

I N S I D E

Study probes causes / 2

Cycling for Parkinson's / 3

What's in an assessment? / 4

The role of therapy / 5

The giving pages / 6-7

Awareness campaign launched / 7

A B O U T U S

Parkinson's Post is published by the Northwest Parkinson's Foundation, a 501(c)(3) charitable organization.

Our mission is to establish optimal quality of life for the Northwest Parkinson's community.

We welcome comments and inquiries regarding this newsletter and all our activities. Our contact information can be found on the last page of this newsletter. We look forward to hearing from you!



NORTHWEST
PARKINSON'S
FOUNDATION

MAN ON THE MOVE

Technology boosts steadfast spirit

By Craig Howard

Al Wolfer is a man on the move. He always has been—he flew for American Airlines for 35 years. Many of those years were spent in the big ones, like the DC10.

He stopped flying in 2000, but he keeps moving.

“I love gadgets,” he said. “Technology just keeps giving us great devices.”

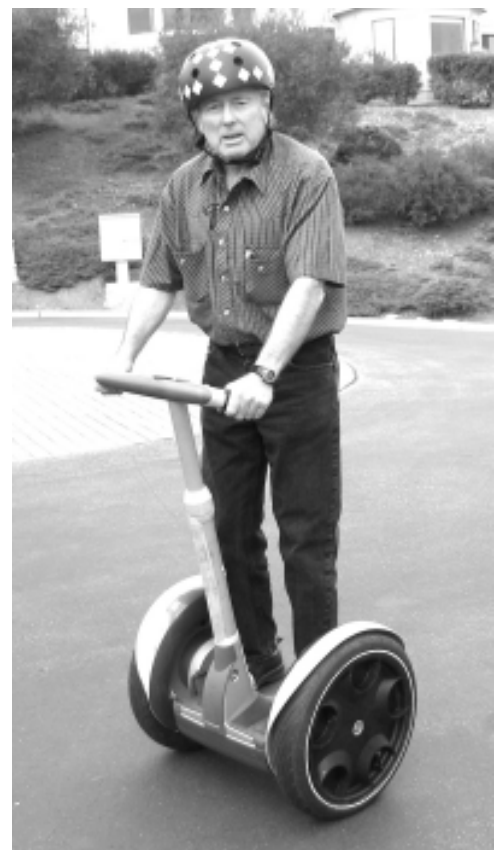
I met Al when I was in his neighborhood one day last fall. He lives in a home atop a ridge overlooking the San Francisco Bay. I drove by his garage and saw a brand new black convertible, a motorized bicycle, and a Segway Transporter, the new self-balancing, two-wheeled scooter. My first thought: “I gotta meet this guy.”

And this was before I knew he had Parkinson's.

Al came down the ramp in his garage on a three-wheeled Sonic scooter. Sitting across the street, I watched him get off his three-wheeler and start to make his way around the garage. It was then that I noticed the Parkinson's. He was between doses, and he had the signature stuttering steps of someone waiting for the Sinemet to kick in. He was headed for the Segway, and I introduced myself.

We talked at length—first, about the wonder of the Segway scooter. They are notoriously tricky in the beginning, then famously intuitive once you've tried one out. But with Parkinson's?! Balance is such a critical part of operating the Segway.

The way the Segway works is that you stand on it, and to go forward you lean slightly forward. Slightly being the



Al Wolfer on his Segway.

key word here. As Al said, “You really just *think* about going forward. The Segway just does it.”

Backward is the same. You twist the handle bar for left or right.

My questions about Parkinson's balance issues persisted. How on earth could someone prone to falling actually make this thing work?

“That's the magic!” Al was very excited by it. “If I start to tip forward, it

Continued on Page 3

Study looks at environment and genes in Parkinson's

By **Harvey Checkoway, Ph.D.**

During the past two decades, there has been growing recognition that Parkinson's disease may be related to environmental factors. The discovery in 1983 of severe parkinsonism among intravenous drug abusers who were exposed to the chemical MPTP provoked great interest in the notion that environmental exposures may be significant causes.

Inheritance of Parkinson's likely occurs in a fraction of cases, perhaps 10 percent. Inherited cases, which mainly occur at ages under 50, are associated with rare genetic mutations (such as in the alpha synuclein gene).

Except for cigarette smoking, which surprisingly is linked to a reduced Parkinson's risk, there are no clearly established environmental factors related to Parkinson's. Nonetheless, it is quite plausible that many Parkinson's cases are due to the interplay of environmental exposures and genetically determined host factors.

Since 1992, a research team from the University of Washington Departments of Environmental and Occupational Health Sciences, Neurology, and Epidemiology has been conducting an epidemiological study to identify environmental and genetic factors related to the risk of Parkinson's among Puget Sound residents. The project is funded by the National Institute for Environmental Health Sciences.

The study compares past exposures and genetic profiles of newly diagnosed Parkinson's people with those of a control group of people without Parkinson's or other neurodegenerative disorders. Control group members are matched to the Parkinson's cases on age, gender and ethnicity.

The study involves administration of a detailed questionnaire that seeks information on occupational history,

environmental chemical exposures, cigarette smoking, caffeine intake, other dietary factors, medication use and medical history.

In addition, varying forms (polymorphisms) of genes are measured from DNA extracted from subjects' blood samples. The genes of interest are those that code for enzymes involved in dopamine metabolism and activation or detoxification of environmental chemicals.

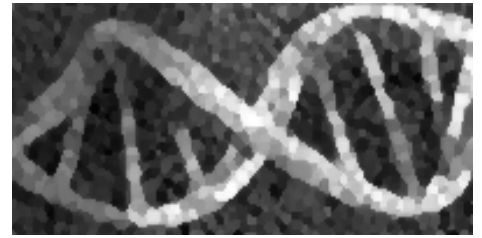
To date, the study has enrolled more than 275 Parkinson's cases and 400 controls; the recruitment goal is 400 cases and 600 controls.

As has been seen consistently in many epidemiological studies, the Parkinson's risk among smokers was about half that of persons who had never smoked. Moreover, the risk declined with duration of smoking and amount smoked.

Although there is no confirmed explanation for this seemingly "protective" effect of smoking, there is good evidence that smoking may block the action of the enzyme monoamine oxidase B (MAO-B).

MAO-B has two functions that may be relevant in Parkinson's. It is involved in the breakdown of dopamine and it is the enzyme that activates MPTP to the toxic form in the brain. Thus, smoking may prevent both excessive dopamine depletion and activation of toxic environmental chemicals similar to MPTP.

The MAO-B gene is one of many being looked at in the UW study. Two forms (alleles) have been identified: G and A. There appeared to be an interaction between the MAO-B gene and smoking, such that smokers with the G allele had a reduced Parkinson's risk, but smokers with the A allele were not protected. This interaction was only found in men, however, which compli-



cates the interpretation. It may be that estrogen plays an important contributing role as well.

Numerous other genes have been investigated, but thus far only MAO-B has been associated with Parkinson's in the UW study.

Another notable finding was a nearly doubling of Parkinson's risk among persons whose diets contained relatively high amounts of iron and manganese. One possible explanation is that these two metals are involved in chemical reactions, including the metabolism of dopamine, that produce oxidative damage to nerve cells. Corroboration of this finding from other studies will be important.

The study is continuing to enroll study subjects, and further analyses of various environmental factors, such as pesticides, solvents and metals, and other genetic polymorphisms are underway.

The etiology of the majority of Parkinson's cases remains unknown despite its recognition since 1817 as a distinct clinical disease and intensive laboratory and human population research over the past 40 years.

Epidemiological research on the relative contributions of environmental factors and genetic traits, like those being investigated in the UW study and in similar research around the world, should ultimately help unravel the mystery of Parkinson's causation and lead to disease-prevention strategies.

—*Harvey Checkoway, UW professor of environmental health, leads the Parkinson's research project.*

Continued from Page 1

goes forward. When I regain my balance, it stops. If I'm going to fall back, it goes with me." He demonstrated. Magic! In his hands, it looked seamless. Like everything he was doing was intentional. He says it's become second nature.

I asked Al about his first experience on it.

"Well, I took it out of the box..."

Wait, I wanted to know where he'd tried one in a showroom.

"I didn't. I saw them, read about them, and it made perfect sense to me. I just knew this machine was built for me. I contacted the distributor in San Diego and I had him ship me one, sight unseen." He smiled. "I told you. I love gadgets!"

Al's spirit just shines through. His excitement about the possibilities in life is infectious.

"I was fighting Parkinson's. I was diagnosed in the '90s and I was angry. I was in my early 50s, and I just didn't think it was fair." He smiled again. "I learned some things. Deepak Chopra says, 'Let go the grievance and let the miracles come.' I did, and the miracles come to me every single day."

Al showed me the lumps under his collarbones where his deep-brain stimulation devices are installed. "I told you I love gadgets."

He had DBS surgery in early 2003, followed by heart surgery. Again, his spirit carries him. He says his health is great right now. The DBS surgery has bought back years from his Parkinson's, and his hope for a cure is stronger than ever.

In the meantime, he continues to be on the move. His years with the airlines make travel very affordable. He flies anywhere American flies. He used to take his three-wheeled scooter with him, but now it's the Segway. It's been to St. Croix, Miami and Maui.

"It's perfect. I get to these places where normally I would sit still and read, or walk around when the meds were on. Now I get on the Segway and cruise around the sidewalks and boardwalks at 12 miles per hour. And because it puts me so much higher, the view is great!"

For Al, 2004 promises to be a great year. With the DBS surgery done and his heart in check, he's looking forward to more travel.

He's counting on his spirit, and his gadgets, to see him through.

—Craig Howard is cofounder of the Northwest Parkinson's Foundation. He can be reached at choward@nwpf.org or 206.748.9481.



Get your wheels turning for yourself, someone you love

By Shannon Carr

The Seattle-to-Portland bike ride is an opportunity to pedal for yourself or for someone you love. It's also a chance to get to know others in the Parkinson's community.

My family knows all too well what this disease is capable of. Parkinson's took our grandpa's life almost 20 years ago, and it is slowly taking our mom's at a very young age.

My sister and I rode the STP back in 1997, just for fun. She rode it again in 2000 to raise money for the Northwest Parkinson's Foundation. I thought that was a pretty cool idea and joined her on the fund-raising venture the following year.

Over the 200-mile stretch we talked a lot together and with others, only to find out we all have the same goal: better quality of life for our loved ones while we hope and pray for a cure.

After a brief layoff, our family will be back in full force in 2004. As many as five of us plan to ride this year in honor of our mom and others who face this devastating disease.

The ride does more than just raise money—it raises awareness. Thanks to our team jerseys, other riders would stop us along the way to ask who we were and why we were riding. It gave us a chance to tell them about Parkinson's, and about the Northwest Parkinson's Foundation.

We hope another trip from Seattle to Portland will help us learn more about ourselves, our mom and others who fight the Parkinson's battle daily.

And, of course, we want it to raise money for Northwest Parkinson's Foundation, an organization we hope one day will have no reason to exist.

JOIN THE TEAM!

The Northwest Parkinson's Foundation aims to build a 100-member Team Parkinson's in 2004 and raise \$100,000 for quality-of-life services for the Northwest Parkinson's community.

Why not join us? If you begin with short rides in the next few weeks and gradually build your distance, you'll be ready for the STP in mid-July. Make it your goal!

The first 50 to sign up will receive a free Team Parkinson's training jersey.

Call 1.877.980.7500 or email info@nwpf.org today with questions about participating with Team Parkinson's, or about making a pledge in support of the team. General information about the STP can be found at www.cascade.org.

Assessment takes holistic approach to individual care

By Joseph Foecking, PT, MHS

We had a family meeting after my father was diagnosed with Parkinson's. So many questions were tossed around in our minds and volleyed back and forth across the table. Whom should we talk to? Where should we go? What is going to happen? The uncertainty was palpable and seemingly overwhelming.

We soon became exhausted in our search for answers regarding my father's condition. Weeks rolled by as we traveled in different directions meeting a variety of physicians, therapists and specialists. It seemed we couldn't get enough information, and we couldn't get it fast enough. But how do you get the answers you are looking for? Where do you go?

The Booth Gardner Parkinson's Care Center has an answer—the comprehensive assessment.

A comprehensive assessment is designed to offer a variety of multidisciplinary assessments during a single one- to two-day visit.

Ordered by your physician, this multidisciplinary evaluation may offer assessments by a movement disorders neurologist, neuropsychologist, occupational therapist, physical therapist, speech and language pathologist, and case manager.

Each member of our specialized team is prepared to evaluate and address the complexities of your needs and concerns.

Our physicians are movement-disorders neurologists with specialized training in the diagnosis and treatment of Parkinson's, dystonia and other movement disorders. Areas of expertise include the pre-operative assessment and post-operative management of patients following movement-disorders surgery; botulinum toxin injections for dystonia, and clinical research.

The neuropsychologist conducts cognitive evaluations, which help determine the most helpful treatment plans. Psychological counseling helps support patients and their families in living well with Parkinson's.

The patient educator / research coordinator has expertise in the clinical care and education of Parkinson's patients, as well as in the area of research.

Occupational therapists assess an individual's activities of daily living including the ability to manage the home environment and aspects of personal care. Occupational therapists provide recommendations and modifications to help patients maintain independence and safety within the home and community.

The focus of physical therapy is functional mobility including the ability to get in and out of bed or a chair, walk and manage stairs. Physical therapists assist and educate people with Parkinson's regarding joint range of motion, strength, coordination and balance.

Our occupational and physical therapists have collaborated and developed two new programs for the Parkinson's patient: a gait and freezing program and a fall-prevention program.

Speech and language pathology provides a broad spectrum of services. These include swallowing evaluations and treatments making use of specialized diagnostic modalities as well as customized speech therapy with the Lee Silverman Voice Therapy program specially designed for Parkinson's patients.

Our case manager provides ongoing coordination of care at the center and refers to outside community resources as needed.

LEARN MORE

Are you interested in learning more about the comprehensive assessment at the Booth Gardner Parkinson's Care Center?

You or your physician can reach the staff of the Center at 425.899.3123. Or visit online at www.evergreenhealthcare.org for more information about the Center's services.

Regardless of where you live, a comprehensive assessment can be beneficial to you. Even patients who live outside the Puget Sound area are finding the comprehensive assessment an efficient way to receive a holistic evaluation. Imagine living in a distant community and wondering how your health care needs will be met. With one trip to the Booth Gardner Parkinson's Care Center over two days, you will meet up to six varied Parkinson's specialists interested in your individual care.

After your assessment, a report of all evaluations, including treatment recommendations, is forwarded to the referring physician. In this way, our specialized skills are available to assist your local physician in optimally managing your Parkinson's.

—*Joe Foecking is manager of the Booth Gardner Parkinson's Care Center and Rehabilitation Services at Evergreen Hospital Medical Center in Kirkland, WA. Diane Stortz, RN, case manager at the Booth Gardner Center and Evergreen Hospital, contributed to this article.*

Freezing a ‘sticky situation’ for people with Parkinson’s

By Ann Zylstra, PT

Parkinson’s is a movement disorder known for symptoms that make normal day-to-day tasks more difficult. Symptoms include tremor, slowness, stiffness, and walking and balance problems.



Ann Zylstra

A particularly troubling symptom in the progression of the disease is “freezing.” Freezing is often described as “my feet are sticking” or “my feet feel glued to the floor.”

A common definition of freezing is a “temporary, involuntary inability to move.” Though this usually happens

during walking, it can also affect speech and handwriting.

It is not fully understood why freezing occurs, or why some people have this symptom while others don’t, or how to treat it. One theory is that the brain “stalls” and for a brief period of time is unable to execute the desired movement.

Because freezing does not always respond to medicinal treatment, the Booth Gardner Parkinson Care Center is addressing this symptom in our Gait and Freezing Program. We have developed a number of effective techniques that can help reduce the duration and frequency of freezing episodes.

Freezing often occurs in predictable environments, or with predictable activities. We investigate our client’s environment and activities and try to establish a pattern of occurrences. Some common situations that precipitate freezing include walking through a doorway, turning, walking while carrying objects, or walking in crowded areas.

Our occupational therapists work with the physical therapists to brainstorm ideas to help alter the task or environment to help avoid these “sticky situations.”

Some strategies are simple and very effective. Often sensory cues such as visual aids or auditory prompting can be helpful. A visual cue, for example, might be tape on the floor at a threshold or the use of a flashlight.

Sometimes home modifications may be recommended, as clutter and tight spaces tend to worsen freezing.

In some individuals, anxiety exacerbates freezing. We often refer these clients to one of our neuropsychologists for counseling and stress-reduction techniques to help them and their families cope with the frustrations of Parkinson’s.

A physician referral for physical therapy and occupational therapy is needed to be evaluated for the Gait and Freezing Program. To learn more, call the Booth Gardner Parkinson’s Care Center at 425.899.3123.

—Ann Zylstra is lead physical therapist at the Booth Gardner Parkinson’s Care Center in Kirkland, WA.

Handy gadgets, changes to habits make life with Parkinson’s easier

By Kay Ballen, OTR/L

Bathing, dressing, grooming and eating are tasks we all do each day. For the Parkinson’s person, however, these ordinary self-care tasks can present challenges.



Kay Ballen

Occupational therapy identifies how Parkinson’s symptoms interfere with independence and recommends modifications to increase independence and ensure safety.

Modifications can be as simple as:

- ◆ Allowing extra time to complete self-care to prevent frustration.
- ◆ Sitting on a firm chair for stability vs. sitting on a soft mattress or high bed to dress.
- ◆ Rearranging a closet or dresser for easier access to clothing, and dressing the affected side first.
- ◆ Elevating your plate on a phone book to decrease the distance between plate and mouth. This may improve posture and open passages for swallowing.
- ◆ Lowering water heater temperature to prevent scalding for those with slowed or uncoordinated movements.

Medic Alert necklaces are recommended for those who live alone or are by themselves for periods of time. This is your lifeline for outside help if you fall or hurt yourself.

You’ll find a variety of gadgets and adaptive equipment for safety and help with self-care. For example, grab bars are an important safety item, especially in the bathroom where the occurrence of falls and injury are greatest. Grab bars located in the shower provide support when standing or bending. They are also beneficial when placed just outside the shower to assist with stepping in and out.

Adaptive equipment can also help with meals. Special utensils—including deep soup spoons and utensils with large, soft grips that conform to the hand and don’t require a firm grip—can help prevent spills. Angled utensils eliminate the need for bending the wrist or rotating the forearm. Rocker knives eliminate the need to saw back and forth to cut food. In addition, plate guards provide a lip on dishes so that food can more easily be scooped onto a spoon or fork.

With decreased dexterity, dressing may also be difficult. Buttonhooks eliminate frustration and the need for assistance. Buttons can also be replaced with snaps or Velcro.

Occupational therapy can recommend resources in your community for the purchase of adaptive equipment. To learn more, call the Booth Gardner Parkinson’s Care Center at 425.899.3123.

—Kay Ballen, OTR/L, is lead occupational therapist at the Booth Gardner Parkinson’s Care Center in Kirkland, WA.

T H E *Giving* P A G E S

The Northwest Parkinson's Foundation exists solely through the support of the Parkinson's community.

If the work we do has helped you or someone you know, we ask that you consider making a contribution. Gifts help support programs of awareness, education, advocacy and care.

Those listed here made gifts between Nov. 12, 2003, and Jan. 9, 2004. We have made every effort to list donors correctly. Please advise us of any errors. Those marked with an asterisk are 2003 Governors Circle donors. To each and every one of you, we extend our heartfelt thanks!

Aderis Pharmaceuticals
 Ms. Sylvia K. Adler
 Mr. and Mrs. Lino J. Agosti
 Mr. Larry A. Akman
 Mr. and Mrs. Robert Alexander
 Mr. William F. Almon
 Mr. and Mrs. R. Bruce Anderson
 Mr. and Mrs. Howard M. Angell
 Anonymous (4)
 Mr. and Mrs. Russell A. Austin Jr.
 Mr. and Mrs. Daniel A. Baker
 Mr. and Mrs. William E. Barrere
 Mr. Amberson C. Bauer Jr.
 Mr. and Mrs. Robert Baugh
 Mr. and Mrs. Robert S. Bax
 Mr. and Mrs. Michael Bechtol
 Mr. and Mrs. Warren W. Bell Jr.
 Mr. and Mrs. William Bell III
 Mr. and Mrs. Gordon Dale Benner
 Mr. and Mrs. Donald M. Black
 Ms. Margaret K. Blakely
 Mr. and Mrs. Steven Bohannon
 Ms. Betty L. Bourne
 Mr. and Mrs. Joe Brown
 Dr. Frank T. Bumpus*
 Mrs. Pamela Burns McCabe
 Mr. and Mrs. Peter Bush
 Mr. and Mrs. Adams Bushnell
 Mr. and Mrs. Robert H. Campbell
 Mr. and Mrs. Walter O. Carsten
 Mr. and Mrs. Malcolm O. Carton
 Mr. Larry Christian
 Ms. Elizabeth T. Claus
 Dr. and Mrs. William Cleaver
 Mr. James P. Clift
 Ms. Penelope Coe
 Ms. Pamela Cohen
 Mr. and Mrs. Elmer Cole
 Mr. and Mrs. Billy Coतर
 Ms. Marie Coyle
 Mr. and Mrs. William J. Cree
 Mrs. Mary K. Croy
 Mr. and Mrs. William H. Dahlberg
 Mr. and Mrs. P. Cameron De Vore

Mr. and Mrs. Todd C. Deboer
 Mr. and Mrs. Donald J. Disque
 Mr. Keith Doms
 Mr. and Mrs. Millard B. Dorwin III
 Ms. Tina Dowling
 Mr. Tom E. Dunn
 Mrs. William L. Dwyer
 Mr. and Mrs. George E. Eaton
 Mr. and Mrs. Clark Elliott
 Mr. David D. Enders
 Mr. John Eskew
 The Hon. and Mrs. Daniel J. Evans*
 Mr. Fernando Fajardo
 Mr. Andrew G. Fallat
 Mr. and Mrs. Richard J. Fallquist
 Mr. Jeffrey Fehr
 Mr. and Mrs. Laurence H. Field
 Mrs. Marjorie O. Foro-Stern
 Mr. and Mrs. Bernard N. Frank
 Mr. and Mrs. Ben J. Gantt Jr.
 Ms. Joyce Gardner
 Ms. Emily Geballe
 Ms. Joanna Glickler
 Ms. Margaret Goodley
 Mr. and Mrs. Barry Green
 Mr. and Mrs. Robert Green
 Mr. and Mrs. Kenneth M. Groff
 Mr. and Mrs. Robert Hansen
 Mr. and Mrs. Theodore Hansen
 Mr. and Mrs. Paul Harbaugh
 Mr. Art Harrigan
 Mr. and Mrs. Allen Harvey
 Mrs. Doreen Hawkey
 Mr. and Mrs. Theodore H. Heckelman
 Mr. and Mrs. Mark V. Hillman
 Mr. and Mrs. John Hilton
 Mr. Bill Hingston
 Ms. Agnes L. Hoffman
 Ms. Patricia Holman
 Ms. Wendy Holman
 Mr. and Mrs. James Hoxsey
 Mr. and Mrs. Lyman Hull
 Ms. Margaret Hunt and Ms. Virginia Hunt
 Mrs. Randi Jacobs
 Mr. and Mrs. John J. Jensen
 Ms. Mary Jones
 Ms. Kathie Keegan
 Mr. and Mrs. Wayne F. Klindworth
 Mr. and Mrs. Jerome Koch
 Mr. and Mrs. Ray Koch
 Mr. and Mrs. John S. Kotran
 Laird Norton Company LLC
 Laird Norton Family Fund
 Laird Norton Trust Co.
 Ms. Sharon Lee and Mr. Don Hebard
 Mr. Ron Leibsohn
 Mr. and Mrs. Ted Leidy
 Mr. and Mrs. Charles Lenhart
 Ms. Marjorie J. Levar
 Ms. Penelope P. Lewis
 Mrs. Karen Lindvall
 Mr. and Mrs. Carl Littrell
 Mr. and Mrs. Robert Lowry
 Ms. Geraldine Lucks
 Mr. Nathan Lurie
 Ms. Carin Mack
 Mr. Edward A. Mack
 Mr. and Mrs. Gerald E. Magorty
 Mrs. Betty R. Marsh

Dr. and Mrs. Kenneth L. Martin
 Mr. and Mrs. John Matheson
 Matthew G. Norton Co.
 Mr. and Mrs. Donald Mayer
 Mr. and Mrs. Frank McAfee
 Mr. and Mrs. Richard McCorkle
 Mr. William McCullough
 Mr. and Mrs. Gerald McDevitt
 Ms. Barbara S. McGray
 Mr. and Mrs. Robert McInnis
 Mr. and Mrs. Edwin C. McKinney
 Ms. Holly McLean
 Ms. Grace Menig
 Microsoft Giving Campaign
 Mr. and Mrs. Gerald J. Miller
 Mr. Amir H. Mohajerin
 Mr. and Mrs. John F. Molitor
 Mrs. Betty Moorhead
 Ms. Joni Morishita
 Ms. Mitsuko Morishita
 Mr. and Mrs. Guy Moxam
 Ms. Dana M. Mrozek and Mr. Thomas D. Price
 Mr. and Mrs. David Munch
 Mr. and Mrs. David S. Munday
 Mr. and Mrs. Richard J. Murphy Jr.
 Names Family Foundation*
 Mr. and Mrs. Russ Nettleton
 Mr. and Mrs. Hal Newsom*
 Dr. and Mrs. Gary Nordquist
 Mr. and Mrs. Greg Nordquist
 Mr. and Mrs. Robert H. Normand
 Ms. Julie Panzarino
 Ms. Irene Pasternack and Mr. Ed Mills
 Mrs. Elizabeth Patterson
 Mr. and Mrs. E. Les Paulsen
 Mr. Ludovic B. Perry
 Mr. and Mrs. John R. Petersen
 Mrs. Margaret Peterson
 Mr. Christopher Pickrell
 Ms. Hildegard Pierce
 Mr. and Mrs. Harry Porter
 Ms. Janet Prah
 Pruzan Foundation
 Ms. Ellen Punyon and Mr. Rick Saling
 Mr. and Mrs. Michael Ramage
 RealNetworks Foundation
 Mr. John S. Retherford
 Mrs. Betty G. Richardson
 Mr. and Mrs. William Riley
 Mr. and Mrs. Henry Robinett
 Mr. Nathan Sandler
 Ms. Mary Jean Sargent
 Ms. Martha Schuler
 Ms. Julie Shandley
 Dr. Caleb Elroy Shikles
 Mr. Lucho A. Singh
 Mr. and Mrs. Ron W. Slotte
 Mr. and Mrs. Desmond Smith
 Dr. and Mrs. Jim Smith
 Mr. and Mrs. William E. P. Smith
 Mr. and Mrs. James R. Sorenson
 South Kitsap Soggy Sams
 Mrs. Annie Stalberg
 Ms. Jude Steinberg
 Mrs. Sophie Sussman*
 Mrs. Patricia Sweeney
 Ms. Patricia Taylor
 Mr. and Mrs. Richard Thomas
 Dr. and Mrs. Wayne J. Timberlake

Mr. and Mrs. Stan Tomich
Ms. Tina Torrance
Mr. and Mrs. William Torsen
Mr. James Tracas
Mr. and Mrs. Russell Trapp
Mr. and Mrs. Robert Tremain
Mr. and Mrs. Donald W. Trotland
Mr. Scott Troyer
United Way of King County
Mr. and Mrs. Milton Vereide
Mr. Forrest Walls
Mr. Robert Warming
Mr. James West
Mr. and Mrs. Douglas R. Wheeler
Mr. and Mrs. Jay Wilkie
Mr. and Mrs. John Willits Jr.
Mr. and Mrs. Benjamin Wood
Mr. and Mrs. William P. Wood
Mr. and Mrs. Bob L. Wright
Mr. and Mrs. William W. Wurts
Mr. and Mrs. Richard Yancey
Mr. and Mrs. John K. Zancanella
Mr. and Mrs. Charles Zwiers

In honor of Lester and Mercia Asher

Mr. Lawrence J. Asher

In honor of Jayne Barrere

Mr. and Mrs. P. Craig Weisman

In honor of Tina Torrance

Mr. and Mrs. William W. Potts

In honor of Janie Carr

Mr. and Mrs. Charles R. Allen

Mr. and Mrs. Patrick Allen

Anonymous (2)

Ms. Tracie K. Bradley

Mr. and Mrs. David Cohen

Mr. and Mrs. Frank P. Conger

Mr. Dominic D'Angelo III

Ms. Adrienne Easter

Mr. and Mrs. James C. Haslam

Ms. Helen M. Kirkwood

Mr. and Mrs. Roger L. Long

Mr. and Mrs. Paul Salima

Mr. and Mrs. Bryce A. Taylor

Mr. and Mrs. Bruce D. Wilson

Ms. Patricia G. Wyatt

In honor of Cris Christopher

Mr. H. U. Schlapfer

In honor of David Easton

Mr. Delmar W. Kaufman

In honor of Harry Gaghen

Mr. James Edwards

In honor of Booth Gardner

Mr. Robert Roegner

In honor of Dottie Linscott

Mr. and Mrs. Robert Diemert

In honor of Hal Newsom

Mr. and Mrs. Carl Lovsted

Mr. Robert Story

Mr. and Mrs. P. Craig Weisman

In honor of Jack Patterson

Mr. and Mrs. Daniel H. Devin

In honor of Susan Quigley

Ms. Marcy Kulland and Terry Virgona

In honor of Bob and Kathy Swanson

Mr. and Mrs. William G. Richards

In honor of Tina, Roger and Janet

Ms. Marilyn Ward

In honor of Bill Torrance

Mr. and Mrs. Jim Eckmann

In memory of Donald Agrellas

Mr. and Mrs. Aden O'Dell

In memory of Bob Arnold

Mrs. Joan Arnold

In memory of Allen Backstrom

Mr. and Mrs. Keith E. Chase

In memory of Aaron S. Baker

Ms. Patricia Quann-Baker

In memory of Lawrence M. Baugh

Mr. Gary Baugh

In memory of Gene Claussen

Mr. and Mrs. Clayborn Anders

In memory of Nellie Rhodes Clow

Ms. Barbara R. Frederick

In memory of Robert Crawford

Ms. Barbara Crawford

In memory of Bill Detering

Mrs. Janet Detering

In memory of William Erickson

Ms. Sonya Erickson

In memory of Thane Hoyte

Ms. Bonnie Wright

In memory of Harold Johnson

Mr. and Mrs. Dale Juel

In memory of Donald E. Knight

Boeing Employees Credit Union

Mr. and Mrs. Elmer L. Porter

Ms. Marjorie E. Porter

In memory of Bob Konigson

Mr. John R. Heath

In memory of Willard (Bill) Kraemer

Ms. Maxine Kraemer

In memory of George M. Moore

Mrs. W. Lee Moore

In memory of George O. Olson

Mr. and Mrs. Alton J. Olson

In memory of Myrna Omli

Rev. and Mrs. David C. Wold

In memory of Ruth Pasternack

Mr. and Mrs. Eric S. Pasternack

In memory of Leon Peha

Mr. and Mrs. Alan Rappaport

In memory of Frank Petrilli

Ms. Janet Petrilli

In memory of R. C. Powell

Ms. Carolyn Powell

Ms. Rosalie Powell

In memory of John Pulsipher

Mr. and Mrs. Thomas J. O'Brien

In memory of Iris Ryan

Mr. and Mrs. Richard A. Smith

In memory of Justice Ret. Wm. H. Williams

Mrs. Ruth B. Williams

In memory of Chet Zobrist

Greater Bellevue Lions Club Administration

Notice anything different? New sights and sounds mark launch of awareness campaign in Northwest

If you're a regular reader, you may have noticed the *Parkinson's Post* is sporting a new look. And if you're a returning visitor to our website or a subscriber to our email news list, you'll also notice a few look-and-feel changes. What are we doing, you wonder?

To coincide with the launch of an awareness campaign about the quality-of-life programs and services of the Northwest Parkinson's Foundation, we're polishing a few of our products. We hope you like the results, and we welcome your comments.

The week of Jan. 12 marked the formal launch of awareness activities with radio spots airing in the Puget Sound region, where about a fourth of the Northwest Parkinson's population lives. The spots feature people with Parkinson's or their loved ones talking about finding hope with Parkinson's.

Over the next few months, articles will be directed at publications throughout the Northwest, with a focus on April, which is National Parkinson's Awareness Month.

A grant from the Bill & Melinda Gates Foundation is providing a boost to our awareness campaign.

Some 70,000 in the Northwest have Parkinson's. Our goal is to connect as many as possible to our resources, starting with this free newsletter.

Care to help? Consider becoming an informal "ambassador" for the Northwest Parkinson's Foundation. Think about ways you might help us help *your* community. We can provide you with materials—for example, brochures and newsletters—to aid your effort. Or if you have other ideas about spreading the word, we'd love to hear from you. You can reach us at info@nwpcf.org or toll-free at 1.877.980.7500. Thanks!



**NORTHWEST
PARKINSON'S
FOUNDATION**

NONPROFIT ORG.
U.S. POSTAGE
PAID
SEATTLE, WA
PERMIT NO. 02443

RETURN
SERVICE
REQUESTED

JANUARY / FEBRUARY 2004

C O N T A C T U S

MAIL

P.O. Box 56
Mercer Island, WA 98040

PHONE

1.877.980.7500 (toll-free)

EMAIL

nwpf@nwpf.org

WEBSITE

www.nwpf.org

B O A R D

A N D S T A F F

Phil Ballard, M.D.
Bill Bell

Gov. Daniel J. Evans
Nancy Evans

Gov. Booth Gardner

Art Harrigan
Craig Howard
David McIntire
Hal Newsom
Lucy Pruzan

Matt Ramerman
Paula Rose
Robert E. Story
Priscilla Tanase

Bill Bell
Executive Director

Joanna Glickler
Development Director

Elizabeth Pelham
Administrator

The gifts of time, talent

The Northwest Parkinson's Foundation seeks volunteers for these ongoing projects:

- ◆ Researching addresses of physicians, pharmacies and caregiving services.
- ◆ Preparing packets for distribution in response to information requests.
- ◆ Contacting service and church groups to inform them about programs for Parkinson's people.
- ◆ Assisting with public outreach at seminars and conferences.
- ◆ Writing articles for the *Parkinson's Post* and email update.

Most projects can be done in the comfort of your home, though we have ample office space for local volunteers.

If you have ideas or would like to join our growing volunteer squad, contact

Elizabeth Pelham at elizabethp@nwpf.org or toll-free at 1-877-980-7500.

- ◆ **Young Onset Symposium** / Sponsored by the Parkinson's Center of Oregon / 10 a.m. to 3 p.m. Feb. 28 / Oregon Health & Science University (Portland, OR) / Call 503.494.7231 for details.
- ◆ **Quarterly Educational Meeting** / Experts at the Booth Gardner Parkinson's Care Center present state-of-the-art information on handling social and emotional snags related to Parkinson's, and techniques to enhance mobility at home. 3:30 to 6 p.m. March 4 / Evergreen Hospital and Medical Center (Kirkland, WA) / Free of charge / Call 425.899.3000 for details.

Newsletter contents copyright Northwest Parkinson's Foundation 2004. Rights for use in other publications of most materials presented here available by contacting NWPf.