverly Randall  
Betsy and Bill Reilly  
Jean Rinka  
Roger Ritzow

George and Sandra Roemer  
Norma Semling  
Nelson and Carolyn Shafer  
Wayne and Barbara Sommer  
Ed Vojtik  
Peter and Irene Weber  
Mark and Virginia Wooster

## YOUR LOGO HERE!

### **BECOME A SPONSOR OF *The Network!***

Published four times a year, the WPA's magazine reaches a readership specifically interested in addressing the issues and challenges of Parkinson disease.

Have your business name affiliated with philanthropy by sponsoring *The Network* through a charitable contribution to support the WPA's mission.

**FOR MORE DETAILS, PLEASE CONTACT  
JEANINE BLY AT 414-219-7024 OR  
JEANINEB@WIPARKINSON.ORG.**

## **WPA MEMBERS ARE INVITED!**

### **WPA Annual Meeting**

**Wednesday, December 10, 2014**

6:00 p.m. registration

dinner at 6:30 p.m., with meeting to follow

Westmoor Country Club

400 S. Moorland Road, Brookfield

Join us for the annual meeting of the board of directors! The evening will feature dinner followed by a brief business meeting, concluding with a short program highlighting one of the WPA's initiatives from the past year.

If you are not a member – become one now! Just complete the enclosed envelope and return it with your membership donation, then call us at **800-972-5455** to register for the annual meeting. **RSVP by December 1.**

# Waiting

## FOR A NEW APPROACH



**by: Paul A. Nausieda, M.D.**

Medical Director  
Regional Parkinson Center

Since I first started using levodopa to treat Parkinson patients in the early 1970s, the course of treatment has been a series of major breakthroughs punctuated by periods of time during which new medications were absent. Currently, we are at the end – we hope – of an era where synthetic agonists and surgical treatment with deep brain stimulation have been the best that medical science can offer to patients who have developed involuntary movements and the premature wearing off of medications (on/off effect).

Levodopa is an incredibly effective treatment for Parkinsonian symptoms, but the fact that we have a potent agent to treat symptoms is counterbalanced by the fact that levodopa responsiveness increases with continued administration of the agent, leading to involuntary movements when the drug reaches a peak level in the bloodstream. The development of this form of sensitivity to levodopa seems to generate a secondary reaction: a wave of inhibition of levodopa that seems to reflect a feedback mechanism for excessive dopamine activity. The problem is that this compensatory inhibition lasts longer than levodopa remains in the blood, resulting in a reemergence of Parkinsonian symptoms at the end of the dosing period.

Unfortunately, all currently available levodopa-containing medications are short acting. Regular 25/100 and 25/250 preparations are rapidly absorbed, reach a peak level in about 30 minutes, and then are rapidly cleared over the next 60 to 90 minutes. The ER preparations are more slowly absorbed, peak at around 120 minutes, and then clear over the next two hours. The use of synthetic agonists such as pramipexole, ropinirole, and Neupro patches provides a longer-acting, albeit less potent, treatment option to “bridge the gaps” between doses with varying success,

and the side effects of these drugs – including obsessive behavior, fluid retention, and daytime somnolence – limit the patient population that can be treated with these drugs. This is the treatment problem that many of our patients face. In many cases, using blended mixtures of regular and ER levodopa with or without a synthetic agonist is the “best” treatment option available. It has been eighteen years since a major new breakthrough has occurred, and many patients have lapsed into a sense that they simply have to learn to live with the problem of erratic drug responsiveness. Many patients have postponed follow-up visits because they feel that further improvements are no longer possible.

Rytary, a product of Impax Pharmaceuticals, is an agent we have been testing for the past five years. This is a carbidopa/levodopa preparation but delivers levodopa in a far more sustained manner using micro pellets in a capsule. When administered four times a day, levodopa levels remain essentially constant for the entire 24-hour day. Not only does this eliminate end-of-dose wear-off, it reduces the problem of peak-dose dyskinesia when properly adjusted. The doses of Rytary are approximately double those of conventional levodopa after conversion to the new drug, but some patients require more or less of the predicted dose, and it takes a few visits a week apart to make the adjustment. Rytary will be available in multiple doses, so the process of fine tuning the dose is much easier than it has been with current levodopa-containing medication.

We have had the most experience using Rytary of any clinic in the world, and it has been our observation that total daily doses of this drug often seem to be reduced after initial adjustment. This would appear to reflect the slow reversal of the inhibition of dopamine activity that is triggered by peak-dose dyskinesic movements: Once the dyskinesia is reduced or eliminated, the reduction in

*Continued on page 22*

**For breaking news on Rytary availability, visit  
[www.parkinsoncenterwi.com](http://www.parkinsoncenterwi.com) or [www.wiparkinson.org](http://www.wiparkinson.org).**

# Ask the Doctor



**by: Kathryn Gaines, D.O.**

Neurologist

Aurora Advanced Healthcare

*Disclaimer: Below are brief answers to people who have written in with questions; however, please note that my advice should not take the place of having a conversation and formulating a treatment plan with one's own neurologist or treating physician.*

## **How are restless legs syndrome and Parkinson disease related?**

Both restless legs syndrome (RLS) and Parkinson disease are conditions caused by dysfunction somewhere within the components of the nervous system that use dopamine. Both conditions are symptomatically improved with the addition of medications such as levodopa or dopamine agonists (such as ropinirole, pramipexole, or rotigotine). Other medications help RLS as well. But because RLS seems responsive to many of the same medications used in Parkinson disease, this suggests there is certainly a link between the two. It is unclear, however, whether dysfunction within the dopamine symptoms causing RLS is because of altered spinal dopamine modulation or whether the same dysfunction of dopamine in the brain that causes Parkinson disease also causes the RLS or at least contributes to it. Many of my patients with Parkinson disease have complained of RLS symptoms for years predating the diagnosis of PD, but not all patients with PD have had the same experience. However, just because one has RLS does not mean that he or she will develop PD.

**Ask the doctor!** Send your questions about Parkinson disease by mail to "Ask the Doctor," Wisconsin Parkinson Association, 945 N. 12th Street, Suite 4602, Milwaukee, WI 53233 or email to [mail@wiparkinson.org](mailto:mail@wiparkinson.org) and put "Ask the Doctor" in the subject line.

***I know about the lack of ability to smell that has come with my Parkinson's, but now I am experiencing occasional strong aromas of cologne - when I am at home, and I don't wear cologne. What's going on?***

I suspect you are experiencing phantosmia, which is actually an olfactory hallucination. This is either because the area of the brain that interprets smell is being affected by the Parkinson disease state, or the signals coming from the olfactory nerve or pathway are being affected. It is most likely a bit of both. Parkinson disease is not the only disease state that is associated with phantosmia.

## **What should I look for when seeking a Parkinson's doctor?**

First of all, I would recommend finding a neurologist with additional fellowship training in movement disorders. With that said, there is no certifying body that attests to the adequacy of training from one movement disorders doctor to the next. National, regional, or local support groups often keep a database of providers relevant to your area of residence. One might start by getting a few names and then doing a little background research before proceeding with an appointment. The family doctor can help with this as well. People have different preferences when it comes to choosing a physician: knowledge base, rapport, staff friendliness, and available appointment openings are all considerations. Also consider convenience and travel time. Some people live too far away from a specialist and may compromise by seeing a specialist once or twice a year and a local neurologist for a more routine checkup. On a personal level, one must above all feel comfortable with the provider. And finally, be sure to check that the provider is in the "insurance network"; otherwise, a hefty out-of-pocket bill may soon find its way to you. 🌸

# DRUG-TO-DRUG INTERACTIONS



**by: Dacy Reimer, A.P.N.P.,  
M.S.N., C.C.R.C.**

Advanced Practice Nurse  
Practitioner and Coordinator  
Regional Parkinson Center

There are a variety of medications used to treat Parkinson disease that are effective in controlling symptoms. I'm often asked how we go about picking our treatment regimen for each individual. This varies, of course, as each person is unique in their health history and concomitant medications. We have the privilege of performing clinical trials on most PD medications for years before they hit the market as well as years of subsequent clinic use. This extensive experience allows us to determine which the best "fit" is for you. There are many factors we plug into our decision algorithm, one of which is drug-to-drug interactions.

On your first visit to the Regional Parkinson Center, you receive an important "contraindicated" drug card that lists medications anyone with Parkinson disease cannot take. These medications can cause or worsen Parkinson symptoms. If you do not carry this card, please contact the clinic or the WPA at 800-972-5455 to get one for yourself and your spouse; it is smart to provide copies to your primary physician and pharmacist as well.

On all subsequent visits, we review your medication list thoroughly to check for any drug-to-drug interactions and evaluate the need for any medication changes. Below I have listed the

most commonly used antiparkinson medications and their potential interactions with other drugs so that you can better understand our process of selection and avoidance of potential complications.

**Carbidopa/levodopa** is a natural amino acid and the "gold standard" dopamine replacement therapy. It can be used alone, mixed with a controlled-release regimen, or as an adjunct to a dopamine agonist. There are conditions such as schizophrenia and bipolar disorder that are treated with medications that cause Parkinsonism; many of these drugs are listed on the contraindicated list mentioned. We call this "drug-induced Parkinson's," and the goal is to switch to a treatment with less potential of causing Parkinson symptoms and in some cases initiate levodopa therapy to reverse symptoms. It may sound like common sense, but none of the following agents should be used with carbidopa/levodopa, or they will null the effect of each. We do see this issue in the clinic.

- Vitamin B6 should be under 30 mg daily, or it can interfere with levodopa absorption.
- Iron supplements should be given one hour before or after the dose, or it impairs the absorption.
- Blood pressure medications (antihypertensives) may be decreased or eliminated, as levodopa can lower blood pressure.
- For diabetics, levodopa can increase blood sugar levels transiently.

**Dopamine agonists** mimic dopamine in the brain and are often used to promote a longer lasting (but weaker) effect. Their major side effect, daytime sedation, potentially increases when using antianxiety or sleeping pills. Also, like carbidopa/levodopa, agonists can lower blood pressure. Dopamine agonists can be used in conjunction with carbidopa/levodopa, but not in conjunction with one another within the class.

- Pramipexole/Mirapex is metabolized in the kidneys and should be used at lower doses or consider alternative treatment in patients with renal impairment (poor kidney function). Vancomycin (antibiotic) should be avoided; combination therapy can increase both medication levels. Keep well hydrated to promote kidney excretion.
- Ropinirole/Requip is metabolized in the liver. Cipro (antibiotic) can cause an increase in ropinirole levels, so the ropinirole dose may need to be decreased, or alternative antibiotic should be used; both are metabolized in the liver and can cause toxicity. Caffeine can increase ropinirole levels. Estrogen replacement in women can increase ropinirole levels. Use caution if sensitive to fluid retention (swelling in ankles or congestive heart failure).
- Rotigotine/Neupro transdermal patch is metabolized mostly in the liver. The patch cannot be worn during MRI testing because it has a small amount of metal layered within the patch. Warfarin/Coumadin levels may increase; combination can increase risk of bleeding. Use caution if sensitive to fluid retention. This drug does not conflict with any antibiotics.

**Anticholinergic** medications cause drying of fluids in the body. There are a couple that work well when battling resistant tremor or involuntary movements known as dyskinesias. Bladder medications fall into

this category, as they attempt to control an overactive bladder. The flip side is that they can also slow G.I. transit, impacting how some medications are absorbed.

- Amantadine/trihexyphenidyl/Artane: Potassium absorption can be delayed, increasing intestinal exposure to high concentrations of the mineral that can cause ulcerative lesions. Digoxin levels can be increased and become toxic if used with amantadine; this applies only to digoxin tablets, not capsules or liquid. Avoid use in individuals with memory impairment or if on medication to treat memory (Aricept, Exelon, Namenda, Razadyne), as the combination of these medicines will cancel one another out. Use of this drug can increase bupropion/Wellbutrin levels, so lower doses are recommended.

**MAO inhibitors** have a mild antiparkinson effect and can be used alone. Generally they are used with carbidopa/levodopa to prolong the effect and reduced wearing-off. MAO-B inhibitors are long-acting and will enhance the effect of immediate and controlled-release carbidopa/levodopa products by about 15%. They have no effect on the metabolism or activity of agonists or anticholinergics such as amantadine.

- Azilect/Zelapar/selegiline can increase bupropion/Wellbutrin levels; alternative antidepressant therapy should be used and monitored closely. For diabetic patients, these medications can induce prolonged, low blood sugar levels.

Keep in mind that these are some of the most common interactions we run into, but this list is not all-inclusive. It is important to review your own list with your provider or pharmacist. **For a copy of the contraindicated drug card, call the WPA at 800-972-5455.** 🌸

cover story

**CREATURE COMFORT:**

How Animals Help People with Parkinson's

For those who enjoy “pet therapy” at home with their own furry family members, it won't be surprising to learn that animals perform functions of enormous benefit to people who need help. However, the American Veterinary Medical Association notes important distinctions in therapy terminology. *Animal-assisted activities*, which can occur in any environment and are provided by a volunteer or professional, improve someone's quality of life. *Animal-assisted therapy*, delivered by a professional health or human-service provider, often in a rehabilitative setting, directs the interaction within a treatment program and sets specific goals to promote physical, social, emotional, or cognitive improvement; the process is documented and evaluated. (*Service animals*, a separate category, are trained to perform tasks to assist someone with a disability.)

Janet Horning has had animals her whole life, but several years ago she became interested in animal therapy. Janet was a longtime care partner for her friend, Carl Heuer, when Liebchen entered their lives as an informal animal-assisted activities dog; inspired by their shared experience with Carl, Janet and Liebchen went on to become registered in 2012 with Pet Partners, a nationwide organization that trains handlers and their animals to bring comfort to others. Janet and Liebchen are now working with their new Yorkshire terrier, Blümchen, to become registered as a team.

“I love to work with children, in schools, in nursing homes – I took my previous dog to kindergarten

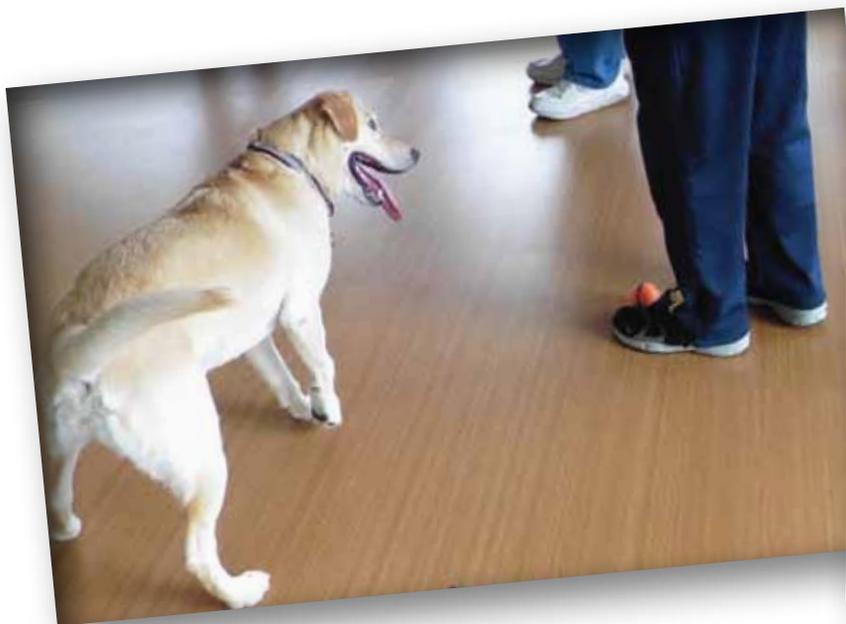


**(Top) Cathy Cauley, P.T., says, “To increase endurance, I try to get the patient to walk farther with my physical therapy dog. In one of my Parkinson's exercise groups, we have a man who walks about one inch per step – but with the dog, his steps are over six inches. It is amazing.” (Inset) “If a patient likes dogs and needs to work on fine-motor skills,” Cathy says, “I can instruct him to use the affected hand to give treats, pet the dog, shake hands, or brush the dog.”**

classes and Alzheimer's wings – and sometimes the fifteen-minute spontaneous visit just happens when we are out walking,” she says. “Every meeting is an opportunity to bring a smile to someone. We just fall into our therapy training mode, and the visit takes a life of its own.”

Therapy teams also work in hospitals, assisted living centers, libraries, funeral homes, hospice care, and rehab units. Pet Partners brings together registered handler-animal teams with facilities wanting animal therapy visits. Another national organization, Therapy Dogs International, does this and also offers a Home Visit Program.

Many who live with Parkinson's experience anxiety and depression. Nearness to animals can help. Petting the animals – dogs, cats, rabbits, llamas, miniature



(Left) Cathy says, “If we are working on balance issues, I can have the patient throw or kick a ball or play tug-of-war with Lilly.” (Below) Whether working to brighten someone’s day or helping to increase mobility, therapy dogs and their handlers undergo special training and registration.



horses – provides calming touch and helps to lower blood pressure. Additionally, the anticipation of the animal’s visit brings hopeful expectations and lifts the spirit, and the animal becomes a focus for conversation and socialization.

Catherine Cauley, a physical therapist for Aurora Medical Center in Summit, has used trained and registered dogs in working with her clients for more than a decade. She notes that animal-assisted therapy is used in psychiatry and nursing (for example, to calm a patient’s anxiety in preparation for a shot) as well as with physical, occupational, speech, and recreational therapy.

“I work in the hospital, in rehab, and with outpatients if needed,” Cathy says. “I usually use two Newfoundlands or Lilly, my own registered yellow Lab, to do animal-assisted therapy. Whatever we are trying to facilitate, we can come up with an idea for how the dog can help. For example, people with Parkinson’s tend to have tight trunk, so we have patients throw the ball behind them by twisting. Or they can sit and pet the dog on her side so that they are reaching. We ask patients to pick up the ball from the floor so they are bending forward. The possibilities are endless.” And the results? Cathy says, “I have watched patients with Parkinson’s increase their flexibility. I have seen people

who couldn’t speak learn to talk again because they were motivated by the animal.”

Cathy’s animal-assisted Parkinson’s therapy class with Lilly at Pabst Farms YMCA in Oconomowoc brims with activity, happiness, and fun, and participants Dudley, Scott, Hugh, Bart, and Carl get a big workout. Carl feels strongly about the therapy: “Working with the dog has been better for me than my medicine.” Dudley was enthusiastic enough to get his own dog and says, “Now I walk fifteen miles a week with my dog.” Hugh, whose stride is measurably improved, says, smiling, “It gives me confidence to walk with the dog.”

Cathy says, “It is very rewarding to see how the therapy dog can influence care. As a pet owner, my dog is exhausted but happy afterward. As a P.T., I see that work with therapy animals can unlock things that conventional therapy can’t always.”

To get involved in animal-assisted activities or therapy, or to develop a visiting therapy animal program at your facility, visit Pet Partners at [www.petpartners.org](http://www.petpartners.org) or Therapy Dogs International at [www.tdi-dog.org](http://www.tdi-dog.org). If you are a patient or resident, ask the facility about bringing in a *real* dog and pony show – therapy animals! – to cheer and motivate you.

— Juliette Hayes

# WPA SPONSORS LSVT BIG AND LOUD CLINICIAN TRAINING



**by: Jeremy Otte**

Director of Outreach and Education  
Wisconsin Parkinson Association

By now, many of you probably have heard of the programs LSVT BIG and LOUD. The BIG and LOUD treatments, as described on the LSVT Global website, use "...innovative and clinically proven methods for improving communication and movement in individuals with Parkinson disease..." Currently, LSVT Global has trained and certified in LSVT BIG more than 1,600 physical and occupational therapists from 16 countries. Additionally, it has trained and certified in LSVT LOUD more than 9,200 speech therapy professionals in 54 countries.

The WPA is proud to announce that on October 3 and 4, 2014, we co-sponsored with LSVT Global the first LSVT BIG training in Wisconsin and the first LOUD training in many years. This training was led by Erica Vitek, a certified instructor from Aurora Sinai Medical Center in Milwaukee. We were able to train 65 new therapists in the LSVT BIG program and another 30 new speech professionals in the LSVT LOUD program. This means if your movement disorders specialist now refers you to the LSVT BIG and LOUD program, the odds are greater that there is a professional trained in your area to offer these services.

At the training, people from the area with Parkinson disease attended the workshop and participated in the BIG and LOUD exercises. It was a great experience for the people with Parkinson disease

and their caregivers to participate for free, but it was an invaluable experience to the new trainees to work directly with people with Parkinson disease and immediately put their training into practice.

The easiest way to learn whether there is a trained clinician in your area is to go to the LSVT Global website at [www.lsvtglobal.com](http://www.lsvtglobal.com), where you can click onto a page that reads "Locate a Clinician." Through a simple search, you can learn whether there are any trained and certified clinicians in your area. When searching for a clinician, I recommend using your zip code instead of your city name, as this method will pull more people from your area. As an example, I did a search using Wausau as my home, and one LSVT BIG instructor appeared within 100 miles. Next, I did the search using Wausau's zip code, 54403, and fifty clinicians appeared within the same 100-mile radius.

If you are interested in learning more regarding the offerings in your area, contact the clinician listed directly. Ask him or her about what they offer and when and whether it is covered by insurance. The sessions are held four days a week for four weeks. Each session is one hour long, but when possible, sites will offer both BIG and LOUD jointly, so expect each session to last at least two hours.

If there is not a clinician in your area, ask your movement disorders specialist about it at your next appointment. If there's enough interest, you may be able to convince your local health-care system to get employees trained and offer this service in the future. 🌱

## Support Group **SPOTLIGHT**

The WPA serves all of Wisconsin and parts of Iowa, Illinois, Indiana, and Michigan. Continuing our feature of support groups, we asked members in the Chippewa Falls, Wisconsin, and Burlington, Iowa, support groups why peer discussions are important for learning about and living with Parkinson disease. **What does a support group do for you? Why do you attend?**

Chippewa Falls, population 13,000, is located in the northwest quadrant of Wisconsin on the Chippewa River. Ursula Whelan and Dianne Wilson belong to the same church; after both were diagnosed, they formed a Parkinson support group that was joined at first by others in the church and then members of the community.

Ursula felt she had been diagnosed then dismissed with a “good luck.” She says, “There was no information, nothing. How was I supposed to deal with this?”

“In the beginning, I didn’t want to attend anything to see what I was getting into,” Dianne says, “but after Ursula called to say she had been diagnosed, I could relate to somebody. I wanted to help her see it’s not the end of the world. It’s good to hear about others’ experiences, what kinds of medications people are on, and how the drugs are working. We have seminars and webinars that are very informative. I had DBS, and I can talk with others who are thinking about it. I believe in support groups. Besides, we get snacks! We take turns bringing in refreshments, so it’s a good time talking in a supportive environment.”

### **Chippewa Falls Support Group**

Trinity United Methodist Church  
201 W. Central Street, Chippewa Falls  
1st Wednesday at 1:30 p.m.

**Contact:** Ursula Whelan at 715-723-3726 or  
Dianne Wilson at 715-861-4169

Burlington, a city of 25,000 in southeastern Iowa, borders Illinois along the Mississippi River. Ruth and Bill Newton ran the Parkinson’s support group for the past eight years and stepped down last February. Ruth says the group has helped since her diagnosis; she also firmly believes in the benefits of the exercise classes she has attended.

The new facilitator, Tom Zimmerman, has been with the group for four years. He says, “Those with Parkinson’s can become socially isolated, so we held a picnic in September and had a nice turnout – almost everybody in the group came with their caregivers. We are now working together on a holiday cookbook.”

Leslie Yohe, a veteran of the Vietnam War, feels that the support group is like having a library with shared information. “Our group brought in a speech therapist to talk about speech and swallowing. I do slur sometimes, and besides therapy there is a way to break up phrases so people can understand you,” he says. “With drooling, people don’t want to go out, but you get help with cutting your meat and chewing carefully so you won’t be embarrassed. And now I have learned to take my pills one at a time with applesauce.”

Lee Parks has lived with Parkinson’s for about fifteen years. “It’s good to talk with each other – what works for me may work for you. We learn about different things that help, including exercise. It’s quite comforting to work with people who have the same problems,” he says.

### **Burlington Support Group**

Great River Medical Center  
1225 Gear Avenue, Blackhawk Room  
Burlington, Iowa

3rd Thursday at 2:00 p.m.

**Contact:** Tom Zimmerman at 319-753-0550

# MEDICARE OPEN ENROLLMENT: October 15 to December 7

by: **Jeremy Otte**

If you are currently on Medicare, you should be aware that Medicare's annual open enrollment period provides you a chance to examine your current coverage and make any changes with no penalty to you. You have from October 15 through December 7 to make these changes. After December 7, you are locked into your current plan until October 15, 2015.

Every year, the insurance companies change the premiums, deductibles, co-pays, and other parts of their plans. Also, they can change their formulary, which means the medications they cover can change. Thus, just because your plan worked for you this year doesn't mean the same plan will offer the same coverage next year. The open enrollment period provides you with a chance to review your plan and make the most of your Medicare plan for 2015.

By now, you should have received paperwork from your current carrier, an "Annual Notice of Change," explaining changes to your current plan for the coming year. It is important to read this notice and note the changes from your current plan and how that will impact the benefits you receive this year compared to 2015. Some plans will be terminating this year; if your plan is in this list, it is critical for you to make changes to your Medicare plan for 2015.

The most difficult part of the whole process is where to start and where you can go get assistance to answer the questions you have. The good news is that there are a number of resources you can access to assist you in this very important decision.

- [www.medicare.gov](http://www.medicare.gov) - the Medicare website. You can click the "Find Health and Drug Plans" green button to review your options and choose the best plan for your needs. You enter the medications you are on, current pharmacy, and other medical information. The website will then give you a list of plans that cover your needs and provide you the costs and options.
- [www.parkinsonaction.org](http://www.parkinsonaction.org) - Parkinson Action Network. From the home page, you can click into an article describing Medicare open enrollment and Part D and read an overview of basic Medicare questions, "Medicare Prescription Drug Annual Open Enrollment Q&A Reference," and find a link to Medicare's website.
- [www.dhs.wisconsin.gov/adrc/](http://www.dhs.wisconsin.gov/adrc/) - the state of Wisconsin's list of Aging and Disability Resource Centers. You can contact their Elder Benefit Specialists to assist you with questions about Medicare. They will provide you non-biased assistance in comparing Medicare plans. If you live in a state other than Wisconsin, please contact your state's Department on Aging to learn about the services they offer.

Your Medicare plan is a huge responsibility, so be sure to cover all of your bases and use the resources available to you. Make sure to compare all options and don't hesitate to ask for assistance in comparing plans. If you forget to cover one medication now, you will pay out of pocket for it for the next year and won't be able to make changes until the open enrollment period for 2016 occurs. 

## Why Do New Medications Take so Long To Get Approved?



**by: Jonathon Klein, B.S., C.C.R.C.**

Clinical Research Coordinator  
Regional Parkinson Center

It typically takes eight to ten years to get a new drug on the market. Depending on a number of other variables, a new medication could take even longer before it's in pharmacies. I have described many aspects of this lengthy process in the past. But why exactly does it take so long to get new treatment options approved? Here I want to summarize just a few reasons why new drug development can take more than a decade.

New drugs have to go through stages of testing. There are typically three or four of these stages for each new medication. Each stage involves a clinical trial, or study. By the third or fourth stage of development, these clinical trials usually last six months to a year. Sometimes late-stage studies last even longer (we currently have a study that has been going on for five years). Why are some of these studies so long? Because the only way to determine whether a drug is safe and effective over the long term is to expose patients to these new medications for extended periods of time. This can be a very long process simply because the studies involved can last for years.

Recruiting patients for clinical trials can also prove to be very difficult. This is often why hundreds of clinics and research centers have to be involved in each study. A recent trial that was completed for a new Parkinson medication required approximately 800 subjects to be recruited. It took two years to find enough people who were willing to volunteer. Often this entire process is held up simply because research sites and clinics cannot find the patients that are necessary to complete a study. This is why it is so important that people participate in these trials – because it allows for drugs to make it to pharmacies in as short a time as possible.

Another reason this process takes so long is simply because of the sheer size of clinical research projects.

Many people do not realize this, but these studies typically take place at hundreds of sites around the world. For example, we are running a study right now for a new medication that involves 120 clinics spread across North America, South America, and Western Europe. The pharmaceutical company that developed this new drug must facilitate all of the research that takes place for those 120 clinics. That is a lot of doctors, a lot of patients, a lot of information, and a significant amount of paperwork to keep track of. Orchestrating all of those moving parts takes a massive amount of time and planning. Organizing and analyzing all of the information that comes out of a project that size is a monumental undertaking. After a study has been completed, it can take up to a year to gather all of the information, analyze it, and then document it all in a single, concise report.

Because of everything that is involved in the clinical trial process, there is a good chance that there could be setbacks along the way. Sometimes physicians make mistakes in their research. Sometimes pharmaceutical companies make mistakes in how a new drug is made. This is the case with a new Parkinson's medication that we've been anticipating for a long time now. The studies have been completed for years. The data was analyzed a long time ago. But somewhere along the line, some significant mistakes were made. So now these mistakes have to be fixed, the reports have to be resubmitted, and then we hope the new medication will be approved. A variety of problems, either at the research sites or with the pharmaceutical companies, can add a significant amount of time to the entire process. In some situations it can add years to the timeline. These are just a few of the main reasons that medications take so long to get approved. The clinical trials themselves take years to complete, and finding appropriate patients who are willing to participate often holds up timelines. Coordinating research programs of this magnitude is very complex and involves thousands of people. And on top of everything, there is a potential for errors that can continually stall entire projects. In my next article, I'll tell you what is being done to speed this process up. 🌱

# support groups • exercise groups 17

This list is current as of November 1, 2014. Please contact Jeremy Otte at 414-219-7065 or jeremyo@wiparkinson.org with any changes.

To find Lewy body dementia support groups in your area, call the Lewy Body Dementia Association at 800-539-9767.

## Illinois All Groups

### Belvidere, IL

#### exercise group

Keen Age Center  
2141 Henry Luckow Lane  
Tuesdays from 9:15 – 10:00 a.m.  
(fee associated)  
Contact: 815-544-9893

#### caregiver group

Keen Age Center  
2141 Henry Luckow Lane  
Tuesdays from 9:15 – 10:00 a.m.  
Contact: 815-544-9893

### Dixon, IL

Town Square Center  
102 S. Hennepin, 2nd Floor Community Room  
2nd Thursday at 1:00 p.m.  
Contact: Anne Hilliard at 815-285-5575

### Libertyville, IL

Lake County Parkinson Support Group  
Condell Medical Center/Conference Center  
Condell Drive & Milwaukee Avenue (Rt. #21)  
4th Wednesday from 7:00 – 9:00 p.m.  
Contact: Wayne Zumstein at 847-949-1118 or 847-840-5700

### Northfield, IL

North Shore Senior Center  
161 Northfield  
Every Wednesday at 1:00 p.m.  
Contact: Michele Corrado at 847-784-6038

### Rockford, IL

#### support group

Wesley Willows  
4141 N. Rockton Avenue  
2nd Wednesday from 10:00 - 11:30 a.m.  
Contact: Faye Ford at 815-885-4897  
or Joyce Reiland at 815-229-3078

#### exercise group

Pedaling for Parkinson's  
YMCA of Rock River Valley  
I.D. Pennock Family YMCA  
200 Y Boulevard  
Starting September 8 on Mondays,  
Wednesdays, Fridays at 12:30 p.m.  
Contact: 815-489-1269

### young-onset group

Gloria Dei Lutheran Church  
4700 Augustana Drive  
3rd Tuesday at 7:00 p.m.  
Dinner meetings at 6:30 p.m.  
Contact: Sharon Habing at 815-398-1720

### Roscoe, IL

#### exercise group

Pedaling for Parkinson's  
Stateline Family YMCA, Roscoe Branch  
9901 Main Street  
Mondays, Wednesdays, Fridays at  
11:00 a.m. (free)  
Contact: Ann Hankins at 608-365-2261

## Indiana Support Groups

### Notre Dame/South Bend, IN

Michiana Parkinson Support Group  
Holy Cross Village, Andre Place  
54515 State Road 933 North  
1st Monday from 1:00 – 3:00 p.m.  
Contact: Dawn Hatch at 574-262-1739

## Iowa Support Groups

### Bettendorf, IA

#### Lewy body dementia support group

Trinity Medical Center  
4500 Utica Ridge Road  
Lower Level Classroom A and B  
3rd Tuesday from 7:00 – 8:30 p.m.  
Contact: Elizabeth Saelens at 309-523-3880

### Burlington, IA

Great River Medical Center  
1225 Gear Avenue  
Blackhawk Room  
3rd Thursday at 2:00 p.m.  
Contact: Tom Zimmerman at 319-753-0550

### Clinton, IA

Mercy Medical Center  
638 S. Bluff Boulevard  
South Campus Board Room  
2nd Saturday at 10:00 a.m.  
Contact: Don & Rita Schneider at 563-243-5585

### Davenport, IA

Center for Active Seniors  
1035 W. Kimberly Road  
3rd Saturday from 10:00 a.m. – Noon  
Contact: Eileen Benson at 563-332-6497

### Decorah, IA

Winneshiek Medical Center  
901 Montgomery Street  
4th Wednesday at 1:30 p.m.  
Contact: Linda Klimesh at 563-387-3038  
or Dawn Milligan at 563-387-3146

## Dubuque, IA

Stonehill Adult Daycare Center  
3485 Windsor Avenue  
4th Saturday at 10:00 a.m.  
Contact: Gerald Osterhaus at 563-582-7313

## Newton, IA

Wesley Park Center  
500 First Street North  
Garden Room  
3rd Monday at 1:30 p.m.  
Contact: Eloise Prater at 641-791-1018  
or Maralyn Stull at 641-791-2299

## Washington, IA

United Presbyterian Home  
1203 E. Washington Street  
2nd Tuesday at 3:30 p.m.  
Contact: Amy Kleese at 319-653-5473

## Michigan Support Groups

### Calumet, MI

Aspirus Keweenaw Home Health & Hospice  
311 Sixth Street  
2nd Monday at 1:00 p.m.  
Contact: Sarah Baratono at 906-337-5708

### Menominee, MI/Marinette, WI

Harbors Retirement Community  
1110 Tenth Avenue  
3rd Thursday at 10:00 a.m.  
Contact: Patricia Ihler at 906-863-9445

### Negaunee, MI

Negaunee Senior Center  
410 Jackson Street  
4th Monday at 1:00 p.m.  
Contact: Lindsay Juricek at 906-475-6266

## Wisconsin All Groups

### Appleton, WI

#### support group

Touchmark at West Prospect  
2601 Touchmark Drive  
3rd Thursday at 2:00 p.m.  
Contact: Rachel Watkins-Peterson  
at 920-832-9100

#### young-onset group

Emeritus at Fox River  
5800 Pennsylvania Avenue  
2nd Thursday at 6:00 p.m.  
Contact: Margaret Foth at 920-735-0477  
or Margaret Kaspar at 920-915-5488

### Baraboo, WI

#### support group

First Congregational United Church of Christ  
131 Sixth Avenue  
3rd Monday at 2:00 p.m.  
**Contact:** Sylvia Kriegl at 608-356-7096  
or Geri Schoenoff at 608-356-3473

### Bayfield–Apostle Islands, WI

#### support group

Location and meeting times vary;  
call for information  
**Contact:** Jeff Obst at 715-209-0807

### Brookfield, WI

#### support group

Brookfield Regency  
777 N. Brookfield Road  
1st Thursday at 2:30 p.m.  
**Contact:** Jeremy Offe at 414-219-7065

#### support group

Brookfield Public Library  
1900 N. Calhoun Road  
Harnischfeger Room  
3rd Tuesday from 2:30 – 4:00 p.m.  
**Contact:** 414-805-8326

#### exercise group

Brookfield Senior Community Center  
2000 N. Calhoun Road  
Tuesdays & Thursdays at 10:30 a.m.  
(fee associated)  
**Contact:** Lisa Glenn at 262-796-6675

### Brown Deer, WI

#### exercise group

Rite-Hite YMCA  
9250 N. Green Bay Road  
Tuesdays & Thursdays at 1:30 or 2:00 p.m.  
(fee associated)  
**Contact:** Megan Radowski or  
Liz Paly, PT, at 414-354-9622

### Chippewa Falls, WI

#### support group

Trinity United Methodist Church  
201 W. Central Street  
1st Wednesday at 1:30 p.m.  
**Contact:** Ursula Whelan at 715-723-3726  
or Dianne Wilson at 715-861-4169

### Eau Claire, WI

#### support group

Sacred Heart Hospital  
900 W. Clairemont Avenue  
Conference Room 15  
3rd Tuesday; call for time  
**Contact:** Elizabeth Milanowski, RN, at  
715-831-1045

### Fish Creek, WI

#### exercise group

Door County YMCA  
Northern Door Program Center  
3866 Gibraltar Road  
Tuesdays & Thursdays at 11:00 a.m.  
(fee associated)  
**Contact:** Carol Ash, PT, at 920-868-3660

### Fond du Lac, WI

#### support group

Aurora Health Center  
210 Wisconsin American Drive  
2nd Floor Meeting Room  
2nd Monday at 10:00 a.m.  
**Contact:** Cheryl Leonard at 920-477-5222  
or Cathy Foster at 920-907-0117

#### exercise group

YMCA  
90 W. Second Street  
Tuesdays & Thursdays from  
1:00 – 2:30 p.m. (fee associated)  
**Contact:** Celia Crespo, PT, DPT, at  
920-921-3330 x 337

### Grafton, WI

#### exercise group

Form & Fitness  
2020 Cheyenne Court  
Tuesdays & Thursdays at 2:00 p.m.  
(fee associated)  
**Contact:** Teresa Steffen, PT, at  
262-512-0206

### Green Bay, WI

#### support group

Aging & Disability Resource Center  
300 S. Adams Street  
2nd Tuesday at 1:00 p.m.  
**Contact:** Mary Beth Fumelle at  
920-655-3715

#### support group

SS. Edward and Isidore Parish  
3667 Flintville Road  
4th Wednesday from  
10:00 – 11:30 a.m.  
**Contact:** Carol Mueller at 920-655-0451

#### support group

Aurora BayCare Medical Center  
1160 Kepler Drive  
2nd Wednesday at 11:15 a.m.  
**Contact:** Kelly Gerl, PT, at 920-288-4705

#### exercise group

PWR! Fitness  
Aurora BayCare Sports Medicine Center  
1160 Kepler Drive  
Mondays, Wednesdays, Fridays  
at 10:00 a.m. (\$5 per class)  
**Contact:** Kelly Gerl, PT, at 920-288-5400

#### exercise group

The Aquatic Center for CP  
2801 S. Webster Avenue  
Mondays & Wednesdays from  
11:00 – 11:45 a.m. (fee associated)  
**Contact:** 920-403-7665

### Greenfield, WI

#### exercise group

Southwest YMCA  
11311 W. Howard Avenue  
Mondays & Thursdays at 1:00 p.m.  
(fee associated)  
**Contact:** J.T. Mathwig, PT, or MaryEllen  
Humpal, PT, at 414-546-9622

#### exercise group

Wisconsin Athletic Club  
5020 S. 110th Street  
Tuesdays at 11:00 a.m. (fee associated)  
**Contact:** Mary Spidell at 414-427-6500

### Hartford, WI

#### exercise group

Aurora Medical Center Washington County  
1032 E. Sumner Street  
Rehab Department  
Tuesdays & Thursdays at 12:30 p.m.  
(fee associated)  
**Contact:** Kim Beimel, PTA, or Meg  
Bowen, PTA, at 262-670-7233

### Hudson, WI

#### support group

Hudson Hospital and Clinics  
405 Stageline Road  
2nd Tuesday at 10:00 a.m.  
**Contact:** Marilyn Schuchman at  
715-386-1849

### Janesville, WI

#### support group

Cedar Crest  
1702 S. River Road  
1st Wednesday at 2:00 p.m.  
**Contact:** Darlene Larson at 608-754-4549

#### exercise group

SOL Fitness  
4113 Whitney Street  
Wednesdays from 9:00 – 9:45 a.m.  
(fee associated)  
**Contact:** Connie Udell at 608-302-7088

### Kenosha, WI

#### support group

Brookside Care Center  
3506 Washington Road  
Southport Room  
1st Wednesday at 2:00 p.m.  
**Contact:** Julie Topolovec at 262-657-7276  
or Dave Gourdoux at 262-694-6156

## King, WI

### support group

Wisconsin Veterans Home at King  
422 Bell Avenue  
3rd Wednesday at 1:15 p.m.

Contact: Michael Izzo at 715-252-2592

## La Crosse, WI

### support group

Gundersen Lutheran Hospital  
1900 South Avenue  
4th Tuesday at 2:00 p.m.

Contact: Julie Holzwarth at 608-782-7300

## Madison, WI

### support group

Asbury United Methodist Church  
6101 University Avenue  
3rd Thursday at 6:00 p.m.

Contact: 608-229-7628

### support group

Madison Public Library  
Sequoia Branch  
4340 Tokay Boulevard  
Meeting Room A  
Last Monday at 7:00 p.m.

Contact: Hilary Blue at 608-298-7520

### support group

Oak Park Place  
618 Jupiter Drive  
4th Wednesday at 3:00 p.m.

Contact: Katie Lowe at 608-663-8600

### caregiver group

East Madison/Monona Coalition on Aging  
4142 Monona Drive  
1st Tuesday at 4:00 p.m.

Contact: 608-229-7628

### young-onset group

St. Mary's Hospital  
700 S. Park Street, Bay 4  
1st Thursday at 6:00 p.m.

Contact: 608-229-7628

### exercise group

Bliss Flow Yoga  
3527 University Avenue  
Fridays from 2:00 – 2:45 p.m.  
(fee associated)

Contact: 608-233-2577

### exercise group

Harbor Athletic Club  
2529 Allen Boulevard, Middleton  
Multiple meeting days and times for PD  
exercise, Zumba, PDGlee, PD in Motion  
(fee associated)

Contact: 608-831-6500

### exercise group

Madison Senior Center  
330 W. Mifflin Street  
Tuesdays at 10:30 a.m. (fee associated)

Contact: 608-266-6581

### exercise group

UW Health Sports Medicine Center  
Research Park Fitness Center  
621 Science Drive  
Tuesdays & Thursdays from  
12:40 – 2:10 p.m. (fee associated)

Contact: Melissa Mattioda, PT, at  
608-265-8303

## Manitowoc, WI

### support group

Manitowoc Senior Center  
3330 Custer Street  
4th Thursday at 1:30 p.m.

No meeting July or August

Contact: Vicki Rathsack at 920-726-4626

### exercise group

Aquatic Exercises, YMCA  
205 Maritime Drive  
Call for meeting times (fee associated)

Contact: 920-682-0341

### exercise group

Holy Family Memorial Wellness Center  
1650 S. 41st Street  
Tuesdays & Fridays at 2:00 p.m.  
(fee associated)

Contact: Pamela Posvic, PTA at  
920-320-4600

## Marshfield, WI

### support group

Wesley United Methodist Church  
205 S. Maple Street  
3rd Thursday at 1:00 p.m.

Contact: Marilyn Seidl-Kramer at  
715-305-8224

## Milwaukee, WI

### social group

YPPT: Young Parkinson Professionals  
Together  
Meeting dates and places vary; for the  
latest information, go to [meetup.com/young-parkinson-professionals-together/](http://meetup.com/young-parkinson-professionals-together/)  
or contact Bob Norman at 414-550-1031  
or [ypptbob@gmail.com](mailto:ypptbob@gmail.com)

### exercise group

Group Yoga Therapy  
(safe for those with PD)  
Invivo Wellness  
2060 N. Humboldt Avenue  
Wednesdays from 9:00 – 10:30 a.m.  
(fee associated)

Contact: Tina Romenesko, PYT, RYT, at  
414-265-5606

### exercise group

Yoga for Parkinson's  
Milwaukee Yoga Center  
3514 N. Oakland Avenue  
Fridays from 1:30 – 3:00 p.m.  
(fee associated)

Contact: Susan Goulet at 414-332-3551

### veterans' PD support group

Clement J. Zablocki VA Medical Center  
5000 W. National, 3rd Floor  
Rec Hall/Gym, Room #3454  
1st Thursday from 11:30 a.m. – 1:00 p.m.

Contact: 414-805-8326

## Minocqua, WI

### support group

Ascension Lutheran Church  
Highway 51 South  
2nd Tuesday at 10:00 a.m.

Contact: Dennis Leith at 715-358-2207  
or Norma Semling at 715-545-3414

## Monroe, WI

### support group

Monroe Clinic  
515 – 22nd Avenue  
3rd Saturday; call for time  
Contact: Shelley Kimble-Welch and  
Steve Welch at 608-966-1398

## Mount Horeb, WI

### support group

Mount Horeb Public Library  
105 Perimeter Street  
3rd Tuesday from 10:00 a.m. – Noon

Contact: 608-229-7628

## Neenah, WI

### support group

Neuroscience Group  
1305 W. American Drive  
2nd Floor Classroom  
4th Thursday at 2:00 p.m.

Contact: Patrick Pelkey at 920-538-0144

### exercise group

Pilates for Parkinson's  
Neuroscience Group  
1305 W. American Drive  
Mondays & Wednesdays at 4:15 p.m.  
(fee associated)

Contact: Kathy Hergert at 920-720-1617

## New Berlin, WI

### support group

Steeple View Senior Community  
12455 W. Janesville Road  
3rd Wednesday at 6:30 p.m.

Contact: Debra Haight at 262-989-9278

### Oconomowoc, WI

#### support group

Oconomowoc Memorial Hospital  
791 Summit Avenue  
3rd Friday at 2:00 p.m.  
**Contact:** 414-219-7061

#### exercise group

Pabst Farms YMCA  
1750 E. Valley Road  
Wednesdays & Fridays at 1:00 p.m.  
(fee associated)  
**Contact:** Ashley Knuth, PT, DPT, at  
262-567-7251

### Oshkosh, WI

#### support group

Oshkosh Seniors Center, South Building  
200 N. Campbell Road  
3rd Tuesday at 2:00 p.m.  
**Contact:** Carrie Ottum or Paula Seeley  
at 920-232-5300

#### support group

Bella Vista  
631 Hazel Street  
2nd Tuesday at 4:00 p.m.  
**Contact:** Beth Waller at 920-233-6667

#### exercise group

Bella Vista  
631 Hazel Street  
Mondays & Fridays from 9:00 – 9:45 a.m.  
**Contact:** 920-233-6667

#### exercise group

LSVT® BIG  
Affinity Health System  
Outpatient Rehabilitation Services  
2700 W. 9th Avenue  
Call for information (fee associated)  
**Contact:** 920-236-1850

#### exercise group

Oshkosh Seniors Center, North Building  
234 N. Campbell Road  
Tuesdays & Thursdays from  
11:00 – 11:45 a.m. (fee associated)  
**Contact:** Amanda Ubbelohde at  
920-262-5300

### Portage, WI

#### support group

Bethlehem Lutheran Church  
W8267 Highway 33  
3rd Thursday at 2:00 p.m.  
**Contact:** Elayne Hanson at 608-742-2410

### Racine, WI

#### support group

Covenant Presbyterian Church  
40 Ohio Street  
Providence Room (upper level)  
3rd Tuesday from 2:00 – 3:30 p.m.  
**Contact:** Susan Monson at 262-639-8490

#### exercise group

YMCA of Racine  
8501 Campus Drive  
Mondays & Wednesdays at  
1:30 or 2:00 p.m.  
(fee associated)  
**Contact:** Lynda Knudtson at  
262-634-1994

### Rhineland, WI

#### support group

Oneida County Senior Center  
100 W. Keenan Street  
3rd Monday from 1:00 – 3:00 p.m.  
**Contact:** Stephanie at 715-369-6170 or  
Norma at 715-545-3414

### Richland Center, WI

#### support group

Richland Center Community/  
Senior Center  
1050 Orange Street  
4th Wednesday at 10:00 a.m.  
**Contact:** Maureen Smith, PT, at  
608-647-2623 or Jo Wenzler at  
608-553-0200

### St. Francis, WI

#### support group

St. Ann Center for Intergenerational Care  
Adult Day Services Unit  
2801 E. Morgan Avenue  
3rd Tuesday at 1:30 p.m.  
**Contact:** Hattie Goodman at 414-744-5654

### Seymour, WI

#### support group

Good Shepherd Services  
607 E. Bronson Road, Community Center  
1st Tuesday at 1:30 p.m.  
**Contact:** Lori Tesch-Janke at 920-538-2017  
or Carol Janke at 715-752-4247

### Shawano, WI

#### support group

City Hall  
127 S. Sawyer, River Room  
2nd Tuesday at 1:30 p.m.  
**Contact:** Joyce Hagen at 715-526-5104

#### exercise group

Total Fitness  
212 E. Green Bay Street  
Mondays & Thursdays at 1:15 p.m.  
(fee associated)  
**Contact:** Jean Darling, PT, or Jamie  
Mursaw, PTA, at 715-526-2899

### Sheboygan, WI

#### support group

Sunny Ridge Health & Rehabilitation Center  
3014 Erie Avenue  
3rd Tuesday at 2:00 p.m.  
**Contact:** Louis Borth at 920-400-1336 or  
Kristine Barts at 920-889-2602

#### exercise group

Aurora Sheboygan Memorial Medical Center  
2629 N. 7th Street  
Tuesdays & Thursdays from  
11:30 a.m. – 1:00 p.m. (fee associated)  
**Contact:** Stacey Rooker, PT, at 920-451-5550

### Shell Lake, WI

#### support group

Northwest Wisconsin Parkinson's  
Support Group  
St. Joseph's Catholic Church  
201 N. Second Street, Lower Level  
1st Thursday at 1:00 p.m.  
**Contact:** Jolene Colburn at 715-255-0357

### Stevens Point, WI

#### support group

Lincoln Senior Center  
1519 Water Street  
4th Tuesday at 1:00 p.m.  
**Contact:** Ellen Gryns at 715-343-6294

### Stoughton, WI

#### support group

Stoughton Area Senior Center  
248 W. Main Street  
4th Wednesday from 1:30 - 3:00 p.m.  
(no meetings in November or December)  
**Contact:** Hollee Camacho at 608-873-8585

#### exercise group

PWR! fitness  
Stoughton Area Senior Center  
248 W. Main Street  
Call for information; 6-week class with a  
PWR! instructor (fee associated)  
**Contact:** Hollee Camacho at 608-873-8585

### Sturgeon Bay, WI

#### support group

United Methodist Church  
836 Michigan Street  
1st Thursday from 12:30 - 2:00 p.m.  
**Contact:** Carol Moellenberndt at  
920-743-3476

#### exercise group

Door County YMCA, Sturgeon Bay  
1900 Michigan Street  
Tuesdays & Thursdays at 2:15 p.m.  
(fee associated)  
**Contact:** Carl Grota, PT, or Shawn  
Hanrahan, PTA, at 920-743-4949

### Summit, WI

#### exercise group

Aurora Medical Center Summit  
36500 Aurora Drive  
Outpatient Rehabilitation Gym  
Every Monday at 6:00 p.m. (free)  
**Contact:** Ashley Knuth, PT, DPT, at 262-434-2600

### Sun Prairie, WI

#### support group

Colonial Club Senior Center  
301 Blankenheim Lane  
Therapy Room  
4th Monday at 1:00 p.m.  
**Contact:** 608-229-7628

#### exercise group

YMCA of Dane County  
1470 Don Simon Drive  
Wednesdays at 11:00 a.m.  
(fee associated)  
**Contact:** 608-837-8221

### Verona, WI

#### support group

Verona Senior Center  
108 Paoli Street  
3rd Friday at 10:00 a.m.  
**Contact:** Becky Losby at 608-845-7471

#### caregiver group

Verona Senior Center  
108 Paoli Street  
3rd Tuesday at 10:30 a.m.  
**Contact:** Becky Losby at 608-845-7471

### Waukesha, WI

#### exercise group

Waukesha Family YMCA  
320 E. Broadway  
Mondays & Thursdays at 1:00 or 1:30 p.m.  
(fee associated)  
**Contact:** Kristine DeKarske, PT, at 262-542-2557

### Waunakee, WI

#### support group

Village Center of Waunakee  
Senior Center Stage  
333 S. Madison Street  
4th Tuesday at 2:00 p.m.  
**Contact:** 608-229-7628

#### exercise group

Waunakee Senior Center  
333 S. Madison Street  
Tuesdays from 1:30 – 2:15 p.m.  
(fee associated)  
**Contact:** 608-849-8385

### Wausau, WI

#### support group

Aging and Disability Resource Center  
1000 Lakeview Drive, Wellness Room  
3rd Tuesday at 12:30 p.m.  
**Contact:** Lucy Harvey at 715-848-3545  
or Mary Jane Horvat at 715-209-9195

### Wauwatosa, WI

#### young-onset group

Community Conference Center  
8700 Watertown Plank Road  
Lower Level, east side of WAC  
3rd Wednesday from 6:30 – 8:00 p.m.  
**Contact:** 414-805-8326

#### caregiver group

Community Conference Center  
8700 Watertown Plank Road  
Lower Level, east side of WAC  
2nd Saturday from 1:00 – 2:30 p.m.  
**Contact:** 414-805-8326

#### men's group

San Camillo, 10200 W. Bluemound Road  
2nd Monday at 1:30 p.m.  
**Contact:** Mitchell Smith at 262-796-1935

#### women's group

San Camillo, 10200 W. Bluemound Road  
4th Monday at 1:30 p.m.  
**Contact:** Gail Meilinger at 414-259-4521  
or Pat Mueller at 414-545-1487

#### exercise group

Group Yoga Therapy (safe for those with PD)  
Haleybird Yoga Studios  
9207 W. Center Street  
Fridays from Noon – 1:15 p.m.  
(fee associated)  
*Elevator access is not available in this building.*  
**Contact:** Biz Casmer at 612-801-0188

### West Allis, WI

#### support group

Aurora West Allis Medical Center  
8901 W. Lincoln Avenue, Meeting Room 1  
4th Tuesday at 7:00 p.m.  
**Contact:** Dale & Ellen Jante at 262-492-2439,  
Judy Tharman at 262-691-7342, or  
Mary Donovan at 414-817-0192

### West Bend, WI

#### support group

Cedar Ridge Retirement Campus  
113 Cedar Ridge Drive  
3rd Monday at 1:00 p.m.  
**Contact:** Kathy Stultz at 262-338-2821

#### exercise group

Kettle Moraine YMCA at River Shores  
705 Village Green Way, Suite 201  
Tuesdays & Fridays at 2:00 or 2:30 p.m.  
(fee associated)  
**Contact:** Beth Dieringer, PT, or Anne  
Langenfeld Smith, PT, at 262-247-1050

### Whitefish Bay, WI

#### support group

Jewish Community Center  
6255 N. Santa Monica Boulevard  
Room 1M50  
2nd Wednesday from 3:00 – 4:30 p.m.  
**Contact:** 414-805-8326

#### caregiver group

Jewish Community Center  
6255 N. Santa Monica Boulevard  
Room 3J15  
2nd Monday from 10:30 a.m. – Noon  
**Contact:** Miriam Oliensis-Torres at 414-963-2600

#### exercise group

Parkinson's Dance Class  
Jewish Community Center, Studio B  
6255 N. Santa Monica Boulevard  
Every Friday from 2:15 – 3:30 p.m.  
(fee associated)  
**Contact:** Susanne Carter at 414-871-1523

#### exercise group

Jewish Community Center  
6255 N. Santa Monica Boulevard  
Mondays & Thursdays at 1:30 p.m.  
(fee associated)  
**Contact:** Kerry Meskin, PT, at 414-964-4444

### Whitewater, WI

#### support group

Fairhaven Retirement Community  
435 W. Starin Road  
Lower Level Conference Room  
2nd Monday at 1:00 p.m.  
**Contact:** Julie Hollenbeck at 262-431-4772

#### exercise group

Mercy Fitness & Aquatic Center  
580 S. Elizabeth  
Call for meeting days and times  
(fee associated)  
**Contact:** 262-473-4900

### Wisconsin Rapids, WI

#### support group

Riverview Hospital Association  
410 Dewey Street  
4th Monday at 6:00 p.m.  
**Contact:** Randy & Jane Santora at 715-887-3805

## donations & tributes 22

We are grateful to the following donors for their support of those living with Parkinson disease. This list reflects gifts received from July 23 to October 17, 2014; contributions of \$250 or more are shown. While space considerations hinder our ability to list all donors, please know that we deeply appreciate every gift. Tribute gifts appear collectively under the name of the honored or memorialized person.

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The Bottle Milwaukee Charity Softball  
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### **\$999 to \$250**

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Michael Biondo  
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*Ken Muderlak's Art Show*

### **Gifts made in memory of:**

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## Waiting FOR A NEW APPROACH (continued from page 7)

the compensatory inhibition leads to optimal control with lower total daily doses, and the resultant level of control is much improved. The initial results with Ryтары are exciting, and we are eagerly awaiting the time when it can be prescribed. It will provide the next "major breakthrough" in treatment that many of our patients need.

There are a number of experimental agents we are evaluating in addition to Ryтары that offer other potential answers to treatment problems. A new version of amantadine appears to be quite effective in reducing or eliminating dyskinesia from levodopa. Oddly, it appears to have little effect on end-of-dose wear-off, and the exact mechanism of action is still debated. Other new agents block dyskinesia by working on a pathway that utilizes the central transmitting agent adenosine. While data is available only in a limited number of subjects, the

experimental agents we have used have shown promise in reducing dyskinesia and simultaneously improving end-of-dose wear-off. It is our hope that by using Ryтары as the main treatment agent and using these adjunctive treatments to control dyskinetic movements that may persist following conversion, stable long-term control can be achieved in the majority of patients without resorting to neurosurgical treatment.

I know many of you have become impatient with the current state of treatment. Luckily, significant improvement in the status quo should be available in the near future. For those of you who have become disheartened by where you find yourself with Parkinson disease, better options soon should keep you hopeful for major improvement in your ability to live with this disease. 



*The Network* is a publication for persons with Parkinson disease, their families and friends, and any interested individuals and groups in the Midwest. It is published by the Wisconsin Parkinson Association in cooperation with the Regional Parkinson Center.

Information provided concerning medical diagnosis, treatment, and research is not intended to answer individual problems but to report and explain current information about Parkinson disease. Feel free to contact the office if you have any questions. You should always ask your physician about specific treatment issues.

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become a member of  
the WPA and receive  
*The Network* magazine?

If you do not receive this magazine regularly, please consider joining our membership.

Your becoming a member helps those living with Parkinson disease by allowing us to enhance and expand our services to them and their families. Annual membership provides you with four issues of *The Network*, announcements of our education events, and information about local education and support programs so that you can contact others in your area.

For more information about membership with the Wisconsin Parkinson Association, please call Juliette Hayes at 414-219-7060.