

# THE network

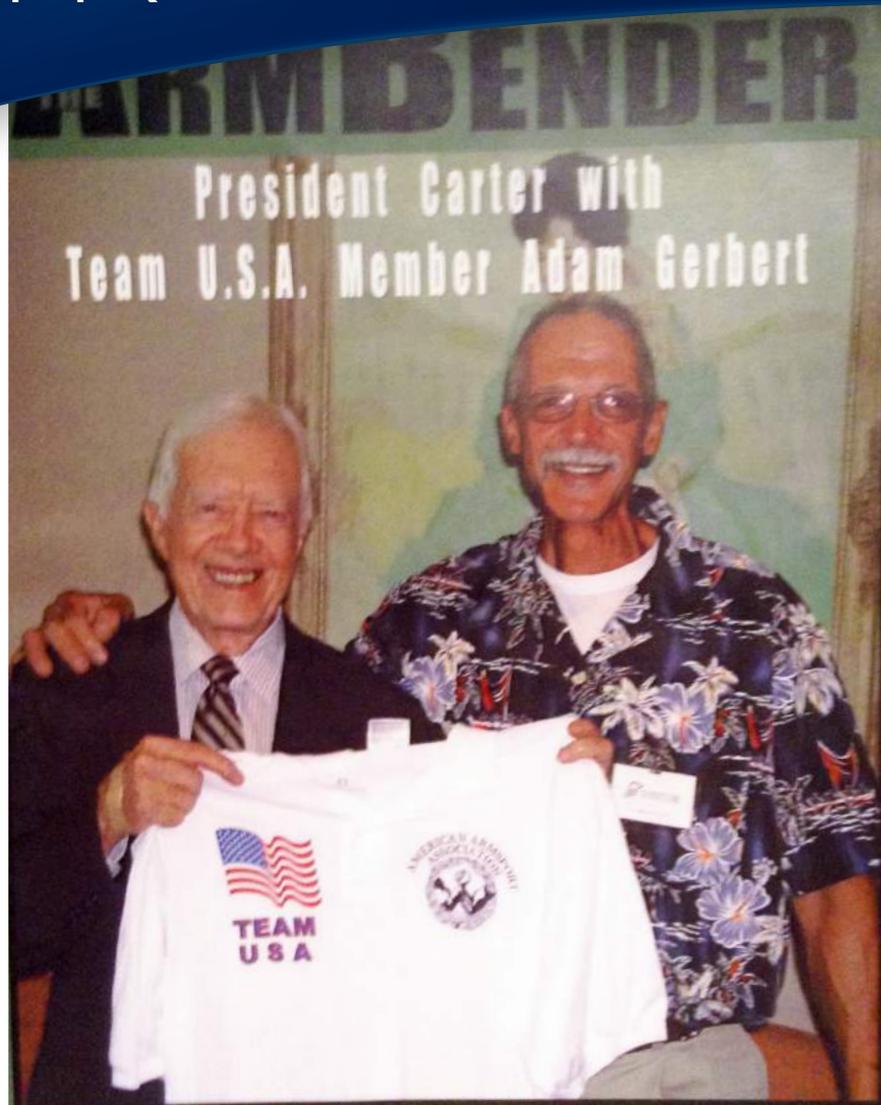
SPRING 2014

## SOUTHERN SON

Adam Gerbert

**ALWAYS FAITHFUL,  
WITH FELLOWSHIP AND  
SERVICE TO OTHERS**

...pages 11-12



OFFICIAL JOURNAL OF THE WORLD ARMSPORT FEDERATION



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



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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 photos:

**(Left)** Adam Gerbert, representing Team USA and the American Armsport Association, won gold and two silver medals in the World Armsport Federation World Championships in Japan, which took place from October 27 to November 1, 2005.

**(Right)** Adam says, “Former president Carter asked me for my autograph because he said I was the only world champion that came from Plains High School. He also asked if I would like to be one of his personal security; I declined, stating that he had Jesus watching over him, but I appreciated the honor of being asked.”

Mr. Carter is arranging to show Adam’s medals at the former Plains High School, the current visitor center for the Jimmy Carter National Historic Site.



## LETTER FROM THE President

**by: Richard Schumann**

WPA Board President

Dear Friends of the WPA,

The diagnosis of Parkinson disease is a devastating and life-changing event. Those of us at the WPA know this through seeing reactions at the newly diagnosed workshops we provide to help people come to terms with the condition and learn how to care for themselves and their families. We are very familiar with the day-to-day challenges of the disease; when we plan our annual symposium, we carefully consider which of the many topics will be of the most use to attendees. We are aware of the balance and responsibility of care partnering as we seek to build a better caregiving network for those who are living with Parkinson's.

What you may not know is that many of us on the board of directors and staff know all of this on a personal level.

Of our seventeen board members, three themselves have Parkinson's, the spouses of three have Parkinson's, and six members have parents or parents-in-law with Parkinson's. The remaining board members provide services to those living with Parkinson disease. There is only one board member who does not have direct, personal experience – and he is actively involved with the board, so his efforts certainly count!

My own beautiful wife, Dee, has lived with Parkinson's for forty years. She is the most tenacious, courageous, and optimistic person I know. Life absolutely is not easy for her or for me, but she works with her doctor to optimize what the medications can do for her, and now she is engaging in exercise, the results of which are pleasantly surprising us both.

A member of our staff, Juliette, also manages a life filled with Parkinson's: her Bill was diagnosed thirteen years ago at age 42. Having to retire from a profession he loved, as principal horn of the Milwaukee Symphony and Santa Fe Opera orchestras, was as difficult a transition as you can imagine. He now is pursuing a second career as a writer – and exercising! – and while each new day brings challenges, together they do their best to meet the days with kindness and laughter.

This is the long way around to saying, "You are not alone." As you know, Parkinson's is not exactly the same from person to person, but we can tell you we have a pretty good idea of what you are going through, and we know the effects on family, friends, and futures.

"Be kind, for everyone you meet is fighting a hard battle" is a quote alternately attributed to Plato, Philo of Alexandria, or Ian MacLaren, the pen name of Rev. John Watson. Whoever said it, our staff is very empathetic. Please give us a call if you have a question or we can help.

Sincerely,

*Richard Schumann*

# “Together”

## WE CAN ALL MAKE A DIFFERENCE



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

Director

Wisconsin Parkinson Association

All of us want to make a difference, but how many times do we all look at a huge task before us and think “no way can I do that” or “that is not possible.” Then, just when we feel alone facing what we perceive to be the mountain before us, a family member or friend says that they will join with us to attack the task, and they may even bring along one of their friends to help as well. Soon the job is done, and we’ve probably even had a good time along the way.

In my new position as director here at the WPA, as I surveyed the job before the WPA – providing education, support groups, fund raising, research, caregivers, social events, awareness, and professional training – the work seemed daunting. But as I continued to look at the WPA further, I also saw hard-working employees, amazing volunteers, devoted families, dedicated board members, generous donors, giving business partners, caring medical professionals, and – most of all – brave people who every day face the challenges that Parkinson disease can bring to them.

It became obvious to me that *alone* the job ahead for the WPA was big. But *together* it was possible and very probable. “Together” as a group, with each doing the part that he or she can, we can make a difference in the lives of those we love with Parkinson disease. What looks like a mountain from an alone place becomes more manageable when we do it as a group. What starts as *impossible* becomes *probable*, and the job at hand is soon done when we do it together.

It is with this “together we can” thinking that I want to encourage all of you to join the WPA and to thank those who already have joined. As an individual, family, small business, or donor – separately – we may think that our joining, volunteering, or donating really doesn’t make a difference. But it does make a difference when we all come together as members of the WPA working together to care for and support those whose lives have been affected by Parkinson disease.

Each donation and each membership helps support the mission of the WPA. Each donation is like a special friend coming alongside to help with the task that before seemed too big. If each person does whatever he or she can, which varies for each of us, when it comes together, it is always enough.

I encourage each of us to really think about what we can do and then to please join us in becoming a member. Additionally, be sure to invite at least one other person, a friend, child, parent, co-worker, or neighbor to join as well. “Together” we all can make a difference. 🌱

## COMMUNITY FUND-RAISING EVENT BENEFITS THE WPA

The Wisconsin Parkinson Association was the beneficiary of funds from a unique event last March 9. One of our new board members, Knut Apitz, celebrated his 75th birthday by hosting a party at the Italian Community Center in Milwaukee, inviting family, friends, and colleagues from all walks of his life – and what a life! The invitation read “husband, father, uncle, friend, chef, entrepreneur, educator, fisherman, golfer”; now he should add “Parkinson advocate and philanthropist.” In addition to enjoying comestibles and beverages, guests chose to make a donation to one of the organizations with which Knut has been closely involved: the Wisconsin Restaurant Association Education Foundation, the Milwaukee Area Technical College Foundation, and the Wisconsin Parkinson Association. The WPA is honored to be included in this way, and we are very grateful to Knut and his family and wide circle of friends for their generous support. 🌸



*photo by Rudy Neumeister*

**The Quinnies family, from left to right: Ken, Ricky, Barry (Knut's brother-in-law), Knut Apitz, Toska (Knut's sister), Gavin, and Craig.**

## 2014 KENTON KILMER Parkinson Disease Symposium

**FRIDAY, JUNE 27, 2014**

Country Springs Hotel and  
Conference Center  
2810 Golf Road  
Pewaukee, WI 53072

**Conference registration  
deadline: June 19**

**Registration fee: \$30 per person**

A day-long educational conference for those living with Parkinson's and their families. Topics include:

- What We Know in 2014 about the Cause and Natural Progression Rate of Parkinson Disease
- Early-onset Parkinson Disease
- Let's Talk about Stress!
- Navigating Senior Living and Care Options
- Preventing Falls for Patients with Parkinson Disease

- Basic Estate Planning Issues: Help Yourself, Help Your Family
- Practical and Inexpensive Tips to Adapting your Home for Safety and Convenience
- Resources and Networking for Caregivers
- Sleep Disruption in Parkinson Disease

**For more information or to register before June 19, call 414-219-7061.**

# Events Calendar

## **Saturday, May 17**

LaVerne Brewer Memorial Golf Outing  
Ironwood Golf Course (Sussex, WI)  
Registration and information: 414-219-7061

## **Friday, June 27**

WPA Kenton Kilmer Parkinson Disease Symposium  
Country Springs Hotel (Pewaukee, WI)  
Registration and information: 414-219-7061

## **Friday, August 15**

WPA "Living Well" Conference  
Davenport, IA  
Registration and information: Jeremy at 414-219-7065

## **Tuesday, September 16**

WPA Open  
The Legend at Brandybrook (Wales, WI)  
Information: 414-219-7061

## **Thursday, September 18**

WPA Newly Diagnosed Workshop free presentation  
Milwaukee Heart Institute of Aurora Sinai Medical  
Center (Milwaukee, WI)  
Registration and information: Jeremy at 414-219-7065

## **Friday, October 10**

WPA "Living Well" Conference  
Rockford, IL  
Registration and information: Jeremy at 414-219-7065

*Save the date*

## **WPA Open against Parkinson Disease**

### **Tuesday, September 16, 2014**

The Legend at Brandybrook

The third annual golf tournament to benefit the WPA, featured at this beautiful course in Wales, Wisconsin.

**For information and to request  
an invitation, call 414-219-7061.**



# YOUR LOGO HERE!

## **WOULD YOU LIKE TO SPONSOR *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* with a charitable contribution to support the WPA's mission.

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

# Library Spotlight

In this occasional column, we are pleased to feature various published books – written by people with Parkinson’s – that have come to our attention and may be of interest to our members. Please note, though: 1) the WPA does not endorse the content of any publication included in this list, and 2) the WPA has received no financial inducement for listing these publications.

Remember, the WPA has a free resource library from which you may borrow books, DVDs, and publications about Parkinson disease. We ask that members borrow an item for a maximum of four weeks and return it to us so that it will be available for others to read. **Visit [www.wiparkinson.org](http://www.wiparkinson.org) > Living with PD > Educate Yourself > Read** to see the library listing, or stop by our resource library the next time you are in the Regional Parkinson Center.

**Dunn, Laurence, *Ugly...but Funny***, © 2013 by New Friends Publishing, LLC, Lake Havasu City, AZ. ISBN-13: 978-0-9892486-7-9. Available at [www.amazon.com](http://www.amazon.com) or directly from the author at [lardia@att.net](mailto:lardia@att.net).

*What happens when a quiet geek tosses a half-dozen lab mice into a crowd of girls at a hockey game? Will the trauma of being squeezed between two 250-pound women in the back seat of a car ruin one shy teenager’s life? And how does he use the idea to prosper later in life? Join Laurence Dunn as he takes you back in time on a humorous adventure to his childhood. A rollicking good time will bring back fond memories for those who lived in the Fifties. For those born later, the stories will teach you something interesting about the past. It’s ugly, but funny.*

**Magill, Ph.D., Robert S., and Magill, M.S., Margaret G., *Shaken: Coping with Parkinson Disease***,

© 2012 by Xlibris, LLC, Bloomington, IN. ISBN-13: 978-1-4691-7665-9 hardcover, ISBN-13: 978-1-4691-7664-2 softcover. Available at [www.xlibris.com](http://www.xlibris.com), 888-795-4275, or [www.amazon.com](http://www.amazon.com).

*Robert Magill, who has Parkinson disease, and Margaret Magill, spouse and caregiver, have written Shaken to share their experiences of coping with Parkinson’s. Shaken offers help in learning to live satisfying lives within the parameters of the illness.*

**Schmitz, Gary, *There Is Life after Parkinson’s***,

© 2013 by There Is Life Books, a Division of Plan B Book Publishing, Southlake, TX. ISBN: 978-0-9851159-5-1. Available at [YourVirtualBookstore.com](http://YourVirtualBookstore.com).

*Gary Schmitz watched his life deteriorate over the years as he dealt with more and more challenges from Parkinson’s disease. At the point he felt like he had reached the bottom, he began making some life-changing discoveries. It began with a radical new approach to living and eating. Then he discovered boxing. Between the two, Gary has watched his life and his health progressively improve over the past few years. Join Gary as he goes from the depths of discouragement to a life of hope.* 🌱



# A LOOK AT THIRD-PARTY PAYERS



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

Medical Director  
Regional Parkinson Center

When you buy a Medicare Part D supplement, you are faced with a baffling number of options, all of which promise to provide you with your medications and payment for care not covered under Medicare. In the office, we get to see the response of these insurers when it comes time to fill a prescription or cover hospitalizations. It is readily

apparent that significant differences exist that directly impact your out-of-pocket expenses and can make what seems like a reasonably priced package into a far more costly one when you factor in the cost of services that you may need. I thought it was worthwhile to share our research into this topic. It is clear that the insurance companies do their best to cut their costs when it comes to paying for prescriptions and hospital stays to a point that borders on “practicing medicine without a license.” This is often a major problem in attempts to deliver the highest quality of care to our patients. As consumers of health care, you need to be aware of companies that make this more difficult when you have the opportunity to choose a plan each year.

As you know, any prescription is covered based on which “tier” it is placed in by the insurer, ranging from inexpensive Tier 1 drugs to agents in Tiers 2 to 4, which are more expensive and require higher copays. A website that offers the information on which tier a given drug is designated for each insurer, Fingertip

LEGEND	DOPAMINE								
	1, 2, 3, or 4 = Tier	N/C = non-covered	P = needs prior authorization by insurer to be filled	carbidopa-levodopa (generic)	Sinemet (name brand)	carbidopa-levodopa extended release (generic)	Sinemet CR (name brand)	carbidopa-levodopa orally disintegrating tablets (generic)	Parcopa (name brand)
AARP MedicareComplete	2	N/C		2	N/C	2	N/C	2	N/C
AARP MedicareRX Preferred	2	N/C		2	N/C	2	N/C	2	N/C
Aetna Medicare Open 3 Tier	1	3		1	3	1	3	1	3
Aetna Medicare Rx Premier	1	N/C		2	N/C	1	N/C	1	N/C
Anthem Medicare Preferred	2	N/C		2	N/C	2	N/C	2	N/C
Blue MedicareRx Premier (Anthem)	2	N/C		2	N/C	2	N/C	2	4
Cigna Medicare Rx Secure-Max	2	N/C		2	N/C	2	N/C	2	N/C
Express Scripts Medicare (Choice Plan)	2	N/C		2	N/C	2	N/C	2	N/C
Humana 5 Tier Plus	3P	N/C		3P	N/C	3P	N/C	3P	N/C
Humana Group Medicare National	2	N/C		2	N/C	2	N/C	2	N/C
Humana National - 5	3P	N/C		3P	N/C	3P	N/C	3P	N/C
Humana Walmart-Preferred Rx	3P	N/C		3P	N/C	3P	N/C	3P	N/C
Prime Ideal	1	N/C		1	N/C	1	N/C	1	N/C
State Employee/Public Employer Group	1	3		1	3	1	3	1	3
UHC Dual Complete	2	N/C		2	N/C	2	N/C	2	N/C
United Healthcare MedicareComplete	2	N/C		2	N/C	2	N/C	2	N/C
WPS MedicareRx Plan 1	2	N/C		2	N/C	2	N/C	2	N/C

Information as at April 2014

Formulary at [www.fingertipformulary.com](http://www.fingertipformulary.com), is where our information was gathered. This is a useful site to compare the policies of different companies and identify those that place your medications in higher-tier groups. It is a bit time consuming to do, since each drug needs to be entered and then cross-referenced to a long list of potential policies for your state. I selected Wisconsin and chose a number of policies from a variety of companies that I frequently encounter in the office but did not go through every policy listed.

As you can see, there is a wide range of how medications are reimbursed. The fact that levodopa-containing medications are not universally Tier 1 agents is telling. Levodopa remains the most effective treatment for Parkinson disease and has been generic for years, so placing it in Tier 2 or 3 is simply farming the Parkinson population for corporate profits. This is reflected by the observation that companies that placed levodopa in higher tiers tended to place all synthetic agonists into high tiers as well, even

though pramipexole and ropinirole are generic. As expected, Neupro is usually a Tier 2 or 3 drug since it is a branded product. UHC Dual Complete chose to make Neupro a non-covered agent, and UnitedHealthcare MedicareComplete covers it in Tier 4, which limits treatment options for patients with this plan. Seroquel, which is the only easily employed atypical neuroleptic anti-anxiety agent for Parkinsonians, is non-covered by a significant number of companies, which is interesting since all other agents in this class (other than Clozaril) cannot be used in people with Parkinson disease. Another peculiar finding is that selegiline, a generic MAO-inhibitor, is frequently in the same tier as Azilect, which is a branded, more expensive MAO-I. If you have cognitive problems, you should be careful in looking at AARP policies, which appear to have very limited options based upon our review. As you survey the numbers on the chart, it is easy to see that “premium” programs from the same company

*Continued on page 9*

COMT INHIBITOR	SYNTHETIC AGONISTS				MAO INHIBITORS		ATYPICAL NEUROLEPTIC	ANTIDEPRESSANT	CHOLINESTERASE INHIBITORS		
	pramipexole	ropinirole (generic)	Requip (name brand)	Neupro	Azilect	selegiline			venlafaxine ER	donepezil (generic)	Aricept (name brand)
N/C	3P	2	N/C	N/C	3P	3P	N/C	3P	2	N/C	4
N/C	3P	2	N/C	4	3P	3P	N/C	3P	2	N/C	4
3	1	1	3	3	2	1	3	1	1	3	2
N/C	2	1	N/C	4	2	2	N/C	1	1	N/C	2
N/C	2	2	N/C	N/C	3P	2	N/C	3P	2	N/C	N/C
N/C	2	2	N/C	N/C	4	2	N/C	3P	2	N/C	N/C
4	2	2	N/C	N/C	3P	2	N/C	2	1	N/C	3P
3P	2	2	N/C	3P	3P	2	N/C	2	2	N/C	4
N/C	2	2	N/C	4	3P	3P	N/C	2	1	N/C	4
N/C	1	1	N/C	2	2	2	N/C	1	1	N/C	3
N/C	2	2	N/C	4	3P	4	N/C	2	1	N/C	4
N/C	2	2	N/C	4	3P	3P	N/C	2	2	N/C	4
N/C	1	1	N/C	2	2	1	N/C	1	1	N/C	2
3	1	1	3	3	2	1	3	1	1	3	2
N/C	3P	2	N/C	N/C	3P	3P	N/C	3P	2	N/C	4
N/C	3P	2	N/C	4	3P	3P	N/C	3P	2	N/C	4
N/C	2	2	N/C	N/C	3P	2	N/C	2	2	N/C	3P

## A LOOK AT THIRD-PARTY PAYERS

(continued from page 8)

often will cost you more money in copayments than their “standard” policies; there is no apparent reason for this difference that we can gather from our review. In this survey, Aetna, Prime Ideal, and the State Employee group policies were the “friendliest” to Parkinsonians, while AARP, Anthem (Blue Cross), Cigna, most Humana policies, United Healthcare, and WPS were the worst in terms of coverage. This is only one element of the coverage that is offered, and there may be other redeeming aspects to these insurance programs, but from the standpoint of medication coverage, they fail to offer the most common Parkinson treatments at reasonable rates. We plan to keep this information updated and present it in future issues of this magazine as the window for changing policies approaches at the end of the year.

One other aspect of insurance plans needs to be addressed. Recently some of the large insurance plans have restricted the physicians they will reimburse under their plans. The basis of their decisions is unclear, but one assumes it is based on cost. Although they claim that this policy can be waived for patients with complex problems who have been under the care of a specialist for years, appealing the decision has met with immediate denial even after multiple attempts. It seems clear that offering a waiver is a lot cheaper than providing one. The AARP programs and UnitedHealthcare have been the first to try this cost-control policy, but other companies may follow their lead in the future. If you value continuity of care by a specialist who knows your case, you should read the terms of any policy to see if you can maintain this professional relationship with any policy you consider.

You also need to be aware of a new twist on being admitted to a hospital. We recently have had problems with UnitedHealthcare, which has insisted that patients be placed on an “observation” status at the time they

enter the hospital. This is different from being admitted. The understanding was that unstable medical problems would necessitate a formal admission, but getting the company to review the changing status of the patient proved to be very difficult (“all of our reviewers are behind and will get back to you”). If you are not admitted to a hospital, all the fees that are generated by being there are your responsibility – observation puts you into a state of limbo that is viewed as a very protracted office visit. In our original debate with UnitedHealthcare, I was informed that Parkinson disease is not considered a basis for admission, and they would consider only epilepsy, stroke, or encephalitis as valid causes for hospitalization. Apparently a new angle is to relegate Parkinson disease to a new category (not sure what they are going to call it if it is no longer a disease). If you face hospital admission, you should insist on knowing if you have really been admitted or relegated to “observation” status, since the financial repercussions could be sizable. We are still debating this issue with UHC but will keep you informed of the outcome. If an insurer decides that Parkinson disease is not a serious medical problem, you should start shopping for a different carrier.

As usual in this world, one has to be vigilant as a consumer. I was impressed that the Medicare Part D carrier I pay for my own coverage is one of the worst ones I reviewed. Come the end of the year, I am changing my policy to another firm based on what I learned preparing this article. These companies will continue to offer coverage that may not best meet your needs if they are still selling it to an unknowing public. As with any decision on insurance coverage, you need to consider your personal situation and the specific policy and its terms to determine what best fulfills your requirements. Do some research on your own and find a company that meets your needs rather than just accepts your money. 

# Ask the Doctor



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

Neurologist

Aurora Advanced Healthcare

*Disclaimer: Below are brief answers to people's questions who have written*

*in; 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.*

## ***I am a care provider. What can I expect in the future as my spouse ages with Parkinson's?***

Parkinson disease can amplify the challenges of aging to a whole new level for some. Common problems such as arthritis, back pain, imbalance, or memory loss can affect those with Parkinson's even more so.

In very general terms, the large majority of patients with PD don't end up bedridden. Many will require the assistance of a cane, a walker, or a wheelchair either for occasional or frequent use. The timing and necessity of these aids is quite variable and dependent on how aggressive the Parkinson's is for each individual. Other health complications can affect the individual as well and contribute to Parkinson-related issues and frailty. Some who become very frail may require the need of additional support that a nursing home or skilled nursing facility offers.

Parkinson-related dementia can be relevant for some but not all, and the tough decision between remaining at home versus transitioning to a memory unit may be an issue to grapple with.

But, alas, no two Parkinson's patients are alike, so it is impossible to predict any of this!

Every couple, regardless of whether one has Parkinson disease or not, should have a sit-down discussion about what each partner may want, should the other become incapacitated or unable to make his or her own decisions. Discuss with each other weighty topics such as: the idea of nursing-home care, a feeding tube, a breathing tube, CPR, electric shocks to the heart, and even hospice care. None of these is specific to Parkinson disease by any means. And when you both are thinking about it, go ahead and establish a health-care power of attorney and living will for each of you. Hopefully neither of you will need to use these things anytime soon, but when you do, it makes life so much easier for the spouse, family members, and medical providers too.

## ***What is the definition of a caregiver? I think of myself as the spouse, not the caregiver.***

Unfortunately, in life, unless one remains single and without close friends or relatives, one will sooner or later find themselves having slipped into the role of caregiver or will be on the receiving end of a caregiver. Sometimes this is an abrupt change. Sometimes the change is gradual and seemingly imperceptible. A caregiver is someone who helps a patient in day-to-day activities, and these may include preparing and feeding meals to the patient, dressing or changing clothes, administering medications, or transporting the patient back and forth to appointments. It is often a spouse, sibling, close friend, or relative who is the caregiver. The role of caregiver is often very challenging; some would say it seems a "thankless" job. And one doesn't get paid for it in any form of monetary reimbursement. But the value is certainly there. 🌸

***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.

## cover story

### SOUTHERN SON

# Adam Gerbert

## ALWAYS FAITHFUL, WITH FELLOWSHIP AND SERVICE TO OTHERS

Working out at the Kettle Moraine YMCA at River Shores in West Bend, Wisconsin, is a new experience for Valentine Adam Gerbert. Adam was diagnosed with Parkinson's only six or seven months ago, but he and his wife, Sharon, were quick to seek out Parkinson-specific exercise and found this program about fifteen miles from their home; he has been working out here for the past three months. Adam is diligent and persistent about exercising – but even more, he helps to motivate others in the program.

Anne Langenfeld Smith and Beth Dieringer, the physical therapists who run the Parkinson exercise group, have been impressed with how easily Adam blends in with the class – members range from those with some cognitive impairment to those who are still working and everything in between.

"Adam is a really upbeat guy," Anne says. "He greets other participants and chats it up with them. He pays attention to those who struggle, telling them 'good job' when they succeed in an exercise activity. He's a cheerleader. I love having him in class for that."



Adam doesn't seem to feel he is doing anything special. "I sort of get along with everybody," he says.

Humbleness and generosity of spirit are just part of the life of this Plains, Georgia, native.

Adam, known in his youth as Val, grew up with Chip (James Earl III) Carter, a son of former president Jimmy Carter, and became a close friend of the family; as Adam didn't have a father growing up, he looked on Mr. Carter as a father figure and mentor. Adam was at the dinner table in the governor's mansion when Mr. Carter announced to his family he would be running for president. Adam and Chip both attended Plains High School, which closed in 1979 to become the museum and visitor center of the Jimmy Carter National Historic Site.

With a friend in Atlanta, Adam joined an arm wrestling club for fun. It turned out to be a lot of fun, and Adam went on to travel throughout the United States, winning many national championships and enjoying the camaraderie of like-minded enthusiasts along the way. From 1988 to 2009, he competed on a few national teams, traveling to – among numerous locations – Suzdal, Russia (2003), São Paulo, Brazil (2004), and Utsunomiya, Japan (2005), for the World Armsport Federation World Championships, regularly winning Men's Masters and Ultra Masters divisions, in either left or right hand or both, in the 78 kg (172 pounds) category.

As gentlemanly and modest as ever, Adam had been attending Beth's class for six weeks before he mentioned to her in passing his arm wrestling achievements.

Adam served his country in the 2nd Battalion, 26th Marine Regiment during the Vietnam War from December 1968 to January 1970. His duty was to make sure everybody came

*Adam says, "This picture was taken in Vietnam in 1969. We were a support force, an invasion force from ships by helicopters. My duties ranged from being a squad leader for flamethrowers, an M60 machine gunner, and a 50-caliber machine gunner from the top of a 100' tower. Our job was to maintain an opening to allow other units to pull back while we drove the enemy forces back."*



*During the competition in Japan, Adam took the opportunity to meet people and make friends through sports. Left, Myume, an arm wrestler from Japan at the competition, with Adam.*

back. Adam says, “We had a chance to return from Vietnam and have families. Not everybody did, so we should do what we can to help others. That’s why I started the Vietnam Veterans Memorial Garden Foundation (1995-2008).” Loyalty to his brothers in arms prompted him to donate a percentage of his arm wrestling winnings. He also has hosted challenge matches within the arm wrestling community as fund raisers for a fellow wrestler who was undergoing financial hardships due to Parkinson disease.

Adam himself is no stranger to adversity. In 1994, he underwent a radical neck dissection for neck cancer; he was on a feeding tube until recently. He deals with acid reflux and thyroid issues in addition to Parkinson’s symptoms. Adam spent three months in an intensive care unit before being diagnosed with Parkinson’s and started on appropriate medication for his symptoms.

Now he is making the most of getting his strength back with physical therapy and exercise. “We walk on a treadmill forward and backward for thirty minutes and do exercises specific for Parkinson disease – stretching, raising and lowering our voices,” he says. “I find what I need to do to be

able to maintain my health because the drugs can make you anxious or confused.”

Anne says, “Adam walks at a pace that a normal person would have to jog to keep up with him. The younger people in class think: If he can walk that fast, I can too – so Adam shows by example as well as empathizes and shares experiences with others. Adam is hitting it hard, and he provides support and encouragement to our other participants.”

Adam and Sharon have a daughter and two sons, three grandchildren, and one great-grandchild, all who live in Georgia, whom they visit often. Adam says, “I tell my grandchildren it doesn’t matter what cards you’re dealt in life – just play the cards you’re dealt.”

But by being friendly, loyal, and supportive to others, you also conduct yourself with grace along the way. 🙏

— Juliette Hayes



*Adam trained hours each day for the arm wrestling competitions with special equipment in his basement.*

# Insurance

## RESOURCES AND ASSISTANCE



**by: Jeremy Otte**

Director of Outreach and Education  
Wisconsin Parkinson Association

Every year, insurance companies can change their plans' premiums, deductibles, copays, and formularies. How do you figure out what this means to you? Will visits to your specialist be covered? Will the same services now cost you more? Will your premium go down but your copay and deductible go up?

When renewing your plan, it can be overwhelming to make sure all your needs are covered. The dermatologist you have been seeing for ten years may no longer be covered by your new plan. Or if he or she is covered, it may cost you twice as much out of pocket for your deductibles than it had the previous year.

Do you know whom to turn to for assistance? If you have Medicare and the Internet, you can go to [www.medicare.gov](http://www.medicare.gov), click "Find health and drug plans," and use the "Medicare Plan Finder" to determine which health and drug plan makes the most sense for you. Enter your zip code, medications, and other health information, and it provides you with the best insurance options. If you don't have Internet, contact your local Aging and Disability Resource Center and speak to a benefits specialist. He or she will put your health data into the Medicare website; you can discuss your results and get help in deciding what makes the most sense for you and your current needs.

It is important to review your plans carefully. I worked with someone a couple of years ago who thought he

had made some great changes to his prescription plan. He went from having 15 of 18 medications covered with his old plan to 17 of 18 medications covered with a new plan. He was very excited until January came around. The old plan cost him \$15 a month, as the three medications that were not covered were generics. His new plan was going to cost him \$800 a month – the cost of the one medication that was not covered in his plan. If he had read carefully, asked his pharmacist for advice, met with a benefits specialist at the Aging and Disability Resource Center, or got help from a family member, he could have saved himself more than \$9,000 that year. Many people don't realize that their local pharmacist can be a resource. If you call ahead and set up an appointment, the pharmacist will meet with you to discuss your medications and help you determine which plan may make the most sense for you.

Don't assume that everything will stay the same each year or that your doctor will be covered the same as in the past. If you have a health plan, go online to see whether your doctor will still be "in network" the following year. As plans change, in-network physicians will also change. The only way to ensure that you can keep your doctor is to check beforehand, not after the plan has started.

The bottom line is: use your resources. Insurance plans are hundreds of pages long and can be very confusing. Contact your local pharmacist for input on your medication plan. Use the Aging and Disability Resource Center and their experience to make good choices on your health plan. These resources can mean the difference in your spending thousands of dollars and saving thousands of dollars each year. 🌸

# Clinical Research UPDATE



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

Clinical Research Coordinator  
Regional Parkinson Center

It's time for an update from your friendly neighborhood research coordinator.

As many of you know, we continue to test the newest medications here at the Regional Parkinson Center. So let's discuss what's going on with regard to the latest and greatest experimental treatment options.

A new drug called droxidopa has recently been approved in the United States. This medication is for Parkinson patients who have problems with low blood pressure, lightheadedness, and dizziness upon standing. It appears to be very safe and effective, and it should be in pharmacies sometime in the second half of 2014.

A new medication called pimavanserin may be approved sometime soon. This drug is specifically designed for people with Parkinson disease psychosis (PDP), who may experience problems with visual distortions, hallucinations, and delusions. Recent literature suggests that somewhere between 10% and 20% of people with Parkinson's experience PDP. Numerous trials have been completed with this new drug. The data has been analyzed, and the reports have been sent to the appropriate authority. At this time, it appears that the FDA is reviewing those reports. If the information looks good, then pimavanserin should be available in the near future.

Another medication (Rytary, or IPX066), a new form of carbidopa/levodopa, has been in limbo since late 2012. This drug was nearly approved a year and a half ago, but the pharmaceutical company ran into some logistical problems. The latest reports suggest that those problems have since been fixed, and now the

medication is up for approval once again. That means that the FDA is going to reexamine all the updated information related to the drug and the pharmaceutical company. Once the review is complete, the FDA will make its decision as to whether or not the drug can be officially approved.

Many other experimental medications are making their way through the clinical trial process right now, including:

1. A new medicine used to treat dyskinesias (the writhing, twisting, involuntary movements that many patients experience). If proven to be effective, this would give us a treatment option to deal with a very common problem for people with Parkinson's.
2. A new drug that has the potential of greatly reducing symptoms in patients with both early and advanced stage Parkinson's. For patients whose current medications just don't seem to be enough, this medication may provide the relief that is needed.
3. Three additional new forms of carbidopa/levodopa. Without getting into specifics, these new forms are all attempts to improve the main medication that is used to treat Parkinson disease.

A recent article indicates that as many as 25 other medications are being tested at this time. That's a total of 33 new drugs that are being evaluated for the treatment of Parkinson disease. It's simply too early to tell how many of the 33 will be proven to be safe and effective. Some of them may never make it past Step One. But with that many experimental products out there, you can see how much effort is being put forth to find new treatment options. **If you ever have questions pertaining to new medications, please call me directly at 414-219-5774.** 🌱

## CAN WE DISTINGUISH BETWEEN ESSENTIAL TREMOR AND PARKINSONIAN SYNDROMES?

# Neuroimaging Offers New Hope



**by: Maggie Wallendal, M.S.W.**

Associate Director  
Parkinson Research Institute

and



**Thomas Fritsch, Ph.D.**

Director  
Parkinson Research Institute

How is Parkinson disease (PD) diagnosed? A diagnosis is usually made by a trained physician,

sometimes by a movement disorders specialist who starts with a medical examination. These exams typically assess signs and symptoms of parkinsonism. The four “cardinal symptoms” of Parkinson disease include: 1) tremor, usually at rest, 2) rigidity or stiffness, 3) slowness or lack of movement, and 4) postural instability, which leads to balance problems. To be diagnosed with PD, you need to present with at least two of the four signs and symptoms. Clinical exam is currently the gold standard for diagnoses.

Accuracy of clinical diagnoses has been estimated at 85%, on average. This shows the ability of many neurologists to “get the diagnosis right.” However, there are some patients for whom a clinical examination is not sufficient to differentiate

between essential tremor (ET) and parkinsonian syndromes (PS). In response, General Electric (GE) has developed an imaging drug – a radioactive isotope – called DaTscan™. Via SPECT imaging, a nuclear medicine imaging technique that provides 3D pictures of the brain, DaTscan reflects dopamine transporter density. This density, indirectly, provides general information about the amounts of remaining dopamine in the brain.

The current FDA-approved use of this imaging agent is to distinguish between ET and PS (see **BOX 1**). PS include Parkinson disease, multiple system atrophy, and progressive supranuclear palsy (discussed in the summer 2012 issue of *The Network*).

**BOX 1** *Essential tremor seems to have genetic components. The symptoms of ET typically start on both sides of the body in the hands, feet, head, or voice. When hand tremors are present, they are most likely action tremors, which occur when you’re doing something (like holding up a coffee cup). By contrast, Parkinson disease is characterized by onset on one side of the body, resting tremor (that is, a tremor while your hands are resting on your lap), slowness of movement, loss of balance, and stiffness/rigidity.*

So imagine the following scenario. You notice that you have tremors in both of your hands. Your doctor recommends SPECT imaging with DaTscan. If you have bilateral tremors but do not show decreased dopamine transporters in scan results, this may indicate that you have ET. By contrast, if your scan results show that dopamine transporter density is decreased, then PS might be considered (FIGURE 1).

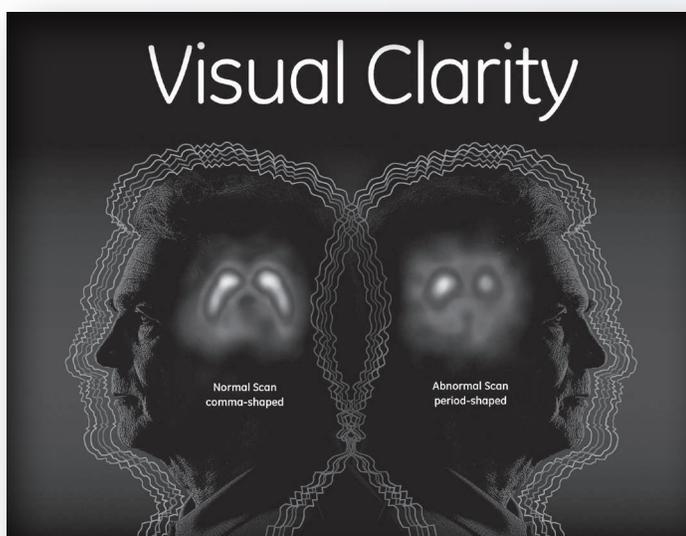


Image courtesy of GE Healthcare

**FIGURE 1** This image shows how dopamine transporter density is displayed in scan results. The person in the left of the photo has two comma-like shapes; these show bilateral binding of the radioactive isotope, indicating a lack of neuronal degeneration that may be seen in a condition such as ET. The right image shows a lack of DaTscan binding on one side, reflective of degeneration of dopamine neurons that may be seen in PS.

The scanning procedure is somewhat similar to having a CT scan or an MRI. The first step is to have a physician evaluate you for medical contraindications. If you are appropriate for the scan, you first receive

a thyroid-blocking agent to prevent uptake of radioactive iodine; then, about an hour later, you receive an injection of the radioactive material (DaTscan). Last, you would be instructed to lie down on a table that slides into a large scanning machine (camera).

In a few hours, DaTscan distributes within the body and binds to dopamine transporters in your brain – and this allows the camera to detect or “see” dopamine transporters. The majority of the radioactive injection will be excreted from your system within 48 hours from time of injection.

### PRI Research with Support from GE Healthcare

The PRI, with support from GE Healthcare, is conducting a research study. Here’s a brief summary of our current study.

*PRI’s role is to recruit persons clinically diagnosed with Parkinson disease. Once diagnosed, they would register for PRI’s brain bank program. Then those subjects would have a free-of-cost scan conducted at Froedtert Hospital. The overall goal: to examine relationships among clinical results, DaTscan images, and neuro-pathological results. There is a need to see how closely clinical diagnosis and DaT SPECT imaging correlate with the true “gold standard” of diagnosis, the neuro-pathological results.*

We look forward to our ongoing and future work with support from companies such as General Electric Healthcare. This is yet another way the PRI’s brain bank is being used to increase scientific knowledge about Parkinson disease. 🌱

# support groups • exercise groups 17

This list is current as at May 7, 2014.  
Please contact Raven Hamilton at  
414-219-5768 or ravenh@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 Support Groups

### 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 at 10:00 a.m.  
**Contact:** Faye Ford at 815-885-4897  
or Joyce Reiland at 815-229-3078

### 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**  
Staline 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:** Ruth & Bill Newton at 217-453-2481

### 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

## Waukon, IA

Veterans Memorial Hospital  
404 First Street Southeast  
3rd Thursday at 1:00 p.m.  
**Contact:** Dan & Sarah Welsh at  
563-568-2049

## 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

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

## wisconsin All Groups

### Appleton, WI

**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 Otte 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**

Rife-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

**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  
Call for meeting day and time  
**Contact:** Cheryl Leonard or Cathy Foster  
at 920-477-5222

**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

**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

**exercise group**

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

**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 Beigel, 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 Gourdeaux 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:** Hannah Wentz at 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:** Hannah Wentz at 608-229-7628

**young-onset group**

St. Mary's Hospital  
700 S. Park Street, Bay 4  
1st Thursday at 6:00 p.m.  
**Contact:** Hannah Wentz at 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:** Hannah Wentz at 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 & Thursdays at 1:00 or 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:** Hannah Wentz at 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:** Peg Theder at 920-261-9805

**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  
200 N. Campbell Road  
South Facility  
3rd Tuesday at 2:00 p.m.  
**Contact:** Paula Seeley at 920-232-5305

#### 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

### Portage, WI

#### support group

Bethlehem Lutheran Church  
W8267 Highway 33  
3rd Thursday at 2:00 p.m.  
**Contact:** Elaine 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

#### exercise group

Music 'n Motion  
The Richland Hospital  
333 E. Second Street  
Fridays at 1:00 p.m. (fee associated)  
**Contact:** Maureen Smith, PT, or  
Maria Bohl, DPT, at 608-647-6321 x 2402

### 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  
Kristin 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  
502 N. Second Street, Lower Level  
1st Thursday at 1:00 p.m.  
**Contact:** Gary & Monica Burkart  
at 715-468-4334

### 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.  
**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 of charge)  
**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:** Hannah Wente at 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

### Walworth, WI

#### support group

Inspirational Ministries – Pederson Center  
Highway 67 and F  
3rd Wednesday at 2:00 p.m.  
**Contact:** 414-219-7065

### 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:** Hannah Wente at 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 414-988-5262  
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

#### caregiver group

Village at Manor Park  
3023 S. 84th Street (enter at blue canopy)  
Assisted Care area – G Lounge  
4th Tuesday at 2:00 p.m.  
**Contact:** Kate Olszewski at 262-672-0041

### 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

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*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 and Parkinson Research Institute.

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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Director, PRI  
[thomasf@wiparkinson.org](mailto:thomasf@wiparkinson.org)

**Raven Hamilton**  
Program Coordinator  
[ravenh@wiparkinson.org](mailto:ravenh@wiparkinson.org)

**Juliette Hayes**  
Communications Manager  
[julietteh@wiparkinson.org](mailto:julietteh@wiparkinson.org)

**Jeremy Otte**  
Director of Outreach & Education  
[jeremyo@wiparkinson.org](mailto:jeremyo@wiparkinson.org)

**Maggie Wallendal, M.S.W.**  
Associate Director, PRI  
[maggiew@wiparkinson.org](mailto:maggiew@wiparkinson.org)

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A publication of the Wisconsin  
Parkinson Association | Milwaukee, WI

Wisconsin Parkinson Association  
945 N. 12th Street, Suite 4602  
Milwaukee, WI 53233

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