

Newsletter

October, 2019



WHAT IS ON TIME?

On Time consists of many resources such as Support Groups, coordinating health fairs and Symposiums, email newsletters, specialized training programs for Parkinson's, and coordinates the annual support group luncheon.

On Time is a program through Horizon Support Services. Horizon Provides professional caregivers for the elderly to remain safe at home.

For more information about "On Time" Call (714) 732-6039



AWARE & CARE

The Parkinson's Foundation

launched the Aware in Care campaign in 2011 to help people with Parkinson's disease (PD) get the best care possible during a hospital stay. Research has found that three out of four people with Parkinson's do not receive medications on time when staying in the hospital, and that people with PD in the hospital have a 1 in 4 chance of complications because of medication errors. With more frequent hospital visits and a high sensitivity to the timing and dosing of PD medications, people with Parkinson's face great risks in the hospital.

At the Parkinson's Foundation, it is our mission to help people with Parkinson's disease live better lives, and that includes staying safe while in the hospital. We want to help people affected by PD to be "Aware in Care



To Contact our Aware & Care Rep or to get your own free kit,
Please Call Michele White at (714) 356-3343

Announcing the PMD Alliance Birthday Match

By: Maureen Simmons, PMD Alliance



PMD Alliance relies on the generosity of individuals like you. This year, thanks to two generous community members, we are celebrating our birthday with a challenge match. Every gift – up to \$25,000 -- will be matched dollar for dollar this month. What does this mean to you? If you make a \$10 gift, PMD Alliance will receive \$20. If you make a \$500 gift PMD Alliance will receive \$1,000!

Trivia:

What year is thought to be the year that Parkinson's was founded? Answer Below

- A) 1817
- B) 1803
- C) 1885



Flashlight Cemetery Tour



guided walking tours departing at 6pm and 7pm

Experience a 1 hour Walking Tour of

Fairhaven Memorial Park

Learn about the park's history, notable burials, fun and informative facts about cemeteries, mausoleums, mortuaries and crematories.

Tours begin at Waverley Chapel and conclude inside our beautiful Historic Mausoleum with Refreshments provided by Horizon Senior Services



1702 Fairhaven Avenue ~ Santa Ana, CA FD1313

Contact Cynthia.Adair@DignityMemorial.com / 714.633.1442 For More Information or to Reserve Your Spot

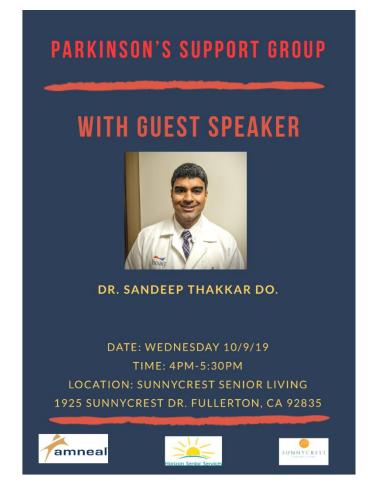
Today's Term

Range of Motion:

Range of motion (ROM) is when a person has become injured in some way, most times the doctor's advice the patients to exercise and stretch the back muscles. For this purpose, a form of exercises called range of motion exercises which are used to keep the muscles and joints in the patients back strong and flexible. These exercises can be done by the patient himself, or with a physical therapist.

Operation Motivation

Courage is not having the strength to go on; it is going on when you don't have the strength. - Theodore Roosevelt





Scams & Financial Abuse Involving People with Parkinson's, and the Elderly

Attend this workshop to protect yourself from Illegal Scams



In Collaboration with the Orange County Bar Association Attorney, the PAOC, and the Regency Senior Living Community, present:

Edward J. Pallotta, Jr., JD LLM, PhD Attorney, Clinical Psychologist,* & CPA

*(PSY25244)

The Regency Senior Living Community 24441 Calle Sonora Laguna Woods, CA 92637 (949) 830-9057

October 19, 2019, 9-11:30 a.m.

Refreshments served 9-9:30 a.m. Seating is limited so call to register: Sam Torres, PhD, PAOC President at samtorres@sbcglobal.net or 714-744-8024



Cognition and Parkinson's

Parkinson's disease (PD) is increasingly becoming recognized for its non-motor characteristics, including cognitive difficulties. For people with Parkinson's, these problems can be distressing and among the toughest to bring up with their doctors and their families. Cognition is difficult to define, but it generally refers to the brain processes through which we discover and understand the world around us. These include: making sense of perceptions; storing and retrieving memories; learning things; forming concepts; solving problems; planning activities; language; achieving insights; and abstract thinking.

Cognitive Changes in Parkinson's

Understanding how many people with Parkinson's experience cognitive changes is difficult because the changes themselves are difficult to measure and because researchers have used different means to identify and define them. It is estimated that, at any given time, of all people with Parkinson's, about one quarter to one third have mild cognitive impairment (MCI) while another one quarter to one third have dementia.

Symptoms of MCI will not interfere with a person's ability to function. Early changes may not be noticeable, but can be detected through testing. Once MCI is diagnosed, symptoms may become more apparent. Recent research suggests that mild changes may be present as early as the time of diagnosis. Dementia is a decline in multiple mental abilities that is severe enough to lead to trouble at home, at work or in social situations. It can include, but is not limited to, problems with memory. If one follows a large number of individuals with Parkinson's over time, many may go on to develop dementia.

Causes of Cognitive Changes

One cause of cognitive changes is a drop in the level of dopamine, the neurotransmitter that helps to regulate the body's movements. Scientists are looking at changes in two other chemical messengers — acetylcholine and norepinephrine — as possible additional causes of attention difficulties, memory and executive function loss in PD.

Effects of Cognitive Changes

The cognitive changes that accompany Parkinson's early on tend to be limited to one or two domains, and their severity will vary from person to person. They most often include:

Executive functions. Similar to the problem-solving duties of a company executive, these include forming concepts, making plans, formulating goals, anticipating consequences, strategizing to reach goals and evaluating progress.

Attention difficulties. Cognitive changes may make it difficult to pay attention. In situations, such as a party, where several conversations are going on at once, this problem may be acute.

Slowed thinking. People with PD say their brain feels "swampy." It takes more time and more effort than usual to complete them.

Word-finding. People with PD may have difficulty coming up with words because of slowed thinking ability. The words are available, but may be difficult to access. If you think of vocabulary as a dictionary, the person with PD has to search for the dictionary before opening it to find words, whereas a person with Alzheimer's has the dictionary but many of the pages are blank.

Learning and remembering information. About half to two thirds of people with Parkinson's re- port that they have memory problems. There are two types of memory, the first being declarative memory (e.g., remembering events from a specific time or place or facts). The second type is non-declarative and is demonstrated through performance of tasks (e.g., riding a bicycle). Memo- ry involves encoding, storage and retrieval. Like a filing cabinet, first you have to acquire information, and then you have to organize it and store it, and finally you have to retrieve it. People with PD have trouble taking in information and organizing it well, so it becomes difficult for them to remember it. Another specific type of memory is prospective memory. Failures of prospective memory annoy most of us, but seem to be more common in PD. For example, you put a package out to mail in the morning, but then find yourself leaving the house without sending it.



Seeking Help for Cognitive Changes

Cognitive change is a sensitive issue. The doc- tor may be as hesitant to address it as the person with Parkinson's is to ask about it. The doctor may delay discussing cognitive impairment out of concern for the person who is coping with a diagnosis or struggling with motor symptoms. For this reason, the person with PD often needs to be the one to initiate the conversation. If the person is experiencing problems that are upsetting family, or causing problems at work, discuss them with the doctor. The doctor can help with a referral to a psychiatrist, a neuropsychologist, a speech or occupational therapist. The neuropsychological evaluation can be useful in the early stages of a cognitive problem. Having this baseline test can help the doctor determine whether future changes are related to medications, Parkinson's disease or other factors such as depression.

Treating Cognitive Changes in PD

When a person reports symptom of mild cognitive impairment, the doctor will first want to rule out causes other than PD, such as Vitamin B-12 deficiency, depression, fatigue, or sleep disturbances.

PD does not cause sudden changes in mental functioning. If someone does experience a sudden change, the cause is likely to be something else.

If cognitive symptoms *are* traceable to PD, there are drug therapies available that were developed for Alzheimer's, but have been found to have some effect in Parkinson's. One is rivastigmine, the only medication approved by the US Food and Drug Ad- ministration (FDA) for dementia in PD. Doctors also may prescribe donepezil and galantamine. In addition, a person with attention difficulties that are due to daytime sleepiness may benefit from stimulants.

Tips for Care Partners

- · Offer help only when your loved one asks for it
- Prompt the person for example, instead of ask- ing, "Did anyone call?" ask, "Did Linda call?"
- · Say the name of the person and make eye contact when speaking to them
- Put reminder notes in a prominent place
- Keep things in routine places
- To ensure medications are taken on time, provide the person with a dispenser
- Use photos on cell phone contact entries to prompt face-name association
- Write lists and keep them in a routine place
- If the person is searching for a word, provide a cue, such as, "the word begins with 'd'"
- Do not finish the sentences of a person who needs more time to put them together
- When presenting the person with a list of actions, first verbalize them, then write them down

If you have or believe you have Parkinson's disease, then promptly consult a physician and follow your physician's advice. This publication is not a substitute for a physician's diagnosis of Parkinson's disease or for a physician's prescription of drugs, treatment or operations for Parkinson's disease.

Adapted from the PDF PDFPDF News & Review, Summer 2011

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Have an interesting article or topic?

Email it to

Kyle@horizonsupportservices.com



10 Early Signs of Parkinson's Disease

It can be hard to tell if you or a loved one has Parkinson's disease (PD). PD is a neurodegenerative disorder that predominately affects dopamine-producing ("dopaminergic") neurons in a specific area of the brain called the substantia nigra. Symptoms generally develop slowly over years and the progression of symptoms is often different from one person to another due to the diversity of the disease. What follows is a list of 10 early signs of Parkinson's disease. No single one of these signs means you should worry about having PD, but if you have more than one sign, you should consider making an appointment to talk to your doctor.



Have you noticed a slight shaking or tremor in your finger, thumb, hand or chin? A tremor, while at rest, is a common early sign of PD.

WHAT IS NORMAL?

Shaking can be normal after lots of exercise, if you are stressed or if you have been injured. Shaking could also be caused by a medicine you take.



Have you been told that you have a serious, depressed or mad look on your face, even when you are not in a bad mood? This is often called facial masking. If so, you should ask your doctor about PD.

WHAT IS NORMAL?

Some medicines can cause you to have the same type of serious or staring look, but you would go back to the way you were after you stopped the medication.



Do you have trouble moving your bowels without straining every day? Straining to move your bowels can be an early sign of PD and you should talk to your doctor.

WHAT IS NORMAL?

If you do not have enough water or fiber in your diet, it can cause problems in the bathroom. Also, some medicines, especially those used for pain, will cause constipation. If there is no other reason such as diet or medicine that would cause you to have trouble moving your bowels, you should speak with your doctor.



Have you noticed you no longer smell certain foods very well? If you seem to have more trouble smelling foods like bananas, dill pickles or licorice, you should ask your doctor about PD.

WHAT IS NORMAL?

Your sense of smell can be changed by a cold, flu or a stuffy nose, but it should come back when you are better.

Continued...



Has your handwriting gotten much smaller than it was in the past? You may notice that your letter sizes are smaller and the words are crowded together. A change in handwriting may be a sign of PD called micrographia.

WHAT IS NORMAL?

Sometimes writing can change as you get older, if you have stiff hands or fingers or poor vision.



Are you not standing up as straight as you used to? If you or your family or friends notice that you seem to be stooping, leaning or slouching when you stand, it could be a sign of PD.

WHAT IS NORMAL?

If you have pain from an injury or if you are sick, it might cause you to stand crookedly. Also, a problem with your bones can make you hunch over.



Do you thrash around in bed or act out dreams when you are asleep? Sometimes your spouse will notice or will want to move to another bed. Sudden movements during sleep may be a sign of PD.

WHAT IS NORMAL?

It is normal for everyone to have a night when they 'toss and turn' instead of sleeping. Similarly, quick jerks of the body when falling asleep or when in lighter sleep are common and often normal.



Do you notice that you often feel dizzy when you go from sitting down to standing up? Feeling dizzy or fainting can be a sign of low blood pressure and can be linked to PD.

WHAT IS NORMAL?

Everyone has had a time when they stood up and felt dizzy, but if it happens on a regular basis you should see your doctor.



Do you feel stiff in your body, arms or legs? Have others noticed that one or both of your arms doesn't swing like it used to when you walk? Sometimes stiffness goes away as you move. If it does not, it can be a sign of PD. An early sign might be stiffness or pain in your shoulder or hips. People sometimes say their feet seem "stuck to the floor."

WHAT IS NORMAL?

If you have injured your arm or shoulder, you may not be able to use it as well until it is healed, or another illness like arthritis might cause the same symptom.



Have other people told you that your voice is very soft or that you sound hoarse? If there has been a change in your voice you should see your doctor about whether it could be PD. Sometimes you might think other people are losing their hearing, when really you are speaking more softly.

WHAT IS NORMAL?

A chest cold or other virus can cause your voice to sound different, but you should go back to sounding the same when you get over your cough or cold.

What can you do if you have PD? It is possible to have a great quality of life with PD. It is essential to work with your doctor and follow recommended therapies in order to successfully treat symptoms. Develop a plan with your doctor to stay healthy. This might include: A referral to a neurologist, a doctor who specializes in the brain, or a Movement Disorder Specialist, a neurologist with additional training in PD. Care from an occupational therapist, physical therapist and/or speech therapist. Meeting with a medical social worker to talk about how Parkinson's will affect your life. Start a regular exercise program to help manage symptoms and maintain well-being. Talk with family and friends who can provide you with the support you need.

English Spanish



Join the Parkinson's Foundation

Saturday, October 19, 2019 9 a.m. – 3 p.m.

DoubleTree by Hilton 13111 Sycamore Dr., Norwalk, CA 90650

Register at:

Parkinson.org/conferencia

Or call 1-800-473-4636 or email helpline@parkinson.org.

The Parkinson's Foundation invites people with Parkinson's disease (PD), their families and children, caregivers and health professionals to join us for a day of learning, fun, food and music. Ask questions, try new activities and interact with experts and your local community in a fun atmosphere.

Topics include staying motivated and active, treatment options for PD, exercise, navigating health care services and information on managing symptoms.

This conference will be conducted entirely in Spanish.* Food and parking are offered at no cost. Entry is free, space is limited, and registration is required.

*Program is presented in Spanish only.

Sábado, 19 de octubre de 2019 9 a.m. – 3 p.m.

La Parkinson's Foundation los invita

Hacia Adelante:

del Parkinson

Navegando el Mar

DoubleTree by Hilton 13111 Sycamore Dr., Norwalk, CA 90650

Inceribator

Parkinson.org/conferencia

O llame a 1-800-473-4636 opción 3 o envié un correo electrónico a helpline@parkinson.org. La Parkinson's Foundation invita a personas con enfermedad de Parkinson (EP), sus familiares y hijos, cuidadores y profesionales de salud a acompañarnos a disfrutar de un día lleno de aprendizaje, diversión, comida y música. Podrán preguntar, aprender y interactuar con expertos y la comunidad local en un ambiente ¡DIVERTIDO!

Los temas incluyen mantenerse motivado y activo, opciones de tratamiento para la EP, ejercicio, acceso a servicios de atención médica y ayudar a controlar de síntomas.

Esta conferencia será totalmente en español. Se ofrece comida y estacionamiento sin ningún costo. Entrada gratuita, cupo limitado, y inscripción requerida.

Sponsored by:

Medtronic

Further Together

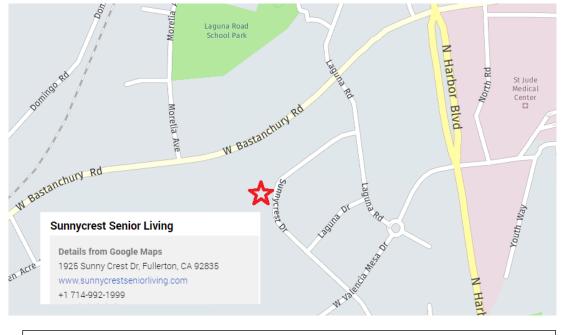


Auspiciado por:

Mectronic

Further Together





Rock Steady Boxing is coming to Anaheim Hills! Freeway close!

Now taking names of interested Parkies. We are slated to start sometime between late *November* 2019 and *January* 2020. If interested contact Connie at 714-315-2640 or

focusonfitness@att.net

Parkinson's Support Group

The mission of our support group is to provide community fellowship for those with Parkinson's disease, and their families by sharing interests, experiences, knowledge, helpful information, mutual support and resources.

When: 2nd WEDNESDAY OF EVERY

MONTH

Time: 4:00 PM TO 5:30 PM (same time every month)

Location: Sunnycrest Senior Living

1925 Sunnycrest Dr. Fullerton, CA

RSVP with Kyle at (714) 732-6039



CALENDAR OF EVENTS!

~ October 2019 ~						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1 Coffee & Chat Atria Woodbridge 10:30AM-Moon	Anaheim Senior Center Support Group 10AM-11:15AM	Orange Coast Memorial Support Group 6PM-7:30PM	4	5
6	7 Faith Based Fullerton Support Group Evangelical Church 10AM-11AM	8 Coffee & Chat Atria Woodbridge 10:30AM-Noon	9 Dr. Thakar Speaking at SunnyCrest. 4PM – 5:30PM	10 Flashlight Tour at Fairhaven Memorial Park 6PM-9PM	Dr. Bixby Lunch N Learn Laguna Health & Wellness 10:30AM-1PM Korean Fullerton Group Fullerton Senior Center 10AM-Noon	12 Health Fair The Cottages of Artesia 10AM-1PM Parkinson's Explorers
13	14 Columbus Day	15 Coffee & Chat Atria Woodbridge 10:30AM-Noon	16 Brea Baptist Church Support Group 11AM-12Noon	17 Orange Coast Memorial Support Group 10AM-11:30AM	18	19 YL Senior Center Health Fair 9AM-12PM Newport Beach Senior Center Health Fair. 9AM-12PM Senior Scam Talking The Regency Senior Living 9AM
20 Women & PD Torrance Mem Hospital 9:30AM-1PM	21 Dr. Bixby Speaking Oakmont Capriana 3:30PM-4:30PM	22 Coffee & Chat Atria Woodbridge 10:30AM-Noon	23	24	25	26 Senior Resource Talk Hillcrest Village 11AM-2PM
27 Gala Fundraiser	28	29 Coffee & Chat Atria Woodbridge 10:30AM-Noon	30	31 Halloween	Notes: Questions please call Kyle at (714) 732-6039	

SUBMIT YOUR

Trivia Answer: A) 1817



Want an Event Published?

Send Inquire to

Kyle@HorizonSupportservices.com

to have it published to!



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To Inquire more about *On Time* or any of the content included in this letter please contact Kyle Vanderheide at (714) 732-6039