## THE PARKINSON PATH



**The Parkinson Association of** Northern California is an organization dedicated to enhancing the lives of people with Parkinson's, their families and care partners.



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## Let's Give it a Shot! The Use of Botulinum Toxin in Parkinson's Disease

by Norika Malhado-Chang, MD, UC Davis Professor of Neurology

#### You've heard of Botox® for wrinkles, but how about for Parkinson's disease?

It turns out that Botox® can be a helpful treatment for several neurologic conditions, including Parkinson's disease.

#### What is Botox® anyway?

Firstly, Botox® is a brand name for botulinum toxin, just like "Kleenex" is a brand name of facial tissue. There are actually several brands of toxin (Botox®, Dysport®, Xeomin®, and Myobloc®) so we'll use the general term "botulinum toxin" in this article.

Is it really a "toxin"? Yes! It's a neurotoxin produced by the bacteria Clostridium botulinum, and being infected with "botulism" can result in widespread muscle weakness. These days, we can harness the muscle relaxing effect of botulinum toxin without the dangerous risks of botulism, and we can safely inject the toxin into very specific, targeted muscles to minimize their overactivity.

Once it is injected into muscle, botulinum toxin interferes with the muscle's ability to receive messages from the nerves that control it. In the cases of muscles that are overactive, this decrease in nerve-muscle communication can be remarkably helpful.

#### **How might botulinum toxin be used in Parkinson's disease?**

Many people with PD experience painful muscle cramping called **dystonia**. This could involve any muscle, but the toes, feet, and neck are most commonly affected. These muscles might twist, curl (in the case of toes), or cause abnormal





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#### THE PARKINSON PATH

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# Introducing the New PANC Executive Director, Jan Whitney!

The PANC Board of Directors is pleased to introduce Jan Whitney as our Executive Director. She has extensive experience in building and administrating successful nonprofit organizations on the local, regional, state, and national levels. Jan's diverse background in working with health and business nonprofits, along with her effervescent personality and passion for the Parkinson's community, is a win for our 25-year-old organization.

Jan feels very fortunate to have rejoined PANC. "In 2017, I was lucky enough to lead PANC for a short period before life took me in an alternative direction. I have deeply missed the



Jan Whitney the new Executive Director for PANC

work of this organization, the community, volunteers, and donors, so I am thrilled for this renewed opportunity to continue to build on the existing beneficial services and benefits. Helping people affected by life's challenging predicaments is something I've always felt called to do and at the heart of all my work."

Jan added, "PANC is a unique entity within the Parkinson's community. Furthering our core mission, along with the already established collaborative work between the various health systems and affiliated organizations, will help us to continue to provide hands-on support, assistance, and access to resources for those experiencing Parkinson's disease throughout Northern California. It's clear from everyone I've met and everything I've seen since being back that at the heart of PANC, there is a collective of people with a passion to make a real and lasting difference to people living with Parkinson's, their families, and friends. I look forward to meeting and learning from as many of you as possible and furthering the efforts of this invaluable community resource."



## **Dial Down Your Anxiety!**

By Dr. Eric Egli, PhD

ersons with Parkinson's understandably worry about their future. Uncertainty and fear add to the physical concerns that make living a fulfilling life challenging. Throughout our life we develop strategies for dealing with many challenges. Unfortunately, when dealing with the special circumstances of PD, our usual ways of coping don't always work well and may actually work against us.

In threatening and challenging times our nature leads us to be vigilant and to anticipate danger and threats. We are motivated to think deeply and extensively about what may come and how we should prepare for or prevent what we fear may happen. When a threat is perceived, we worry. Ideally, that worry will engage us in developing problemsolving, and coping strategies.

However, there are times when we have done all the problem-solving we can and there is nothing more to do for the moment. At such times our natural drive to worry is no longer productive. If we can't step away from the worry it can dominate our life and well-being. It can turn into its own harmful and disruptive presence, sapping the pleasures one could be having now and worsening our health, our physical symptoms and our energy. When worry grows to a point where instead of being adaptive, it produces needless suffering and disrupts our quality of life it becomes problematic anxiety. I sometimes refer to this as "premiserating" i.e., "I will suffer now because I think I might later."

There are various forms of anxiety. Some, like panic, are very physical with heart racing, shortness of breath, dizziness, butterflies in the stomach, sweating, shaking, tremors and more. Clearly, this will aggravate PD symptoms. Other forms are more mental/emotional as discussed above, but all have physical and psychological aspects that can aggravate PD and other health conditions.

One question people have is how much of their anxiety is due to the neurology of PD itself? While clearly this is involved, other important factors include normal reactions to the stress, disability and uncertainty of PD. Other people may also have lifelong issues with anxiety apart from PD, which simply adds to the challenge. In addition, sometimes PD medications themselves can affect anxiety reactions. The reality is that all these factors may be in play and there may not be a simple answer. Fortunately, addressing

the anxiety does not require figuring out all the different possible causes. What is needed is a comprehensive approach based on each person's set of challenges, symptoms and strengths.

Regardless of the source, many behavioral and cognitive strategies can help with anxiety reduction. Completely eliminating anxiety is not a realistic or necessary goal. It is more useful to think of people as having dials not switches in this regard. We may not switch it off, but if we can dial down the magnitude of the worry and anxiety to a manageable level, we are doing well.

## Recommendations for dealing with anxiety include:

- 1) Recognize that some level of anxiety is normal and adaptive.
- 2) Get exercise and stay engaged with friends, acquaintances and loved ones.
- 3) Find ways to continue your favorite activities. Explore new interests if some are taken away.
- 4) Tell your doctor about your symptoms and get a referral to a psychiatrist if needed.
- 5) Learn relaxation practices such as deep breathing, imagery and meditation.
- 6) Consult a psychotherapist to help you improve your stress and anxiety management strategies and to help you cope with the broader challenges PD presents.
- 7) Live each present day to the fullest you can.

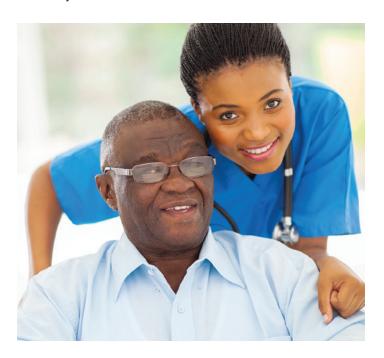


# Let's Give it a Shot! The Use of Botulinum Toxin in Parkinson's Disease continued from page 1

postures that interfere with regular movement. Dystonia in Parkinson's is related to dopamine and often signifies medication "wearing off" with cramping of the feet or toes overnight or in the early morning hours before one's first dose of levodopa. For others, dystonia may be most bothersome during peak dose. While medication adjustment may be helpful, it may not always be the ideal approach. Botulinum toxin injections are a useful way to target the specific muscles that are overactive without causing systemic side effects.

**Drooling** is another common indication for botulinum toxin injections. In the same way that botulinum toxin can temporarily weaken overactive muscles, botulinum toxin can also temporarily lessen oral salivary production when injected into salivary glands. The parotid glands in the cheeks are easily accessed and reduction in salivary production can be an immense help for this socially challenging symptom.

**Overactive bladder** is another Parkinson's symptom that can be managed with botulinum toxin injections. When the bladder muscle is relaxed, it can hold more urine and one doesn't have to make such frequent trips to the bathroom. These injections are performed by urologists using a special cystoscope inserted through the urethra. A potential side effect may be a bladder that is too "relaxed," resulting in urinary retention.





Finally, there are some cases in which botulinum toxin can be used to dampen **tremor**. While not FDA approved for this purpose, certain cases of high amplitude, medication resistant tremor can be dampened by relaxing the involved muscles. These injections should only be performed by trained specialists, as limb weakness can be a temporary side effect.

#### What to expect when injections are performed

It is not uncommon to need multiple injection sites for proper treatment. Botulinum toxin takes effect in 4-10 days, and maximum benefit is typically seen in 3-4 weeks. The toxin starts to wear off in 3 months, although this is variable for each person. Due to the risk of developing immunity to the toxin, we recommend scheduling botulinum toxin injections every 3 months for ongoing benefit.

To summarize, botulinum toxin serves to weaken muscle. This effect can be harnessed when we target the precise muscles that are overactive in Parkinson's disease. The effect of botulinum toxin is always temporary (no permanent effects) but does require special training and expertise. If you think botulinum toxin may be helpful for your symptoms, I encourage you to talk to your neurologist or movement disorders specialist.

### ¡Probemos! El Uso de Botulínica en Parkinson

por Norika Mahaldo-Chang, MD, profesora de neurología de UC Davis

#### Ha oído de Botox® para arrugas, ¿pero qué tal para el Parkinson?

Resulta que Botox® puede ser un tratamiento útil para varias condiciones neurológicas, incluso el Parkinson.

#### ¿Qué es Botox®?

En primer lugar, Botox® es una marca comercial para botulínica, así como "Kleenex" es una marca de pañuelito. Hay varias marcas de toxina (Botox®, Dysport®, Xeomin®, y Myobloc®) así que usaremos el término general de "botulínica" en este artículo.

¿Realmente es una "toxina"? ¡Sí! Es una neurotoxina producida por la bacteria *Clostridium botulinum*, y ser infectado con "botulismo" puede resultar en debilidad muscular extendida. Hoy día, podemos emplear el efecto relajante muscular de botulínica sin los riesgos peligrosos de botulismo, e inyectar con cuidado la toxina en músculos específicos para minimizar su exceso de actividad.

Al ser inyectado en el músculo, la botulínica interfiere con la habilidad del músculo de recibir mensajes de los nervios que lo controlan. En casos de músculos hiperactivos, esta reducción en comunicación entre nervio y músculo puede ser notablemente provechosa.

## ¿Cómo se puede usar botulínica en Parkinson (PD)?

Mucha gente con PD padece de calambres dolorosos, llamado **distonía.** Puede implicar cualquier músculo, pero los pies y sus dedos, y el cuello suelen ser los más afectados. Estos músculos se pueden torcer, enroscar (en el caso de los dedos del pie), o causar posturas anormales que interfieren con movimiento regular. Distonía en Parkinson es relacionada a dopamina y seguido significa el "desvanecimiento" de la medicina con calambres en los pies o dedos durante la noche o en la madrugada antes de la primera dosis de levodopa. Para otros, la distonía puede ser lo más molesto durante la máxima dosis. Modificar la medicina puede ayudar, pero no siempre es el método ideal. La inyección de Botulínica es un buen modo de tratar específicos músculos hiperactivos sin causar efectos secundarios sistémicos.

**Babear** es otra indicación común para uso de botulínica. Del mismo modo que botulínica puede temporalmente debilitar músculos hiperactivos, botulínica también puede temporalmente reducir la producción de saliva al inyectarla en la glándula salival. El acceso a la glándula parótida en las mejillas es fácil y la reducción de saliva puede ser una ayuda inmensa para este síntoma de incomodidad social.

**Vejiga hiperactiva** es otro síntoma de Parkinson que se puede controlar con inyección de botulínica. Cuando el músculo de la vejiga se relaja, puede contener más orina y no hay que ir tan seguido al baño. Estas inyecciones las hace un urólogo usando un cistoscopio especial insertado por la uretra. Un posible efecto secundario puede ser una vejiga demasiado "relajada", resultando en retención urinaria.

Finalmente, hay casos en cual botulínica se puede usar para disminuir **temblores.** Aunque no está aprobado por FDA para este propósito, ciertos casos de alta amplitud, temblores resistentes a medicación se pueden disminuir con relajar los músculos implicados. Estas inyecciones solo se deben hacer por especialistas capacitados, ya que la debilidad de las extremidades puede ser un efecto secundario temporal.

## Que se debe esperar cuando hacen las invecciones

No es fuera de lo común necesitar inyecciones en múltiples lugares para un tratamiento correcto. La botulínica toma efecto en 4-10 días, y el máximo beneficio típicamente se ve en 3-4 semanas. La toxina empieza a desvanecerse en 3 meses, aunque esto puede variar por persona. Debido al riesgo de desarrollar inmunidad a la toxina, se recomienda tomar inyecciones de botulínica cada 3 meses para beneficio continuo.

En breve, botulínica sirve para debilitar músculos. Este efecto se puede emplear cuando se inyectan los músculos precisos que son hiperactivos en el Parkinson. El efecto botulínica siempre es temporal (sin efecto permanente) pero requiere capacitación especial y experiencia. Si piensa que la botulínica puede ayudarle con sus síntomas, le recomiendo hablar con su neurólogo o especialista en trastornos de movimiento.



# When We Work Together Our Parkinson's Community is Unbeatable

The PANC Annual Conference 2022 was definitely a crowd pleaser. The Program was 'All Star' thanks to the work of our Medical Advisory Panel, the sponsors and exhibitors were plentiful and offered a wide range of products and information. Even the Canine Companions stayed busy as people rushed for a hug, a pet and a very wet kiss! In person attendance topped 600, with virtual attendees at around 200. Dr. Dorsey's book signing had a huge response and people waited in line long after the books were gone just to meet him and have him sign a bookmark! The I AM together WE ARE wall was very well received, featuring many heartfelt poems that elicited powerful emotions from all who stopped to read them and finally, our Community Partners gave abundantly of their time and many treasures!

A big thank you to each and every one of you for helping us make the 2022 Annual Conference an amazing success!



PANC Annual Conference 2022 crowd.

#### **Congratulations to PANC Conference Door Prize Winners**

Carrie Beale Pamela Myczek
Kathleen Carr Ellen Pettit
Kristi Chapman Karen Pinnegar
Christie Gochring Donna Swearengin

Pam Kirtlan

Conference attendees enjoying the I AM together WE ARE wall.

# Thank you

#### **To Our PANC Conference Community Partners!**

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Whitney High School Students



Kaiser Staff Volunteers (Left to Right) Joy Williams, PT., Christine Jackson, OT, Michael Abughazaleh, PT., Jennifer Liu, PT. and Barbara Chow, PT.

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Once Again Creations

# Fast Break Tech and the Child Support Directors Association of California

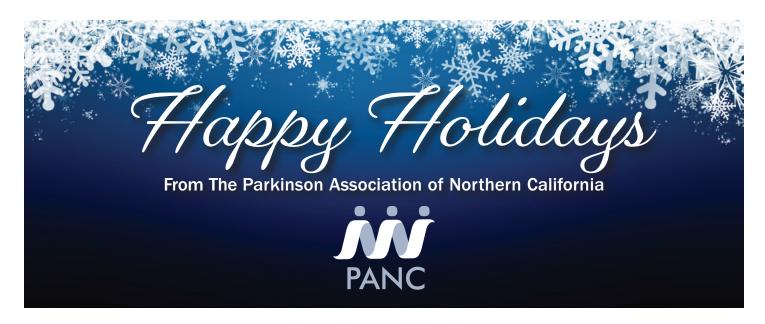
Puddles Children's Shoppe

Rock Steady Boxing Warrior Fit

Thank you to Fast Break Tech, a technology support company based in Sacramento, who facilitated the generous donation of two one-year-old Dell laptops to PANC from the Child Support Directors Association of California (CSDAC). As a donation-based organization, we try to keep expenses to a minimum therefore, certain aspects of the PANC technology have been undoubtedly antiquated. Steven at Fast Break noticed the deficiency and asked for a donation from CSDAC, who had just acquired new laptops. Staff and PANC are certainly benefitting from the updated equipment and are greatly appreciative of the team of individuals who helped make this happen. Thank you to Fast Break and CSDAC!







## My Ongoing Journey with Parkinson's Disease

By Susan Curry, Davis Support Group

#### **Chapter 2: Diagnosis**

During the latter part of 2014, while overseas, I experienced several symptoms which my husband Roy and I suspected that, put together, might be due to Parkinson's: tremors in my left leg and left arm; a history of falls; loss of sense of smell; slower movements, and restless leg. Several had been part of my life for a long time, but now they were hitting all at once.

My first neurology appointment in Sacramento was in January 2015. I felt some trepidation but was not too worried. I realize now that this was partly due to not knowing much about Parkinson's in general.

After we'd sat for a long wait in the reception room and then the exam room, the neurologist breezed in with a friendly smile and a brief apology. I outlined the history of my shaking, and when and how my left leg and arm were becoming annoying and distracting. We also told him of our suspicion that I might have PD.

He nodded, made a few notes on the computer screen, then said, "I'm going to take you through a series of exercises that will give us clues as to what is going on. As you may know, there is no pen and paper way of diagnosing Parkinson's, but we use tests of movement like these to be as accurate as we can."



I almost laughed at how ridiculously easy the first one looked: tapping my thumb and forefinger together on each hand. But I was surprised not to be able to keep pace with the doctor as he went faster and faster. Another test was to hold my palms out and flip them over, faster and faster. There was the test where you follow the doctor's fingers, and I did better on that.

He had me march in place, then sent me to walk down the corridor and back. Finally, he took my arms, had us both stand facing each other, and told me to push him as hard as I could. Then it was my turn to be pushed. My balance wasn't so good for this test.

"I expect you do this all day," I joked to cover feelings of anxiety, but with a solemn face, he was too busy writing notes on the computer to respond. Had I failed the tests? My husband and I sat as still as statues, waiting. After a few minutes, the doctor swiveled his chair towards us, looked me straight in the eye, and said:

"Ms. Curry, you have Parkinson's." I remember his intense gaze. The three of us were silent, then I might have said,

"I'm not surprised."

As he went on talking, I heard the words:

"Carbidopa/Levodopa, also known as Sinemet, is a good place to start. It helps to replace dopamine temporarily." I heard the first name with a jolt: how would I ever be able to remember it?

The doctor seemed surprised that I took the news of my future calmly. I'd heard that many patients burst into tears when the verdict is announced, but at that moment, I began my stance of denial, which lasted for the first four or five years.

My life until then had been full of challenges which I was used to meeting. As the years went on, however, I've become convinced that PD is the most formidable adversary I've ever met.

Thankfully, there is good news as well– more effective treatments, and even a possible cure - filtering from various websites. So far, I've presented a rather bleak story, but that's not the entire story.

## Honor, Memorial, Support and Celebration

#### August - October 2022

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## **Regional Support Groups**

#### For additional information, visit www.panctoday.org

Don't see a support group in your area? Let us help you start one! Contact us at 916-357-6641 or panc@panctoday.org

#### **EN ESPAÑOL**

#### Grupo De Apoyo para los Hispanos y/o Latinos con la Enfermedad de Parkinson

4 to Martes 6:00 p.m. (Reunión de Zoom) Kimberly Arredondo 916-884-7767,

kimberly@panctoday.org

#### Grupo De Apoyo para los Hispanos y/o Latinos con la Enfermedad de Parkinson

3er martes 6:00 p.m.

ACC Senior Center, 7334 Park City Dr., Sacramento

Kimberly Arredondo 916-884-7767,

kimberly@panctoday.org

#### **BUTTE COUNTY**

#### **Chico Parkinson's Support Group**

1st Wednesday (In person) Sycamore Glen Senior Community 1199 Diablo Ave. Chico 3rd Wednesday 1:00 p.m. (Zoom) Terry Donnelly 650-743-6871, tmdonnelly68@gmail.com

Bob Murray 530-321-6157, ordferry@yahoo.com

#### **EL DORADO COUNTY**

#### El Dorado Hills/Folsom Parkinson's Caregivers **Support Group**

1st and 3rd Friday 11:30 a.m. Round Table Pizza, 2793 E Bidwell St., #100, Folsom Larry Alver 916-933-2465, Idalver@sbcglobal.net

#### Folsom/El Dorado Hills Parkinson's Support Group

2nd Thursday 1:30 p.m. (Zoom) 4th Monday 10:30 a.m.

Folsom Senior Center, 48 Natoma Drive, Folsom

Donna Rixmann 916-712-9642. donna@yogapeace.net

#### **Placerville Parkinson's Support Group**

3rd Tuesday 2:00 p.m. First Lutheran Church, 1200 Pinecrest Ct., Placerville Kimberly Arrendondo 916-357-6641, kimberly@panctoday.org

#### **HUMBOLDT COUNTY**

#### **Humboldt Parkinson's CarePartners Support Group**

1st and 3rd Wednesday 9:00 a.m. (Zoom) Tom & Lisa Bethune 707-822-7923, thomasbethune@gmail.com

#### **Humboldt Parkinson's Support Group**

Every Wednesday 9:00 a.m. (Zoom) Ken & Rose Bond 707-826-7764, ken95524@suddenlink.net Tom & Lisa Bethune 707-822-7923, thomasbethune@gmail.com

#### **NAPA COUNTY**

#### Napa Valley Parkinson's Support Group

2nd Sunday 4:00 p.m. New Life Napa Church, 2525 1st Street, Napa Colleen Winters 209-602-1536, cfwinters@yahoo.com

#### **NEVADA COUNTY**

#### Grass Valley/Nevada City Parkinson's Care Partner **Support Group**

2nd Thursday 11:00 a.m. Communal Cafe, 233 Broad Street, Nevada City Jennifer Westoby 530-313-3524, jennifer.westoby@gmail.com

#### Grass Valley/Nevada City Parkinson's **Support Group**

3rd Thursday 2:00 p.m. Eskaton Village, 625 Eskaton Circle, Grass Valley Jennifer Westoby 530-313-3524, jennifer.westoby@gmail.com

#### **Truckee Parkinson's Support Group**

1st Friday 11:45 a.m. Tahoe Forest Center for Health 11012 Donner Pass Road, Truckee Ellen & John Roumasset 650-759-3666, dr.eroumasset@gmail.com

#### **PLACER COUNTY**

#### **Auburn Parkinson's Carepartner Support Group**

3rd Tuesday 11:30 a.m. The Club Car Restaurant, 836 Lincoln Way, Auburn Karen Hancock 530-885-0950, karen@hancockonline.net

#### **Auburn Parkinson's Support Group**

2nd Tuesday 11:30 a.m. Awful Annie's Restaurant, 13460 Lincoln Way, Auburn Karen Hancock 530-885-0950. karen@hancockonline.net

#### **Lincoln Parkinson's Support Group**

3rd Tuesday 10:00 a.m. Lincoln Hills Community Church 950 E Joiner Pkwy., Lincoln Hills Christine Grmolyes 916-769-0449, christine@seniorcs.com

#### Roseville Parkinson's Support Group-Maidu Area

Coming soon-Call office for latest info 916-357-6641

#### Roseville-West Parkinson's Support Group

4th Tuesday 11:00 a.m. St. John's Episcopal Church 2351 Pleasant Grove Blvd., Roseville Ken and Arlene Fujino 916-474-4688, kmfujino@outlook.com Diane Herold 916-788-9110

#### **SACRAMENTO COUNTY**

#### **Elk Grove Parkinson's Support Group**

3rd Wednesday 11:00 a.m. Senior Center of Elk Grove 8230 Civic Center Dr, #100, Elk Grove Myron Jantzen 916-804-6497, mpjantzen@aol.com Sherry Reser 916-320-7189, SherryLReser@gmail.com

PANC Advisory Support Group Facilitators and attendees should be aware that not all medications, treatments or theories about Parkinson's disease are 'right' for every person. If presentations or discussions within your Group raise issues in your mind regarding your personal condition or treatment plan, you are advised to bring those questions to your treating physician for further exploration prior to making any changes in your medications or routines.

#### El Dorado Hills/Folsom Parkinson's Caregivers **Support Group**

1st and 3rd Friday 11:30 a.m. Round Table Pizza, 2793 E Bidwell St., #100, Folsom Larry Alver 916-933-2465, Idalver@sbcglobal.net

#### Folsom/El Dorado Hills Parkinson's Support Group

2nd Thur 1:30 p.m. (Zoom) 4th Monday 10:30 a.m. Folsom Senior Center, 48 Natoma Drive, Folsom Donna Rixmann 916-712-9642,

#### **Gold River Lewy Body Dementia Support Group**

2nd Thursday 10:00 a.m. (Google Meet) Denise Davis 800-272-3900, denise.davis@alz.org

#### **Sac Post DBS Support Group**

donna@yogapeace.net

Once a month see panctoday.org/support-groups.html for flyer with dates-topics Email HS-DBS@ucdavis.edu for link to join Zoom meeting

For more information call 916-731-1610

#### Sacramento Area YOPD Group

1st Tuesday 6:30 p.m. St. Michael's Episcopal Church 2140 Mission Ave., Carmichael Susan Lopez-Payan, Andrew Holley, Sacyopd@hotmail.com

#### Sacramento Parkinson's Caregiver Support Group

3rd Tuesday 11:00 a.m. (Zoom)

Gain Saetern 916-728-9333, gsaetern@deloro.org

#### Sacramento-Arden Arcade Parkinson's **Support Group**

4th Thursday 12:00 a.m. Dante Event Center 2330 Fair Oaks Blvd., Sacramento 95825 Jim Morris 916-359-4859, jimor1940@gmail.com Betty Tronson bettytronson@sbcglobal.net

#### Sac-South Area Parkinson's Support Group

2nd Thursday 10:00 a.m. ACC Senior Center, 7334 Park City Dr., Sacramento Jerry Miyamoto 916-441-1020, jmiyamoto72@gmail.com Faye Baya-Wright 916-910-5152, fayeja21@gmail.com

#### **SAN JOAQUIN COUNTY**

Lodi Parkinson's Caregiver Support Group 3rd Monday 10:00 a.m. Gracepoint Church 801 S. Lower Sacramento Road, Lodi Charlene Martin 916-600-5769, lodiparkinsonsgroup@gmail.com

#### **Lodi Parkinson's Support Group**

1st Monday 10:00 a.m.

Gracepoint Church,

801 S. Lower Sacramento Road, Lodi

Maureen Olsen 209-329-1185

Robin Bray 209-269-1080,

lodiparkinsonsgroup@gmail.com

#### **SAN MATEO COUNTY**

#### Foster City Parkinson's Support Group

Atria Senior Living, 707 Thayer Ln., Foster City Will Corkern 650-534-7799, wcorkern@aol.com

#### **SHASTA COUNTY**

#### **Redding Parkinson's Support Group**

1st and 3rd Friday
Coffee in Enterprise Park, 4000 Victor Avenue, Redding
2nd Friday 12:00 p.m.
Church of Christ, 3434 North Street, Anderson
Kim Hawkins 530-945-7628,
kim.reddingpsg@gmail.com

#### **SOLANO COUNTY**

#### **Benicia Parkinson's Support Group**

2nd Saturday 10:00 a.m.
Benicia Lutheran Church, 201 Raymond Drive, Benicia
Bradford Miller 707-515-9216,
bradfordmiller807@gmail.com

#### Vacaville Parkinson's Support Group

4th Wednesday 12:00 p.m. McBride Center, 91 Town Square Pl., Vacaville Rick Newman 707-999-6845, newman.rick@yahoo.com John Alonso 707-689-6613, johnalonso2@gmail.com

#### **SONOMA COUNTY**

#### Parkinson's Support Group of Sonoma County

2nd Saturday 1:00 p.m.
Christchurch United Methodist
1717 Yulupa Avenue, Santa Rosa
Marc Alexander 707-431-8767,
malexander109@comcast.net

#### Sonoma County Caregivers and Women with Parkinson's Groups

Carepartners Group 1st and 3rd Friday 10:45 a.m. (Zoom)
Womens 3rd Wed 12:30 p.m. (Zoom)
Marie Kay Hansen briza1@comcast.net

#### **STANISLAUS COUNTY**

#### Modesto Parkinson's Support Group 3rd Wednesday 1:30 p.m. (Zoom) Beth Bollinger 209-668-9434, sdboyandcagirl@hotmail.com

#### **SUTTER, YUBA, COLUSA COUNTIES**

#### **Tri County Parkinson's Support Group**

2nd Monday 1:00 p.m. Sutter North Clinic 969 Plumas Street #208, Yuba City Susan Vantress 530-701-0039, suze2u@hotmail.com

Victoria Baker Victoriabaker530@gmail.com

#### YOLO COUNTY

#### **Davis Parkinson's Care Partners Support Group**

2nd and 4th Thursdays 11:00 a.m. Davis Senior Center, Games Room 646 A Street, Davis Karen Eagan 530-564-4323, kareneagan747@gmail.com

#### **Davis Parkinson's Support Group**

3rd Thursday 1:30 p.m.

Davis Senior Center, 646 A Street, Davis

Susan Curry 530-304-9927 smcurry@sbcglobal.net

#### **Woodland Parkinson's Support Group**

1st Wed 12:00 p.m.
Woodland Community Center
2001 East Street, Woodland
Steve Briscoe hellostevebriscoe@gmail.com

## **Arden Arcade Support Group**

#### **Mission Statement**

We welcome you to the Arden Arcade Support Group where everyone is accepted. This is a tremor safe zone, a place to relax, have fun, and strengthen ties to family, friends, community and each other.

Parkinson's can be an isolating disorder we can all relate to this but not here, not today, and not at Arden Arcade.

Dyskinesia can come out to play and freezing can happen with no judgement today.

People tend to do better in groups than alone, which is why we want this place to be like a home.

In this room we are inspired, stronger, wiser and better informed by our proximity to each other.

In this room we have each other, a respected zone, a safe zone, and a happy zone, where challenges are accepted and understood.

Parkinson's can affect people in different ways, so we hope you come to share your experiences in this safe place called Arden Arcade.

Created by: Barbie Light & KelliAnn Rubalcaba (2022)

This mission statement was written by two of our members and really encapsulates who we are at Arden Arcade. The leaders of the group consist of Jim Morris, Betty Tronson, KelliAnn Rubalcaba and Barbie Light. The leadership team works together to ensure there are speakers for the meetings, new people are welcomed, emails to 150+ subscribers are sent out, fun raffle prizes are given out, the roster is up to date, and a variety of other items. There are also members who voluntarily participate in various ways such as a small library, sound system set up, greeting people, and other items members are interested in. Arden Arcade has members who come in person, remotely, and some who just elect to get the emails with updates and topics. At every meeting, we have everyone introduce themselves and have a fun and new topic with each introduction, such as your favorite pie or flower. This allows people to get to know one another whether they are sitting next to you or across the room, as we take pride in making sure everyone is welcomed. Our goal is to introduce fun and new ideas, so we are not all 'business oriented'. We want everyone to come and learn, share, and enjoy. You will find support here at Arden Arcade and something that is useful to you as an individual, regardless of where you are on your journey. If you would like to be added to the group email list, with no obligation to you, send your information to bettytronson@sbcglobal.net

Our meetings are on the 4th Thursday of every month 10:00 – 12:00 p.m. at the Dante Event Center, 2330 Fair Oaks Blvd, Sacramento, CA, 95825



#### PARKINSON ASSOCIATION OF NORTHERN CALIFORNIA

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