

VIEWPOINTS



Summer 2024

VIEWPOINTS

Quarterly Newsletter
by Parkinson Society
British Columbia

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Your support is essential.

Parkinson Society BC would not exist without the support of our members, donors, and volunteers.

OUR MISSION

Parkinson Society British Columbia exists to empower people with Parkinson's in British Columbia through providing resources and services to enable self-management, self-reliance, and self-advocacy.

Here are a few of the ways you can support the Society:

MEMBERSHIP

For an annual fee of \$25, your household benefits from unlimited access to our education and support services, events, and resources.

DONATIONS

Contact us to set up monthly, quarterly or annual donations, or think of us when giving through United Way.

PLANNED GIVING & BEQUESTS

Consider Parkinson Society BC as a beneficiary in your will.

FUNDRAISING

Become a Champion for Parkinson's by organizing your own event benefiting the Society. For more information on how you can support us, visit www.parkinson.bc.ca/donate.

SUPPORT GROUPS

100 Mile House, Abbotsford, Advanced Carepartner Online, Burnaby, Campbell River, Carepartner Bereavement Online, Chilliwack, Chinese Speaking (Burnaby), Courtenay/Comox Valley, Cranbrook, Deep Brain Stimulation, Duncan/Cowichan Valley, Early-Mid Stage Carepartner Online, Gabriola Island, Kamloops, Kelowna, Kelowna Carepartners, Langley, Langley YOPD, Maple Ridge/Pitt Meadows, Maple Ridge Caregivers, Nanaimo, New Diagnosis, New Westminster, North Shore, Parkinson's Disease Online, Parksville/Qualicum, Parksville/Qualicum Caregivers, Powell River, Prince George, Quesnel, Richmond, Sechelt/Sunshine Coast, South Asian Online, South Delta, South Okanagan, Surrey, Trail/Castlegar, Tri Cities/While Rock, Vancouver Carepartners, Vancouver Downtown, Vancouver West Side, Vernon, Women Living with PD, Young Onset Parkinson's Online

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Announcement

Parkinson Society BC welcomes Dr. Joanne Baker as new CEO

Parkinson Society British Columbia (PSBC) is pleased to announce the appointment of Dr. Joanne Baker (PhD) as the new Chief Executive Officer (CEO). Dr. Baker steps into this role following the retirement of Jean Blake, who provided compassionate, forward-thinking leadership to the Society for over 10 years.

With a career spanning over a decade, Jean's impact has been deeply felt across the Parkinson's community in British Columbia. Among her many accomplishments, she spearheaded initiatives that have improved the lives of individuals living with Parkinson's disease. Notably, her collaborative efforts resulted in the BC Ministry of Health providing coverage for Duodopa therapy, a crucial treatment for advanced Parkinson's. Jean also worked tirelessly alongside advocates to highlight the importance of Deep Brain Stimulation (DBS). Her advocacy led to a doubling in the number of DBS surgeries performed annually and the onboarding of a second DBS neurosurgeon. Jean's commitment also extended to expanding specialized care, through innovative funding partnerships with health authorities to advance team-based care.



As PSBC bids farewell to Jean, the Society expresses immense gratitude for her outstanding service and wishes her a fulfilling retirement. Joanne's extensive experience and passion for social welfare make her well-suited to continue to champion the Parkinson's community. She brings with her a wealth of expertise garnered from a career in the non-profit sector since 1991, focusing on disability support, child welfare, and advocacy for survivors of domestic violence and sexual assault. Her contributions to the deinstitutionalization movement in the UK, combined with her senior roles in provincial anti-violence and child welfare organizations in Vancouver, reflect her commitment to meaningful change. Beyond her professional endeavors, Joanne is interested in film, literature, and football (the round ball kind).

PSBC is confident that under Joanne's leadership, the Society will continue to thrive, innovate, and expand its support for individuals and families affected by Parkinson's disease. Join us in welcoming Joanne as she embarks on this new chapter of leading PSBC into a future marked by inclusivity, innovation, and unwavering support for the Parkinson's community in British Columbia!

Ask an Expert

Dr. Jonathan Squires discusses the brain health benefits of improvisation for people with Parkinson's



Dr. Jonathan Squires is a movement disorder neurologist and co-medical director of the University of British Columbia (UBC) Movement Disorder Clinic in Vancouver.

He completed his neurology residency training at UBC and did his fellowship in movement disorders at Mount Sinai Beth Israel in New York City. He is interested in improving care delivery for people with Parkinson's disease and other movement disorders.

Can you tell our readers a little bit about how you became interested in studying the effects of improv on brain health and Parkinson's disease (PD)?

Full disclosure, my husband, Daniel Dumsha, is a professional improviser, so I've been to a great many improv shows over the years. Several years back, I stumbled on a paper from the Movement Disorder Group at Northwestern University in Chicago, in partnership with Second City Improv. They had done a pilot project to explore the feasibility of holding improv classes for people with Parkinson's disease. It was only a small study (and I haven't seen any follow-up work), but the participants enjoyed the classes and there were some improvements in quality-of-life measures on the rating scale we use to track Parkinson's symptoms. Around that time, one of my patients approached the improv school at what was then called Vancouver Theatre Sports on Granville Island asking to develop a program for people living with PD. Dan was teaching at that school at the time, and it seemed like a natural match. The rest is history!

How can improv help people with Parkinson's? Are there any observable changes or improvements in brain function in individuals with PD who participate in improv sessions?

I'm not aware of any studies looking at the effect of improvised comedy on brain function. However, there are studies of musical improvisation that suggest that the brain areas involved in word retrieval (which is commonly affected in Parkinson's disease) are also involved in improvisation. We know that cognitive activity helps to maintain brain health, and this activity seems to exercise an area of the brain that is affected by PD, so it's at least plausible that there could be changes in brain function that are meaningful to people living with PD. Anecdotally, the wife of one of my patients did notice significant improvements in her husband's ability to communicate for a day or two after he took an improv class, which may support this idea!

How does the social aspect of improv contribute to its benefits?

Certainly, we know that social activity (along with cognitive and physical activity) is important for maintaining brain health and quality of life. People with PD who have participated in improv programs have told me that they really value the sense of community they develop by participating in these programs. One person described his improv troupe as "a support group without the complaining."

Are there any specific improv techniques or exercises that you find particularly beneficial for individuals with Parkinson's disease, and if so, why?

The foundational principle of improv comedy is "yes, and." This means that you accept whatever your scene partners throw at you (the "yes") and then build on it (the "and"). I think that this principle is very applicable to living with Parkinson's disease. One theme I hear commonly from my patients and their caregivers is the challenge of dealing with the unpredictability of life with PD. Some days are just bad days, and it makes it hard to plan your life.



I think (and hope) that applying the principle of “yes, and” to life with PD will teach people skills that they can use to roll with the punches, so to speak, and live the best life possible with PD. Another principle in improv is celebrating mistakes; sometimes when a performer “fails” at a task, that’s where the joy in the scene is found.

In terms of specific exercises, I asked Dan what participants have told him they’ve liked about the improv classes. His top three were the following:

1. **Emotional rollercoaster** – during a scene, one participant is assigned to “coast”. As the scene unfolds, the host will give them emotions they have to express, so they may have to go from euphoria to rage to indifference over the span of a couple of minutes. They also do a warmup practicing different facial expressions to match the emotions, which hopefully helps deal with facial masking.
2. **Word association** – focuses on active listening and can help with projecting the voice and dealing with anxiety.
3. **New choice** – a game where the audience will yell/type “new choice” at any time, and the improviser has to change the last thing they said to something different. This can help work on working memory and cognitive flexibility.

In a 2023 webinar, you previously mentioned that you would like to do a study on the effects of improv on PD. Do you have any updates on the study? Additionally, what benefits of improv therapy for Parkinson’s disease do you hope to demonstrate?

The study remains an aspirational goal at this point, pending some bandwidth among our research team to design and carry out the study. My great hope is that improv helps people living with PD and their caregivers cope better with the disease and improve their relationships and quality of life. In addition, we know that cognitive and social activity help to maintain brain health and slow the progression of neurodegenerative diseases like Parkinson’s disease, so I’m optimistic that there may be some benefit on the disease itself. This is, of course, very difficult to prove.

Do you think the fact that improv comedy usually makes people laugh is important for its benefits? If so, why?

Absolutely! Patch Adams taught us that laughter is the best medicine! I remember several years ago working with a physiotherapist who has an interest in PD and talking to her about studying improv. Her comment was “do we really need to do a study to show that something that brings people joy has health benefits?” That has stuck with me. There is a body of research that supports the idea that humour has health benefits as well.

Can improv also help caregivers/carepartners of people with PD? If so, how?

There is at least one study that I'm aware of that demonstrates that training in improvisation helps to reduce caregiver depression and burnout. Improv training is also something that people living with PD and their caregivers can do together to bring some joy and laughter into their relationship.

I think that skills you learn in improv are applicable to lots of situations we commonly face. I've heard one person say after an improv class, that she thought the techniques would help with her parenting. Daniel has recently started a company called Improv for Work and Wellness that uses improv techniques to help people think on their feet and improve their presentation skills at work.

Anything else you would like to add?

First of all, I'd like to thank Parkinson Society BC and the BC Brain Wellness Program for seeing the value in this program and supporting it over the years. I would also encourage people to look into classes. For the converted, there is actually an improv troupe of people living with PD who come together to put on shows online. They actually performed live to a sold-out crowd at last year's World Parkinson's Congress in Barcelona. As a seasoned viewer of improv, I can honestly say it was one of the best improv shows I've seen in the past few years!



Research

Characterization of sensorial profiles in Parkinson's disease



RESEARCHER

Ms. Imola Mihalecz,
University of Montreal,
Graduate Student Award

FUNDING AMOUNT

\$20,000 over 2 years,
co-funded through a
partnership between
Parkinson Society
British Columbia and
the Parkinson Canada
Research Program

Parkinson's disease (PD) is widely recognized for its motor symptoms, but chronic pain that affects many individuals with the disorder is often overlooked. Ms. Imola Mihalecz, a graduate student at the University of Montreal, is leading a pioneering research project aimed at unraveling this complex issue.

Chronic pain is a common yet under-addressed issue in PD, affecting patients at various stages of the disease. Pain can appear early in PD, worsen over time, and potentially have a greater impact on patients' quality of life than motor symptoms. However, the reasons behind why some individuals with PD experience chronic pain while others do not remain elusive. Mihalecz's project seeks to unravel this mystery by investigating pain perception in PD.

Drawing from previous literature, Mihalecz notes that individuals with PD exhibit heightened sensitivity to painful sensations. However, it remains uncertain whether this hypersensitivity is a consequence of the disease itself or the presence of chronic pain in Parkinson's.

The project involves a comprehensive analysis of pain perception levels in PD compared to other pain pathologies and healthy individuals. Through careful examination, Mihalecz hopes to pinpoint the factors contributing to pain hypersensitivity in PD, paving the way for enhanced pain management protocols. An improved understanding of PD-related pain should also help to detect pain symptoms and develop a more detailed characterization of clinical sub-groups, which may lead to tailored treatment strategies.

Looking ahead, Mihalecz envisions a future where Parkinson's disease is understood not just as a motor disorder but also as a condition encompassing diverse non-motor symptoms, including pain. Through her work, she aims to raise awareness about the importance of addressing these often-overlooked aspects of PD. Furthermore, she aspires to contribute to the development of targeted pain management interventions that will be accepted and widely applied by other clinicians.

Beyond her research aspirations, Mihalecz harbors ambitions of becoming a leading advocate for scientific communication, bridging the gap between patients and clinicians. By championing greater understanding and recognition of PD-related pain, she aims to leave a lasting impact on the field of Parkinson's research.

Through collaborative efforts and dedicated research initiatives like Mihalecz's, the path towards improved quality of life for people with Parkinson's becomes clearer, one step at a time.

Source: Parkinson Canada Research Program.

Thank you for your support of Parkinson's Awareness Month!

- Write a brief message of hope to the Parkinson's community.
- Describe Parkinson's in three words.

I have Parkinson's...
Parkinson's doesn't have me!

- Write a brief message of hope to the Parkinson's community.
- Describe Parkinson's in three words.

"humbling, empowering, courageous"

- Write a brief message of hope to the Parkinson's community.
- Describe Parkinson's in three words.

WE PARKIES HAVE A GREAT SENSE OF HUMOUR, AND HUMILITY. THROUGH OUR SUPPORT GROUP, I HAVE MET SOME WONDERFUL PEOPLE WHO HAVE HELPED ME ON MY JOURNEY.

* OVERWHELMING
* MANAGEABLE
* DOABLE

- Write a brief message of hope to the Parkinson's community.
- Describe Parkinson's in three words.

Parkinson's disease is not the end of the world - be grateful for every day!

slowly, progressive, tremor

Thank you for joining us in recognizing April as Parkinson's Awareness Month.

Your support helped us engage the public in understanding Parkinson's disease and its profound impact on the lives of over 17,500 British Columbians affected by this illness. We appreciate everyone's commitment to making a difference!

Throughout the month of April, our support groups shared their descriptions of Parkinson's, as well as messages of hope. From personal experiences to words of encouragement, their insights below inspire us all.

- Write a brief message of hope to the Parkinson's community. Describe Parkinson's in three words.

Hope: You are still you. Things change slowly.

Three Words: Shocking; unexplainable

- Write a brief message of hope to the Parkinson's community. Describe Parkinson's in three words.

You can continue with your life with some adjustments.

dizziness

Slowness of walking

tremors

- Write a brief message of hope to the Parkinson's community. Describe Parkinson's in three words.

Parkinson's does not need to dominate your life. Living with Parkinson's takes a positive attitude, good support, and medication that is appropriate for your needs. Stay active and accept your new symptoms with a positive outlook. Think about all the things you can still accomplish

- Write a brief message of hope to the Parkinson's community. Describe Parkinson's in three words.

Support group and exercises are very helpful. Keep on moving and socializing you will be okay. One day at a time...

4. Shaky, stiff, but still moving!

Living Well

Seeing through the clouds: brain fog in Parkinson's

Many individuals with Parkinson's disease (PD) have experienced a struggle to think clearly or a sensation of mental fuzziness. This frustrating non-motor symptom is aptly named "brain fog," as it suggests a fog or cloud obscuring clear thinking. People with brain fog may have trouble focusing, remembering things, or finding the right words to say. Ultimately, this can result in not feeling like yourself (Lee, n.d.). Brain fog can arise from many factors, including fatigue, medications, and lifestyle choices (Daniels, 2020).

In particular, fatigue is a major contributor to feelings of brain fog. It is no surprise to many that Parkinson's disease, especially its motor symptoms, can cause sleeplessness. Issues such as insomnia and excessive daytime sleepiness can also be symptoms of Parkinson's itself, because the disease affects the brain's ability to regulate sleep (Daniels, 2020). However, what is lesser known is that side effects from common antiparkinsonian medications can also cause fatigue. Some people report feelings of tiredness shortly after taking levodopa or certain dopamine agonists (in particular, pramipexole and ropinirole) (Hobson et al., 2002). A lack of sleep disturbs the communication between our brain cells, resulting in momentary lapses in mental function that impact memory and visual perception (Schneiderman, 2018).

Whatever the cause of fatigue, managing it is an important step in overcoming brain fog. One way people with PD can ensure a better night's sleep is to take over-the-counter melatonin supplements. In fact, studies have found that people with Parkinson's have lower levels of melatonin secretion when compared to the general population. For those who do not wish to take or cannot tolerate melatonin, there are other medication treatment options, including the antidepressant mirtazapine, which may also be beneficial in treating tremor (Daniels, 2020).

Speak with your doctor about what is right for you. Additionally, ensuring good sleep hygiene practices can make a big difference in promoting restful sleep. These include no screens one hour before bed, ensuring your sleeping place is both dark and cool, and avoiding caffeine at least eight hours before bed. You may also wish to avoid daytime napping, as it can disrupt night sleep (Lee, n.d.).

Another powerful tool against brain fog is the power of moderate- to high-intensity exercise. Researchers at the University of British Columbia looked at what happened to nearly 100 women in their 70s and 80s as a result of an aerobic training program. When compared to those who participated in balance and muscle toning exercises, the aerobic group showed substantial growth in a part of the brain called the hippocampus after six months, which is responsible for learning, memory, and emotion (ten Brinke et al., 2015). This finding is significant, especially since after the age of 20, the hippocampus declines by 1% each year in most people. In addition to its brain-boosting effects, exercise gets the blood pumping and adrenaline flowing, which can enhance memory and feelings of being energized – the exact opposite of the sluggishness associated with brain fog (University of Central Florida, n.d.).

Another important thing to consider is diet, which can play a significant role in brain fog. In particular, a vitamin B12 deficiency can cause several cognitive issues, as this vitamin supports a healthy brain and nervous system. It is primarily found in animal products, such as meat, eggs, and dairy, which is why those eating vegetarian and vegan diets must take care to supplement their intake – doctors recommend adults take 2.4 micrograms of B12 every day (Daugherty, 2024). Seniors and older adults also absorb less vitamin B12 from their diet, resulting in up to 38%



of older individuals having mild B12 deficiency (Stover, 2010). And one study of people with Parkinson's disease found that those who had lower B12 levels had faster-advancing cognitive and motor symptoms from the illness (Leigh, 2018). Fortunately, checking vitamin B12 levels is done with a straightforward blood test, so speak with your doctor.

Additionally, a diet high in refined sugar has been found to be harmful to brain function by causing inflammation and oxidative stress (Selhub, 2022). Diets high in fat and sugar, even for a short period time, can lead to problems with memory and learning because of changes observed in the hippocampus. Specifically, these diets can cause the branches of brain cells to shrink, spaces between cells to widen, and the area where cells receive signals to narrow. All of these changes affect how well the brain can adapt (called neuroplasticity), which is important for optimal brain health and learning (Fadó, 2022).

Harvard nutritionist Dr. Uma Naidoo recommends everyone eat a diverse, whole food diet as much as possible to stave off brain fog. She recommends eating foods with multiple colours, choosing foods with high micronutrient content (such as B vitamins,

calcium, magnesium, and iron), consuming healthy fats (such as avocado oil, which is anti-inflammatory), and staying away from anything that will cause big spikes in blood sugar – what goes up must come down, resulting in energy crashes and cloudy thinking (Naidoo, 2023).

Finally, the key role that hydration plays in brain fog cannot be overlooked. Losing as little as two percent of the water in your body can reduce cognitive abilities, attentiveness, memory, and your ability to make decisions (BBC, n.d.). People with Parkinson's disease are particularly at risk for dehydration because PD itself can reduce feelings of thirst or cause issues with swallowing, which can make some individuals fearful of choking. Additionally, symptoms of autonomic dysfunction in Parkinson's, such as excessive sweating, drooling, and increased urination, contribute to greater water loss. In some cases, nausea and diarrhea may be side effects of some antiparkinsonian medications, further leading to dehydration. Because of these challenges, people with Parkinson's typically consume an average of 30% less fluids than those without the disease (Parkinson's Disease Research, Education, and Clinical Centers, 2007). Setting alarms to drink water may be one strategy to get enough liquids, as well as flavouring the water to improve its taste,

adding thickening agents to liquids to make them safer to swallow, or eating plenty of water-rich fruits and vegetables, such as watermelon (Parkinson's Disease Research, Education, and Clinical Centers, 2007). However you choose to get your six to eight glasses a day, keep in mind that each sip leads to better brain function.

Managing brain fog in Parkinson's disease involves a multifaceted approach; from addressing fatigue through sleep management and medication adjustments to embracing the benefits of exercise, diet, and hydration, individuals can take proactive steps towards mental clarity. With an approach tailored to individual needs and guided by medical advice, people with PD can strive for clearer thinking, enhanced memory, and improved quality of life in their Parkinson's journey.

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JEANETTE FISHER PYNN
PERSON WITH PARKINSON'S

Jeanette Fisher Pynn underwent Deep Brain Stimulation surgery for Parkinson's disease in 2023. The results of the surgery have significantly improved her quality of life, including allowing her to return to running.



Our Mission

Empower people with Parkinson's in British Columbia through providing resources and services to enable self-management, self-reliance, and self-advocacy.

What is Parkinson's Disease?

Parkinson's disease is caused by a loss of dopamine in the brain and is the second most common chronic neurodegenerative disorder after Alzheimer's disease. Both motor and non-motor symptoms may be experienced, such as tremor, rigidity, slowness of movement, difficulty with speech, sleep disturbance and mood disorders.

There is currently no known cure. It is estimated that there are approximately 17,500 individuals living with Parkinson's in British Columbia. Experts predict that the incidence of Parkinson's will double by 2040. While the vast majority of people with Parkinson's are over 60, 20% are diagnosed before the age of 50 and many are in their 30s and 40s.

Dear Friends of Parkinson Society BC,

As we reflect on the past year, we are both proud and inspired by the progress we have achieved together for the Parkinson's community in British Columbia. Through strategic initiatives and dedicated efforts, we have made strides in enhancing care, support, and advocacy for those affected by Parkinson's disease. As the Chief Executive Officer (CEO), Jean Blake, and Board Chair, Andrew Davenport, we wish to highlight these accomplishments and outline our vision for the future.

ADVANCEMENTS IN HEALTHCARE SUPPORT

This year saw remarkable advancements in the funding and support for several Allied Healthcare Professionals (AHCPs), directly impacting the quality of care for individuals with Parkinson's. The successful pilot projects, which were spearheaded by Parkinson Society BC, have led to sustainable funding commitments from the Interior and Island Health Authorities. This achievement marks a significant step forward in providing comprehensive care and underscores the importance of multidisciplinary approaches in treating Parkinson's disease.

Additionally, the recruitment of a second neurosurgeon, Dr. Stefan Lang, signifies a major milestone in addressing the critical wait times for Deep Brain Stimulation (DBS) surgeries. This development not only improves access to essential treatment but also represents a triumph of patient advocacy and a commitment to health equity.

EXPANSION OF PROGRAMS AND SERVICES

In our continuous effort to enhance patient support, we have introduced assigned intensity levels to our exercise programs. This ensures that individuals can engage in activities that are appropriate for their fitness level, fostering a safer and more effective approach to physical well-being.

Last year, we announced the combination of our Counselling & Healthcare Navigation service. This integrated approach includes a registered clinical counsellor and a registered social worker, offering comprehensive support through three pathways: Short-Term Psychotherapy, Psychoeducation, and Healthcare Navigation. This holistic service is designed to address the emotional, educational, and practical healthcare needs of individuals and families navigating Parkinson's disease, provided free of charge. By consolidating these services, we aim to offer a more cohesive and accessible support system for our community.

ACKNOWLEDGEMENTS AND REFLECTIONS

As Jean Blake prepares for retirement, we take this opportunity to reflect on a decade of service, growth, and shared experiences within the Parkinson's community. We are deeply grateful for the dedication and support of our volunteers, donors, staff, and the wider community, whose contributions have been instrumental in our achievements. These include the doubling of DBS surgeries, securing Duodopa coverage through BC's Ministry of Health, and the establishment of support for movement disorder clinics, among others.

LOOKING AHEAD

While we celebrate our accomplishments, we recognize the ongoing challenges and the need for expanded care, innovative therapies, and continued advocacy. With the support of our community, we are confident in our ability to make further strides in improving the lives of those affected by Parkinson's disease in British Columbia.

We thank you for your continued support and commitment to Parkinson Society BC. Together, we will continue to make a significant impact in the lives of those navigating Parkinson's disease.

With gratitude,



Jean Blake CEO



Andrew Davenport BOARD CHAIR



Message from Finance Committee

Our Picture of Financial Accountability

To view a copy of our audited 2023 Financial Statements, please visit www.parkinson.bc.ca.

Revenue

2023

33%

Bequests
\$906,250

30%

Donations
\$827,911

21%

Investments + Other
\$560,842

16%

Special Events
\$424,668

Expenses

2023

52%

Support Services
\$1,210,259

26%

Research
\$613,208

15%

Fundraising
\$314,874

5%

**Public Awareness,
Communication & Advocacy**
\$113,110

3%

Governance & Administration
\$76,465

The Society enters 2024 with reserves equal to 18 months of its historical expenses, which provides the Board with further opportunity to actualize our strategic priorities. The Board continues to review opportunities to further increase the Society's impact and reach throughout BC.

Special Thanks to Our Supporters



Note: We strive to ensure that each name is appropriately listed and spelled. Please let us know if we have made an error so we may correctly recognize you in the future. (* denotes deceased as at publication)

Individual Leadership Circle \$5,000+

Anonymous (5)
Dorothy and Albert Anderson
Jill B. Boileau
Linda Leslie
Chris Vollan

Legacy Gifts Generous Estate Contributions

Richard James Claringbull
Myrna Ellen Doricich
David Haley
Violet May Henderson
Melvin Anthony Huisman

Margo Louise Jakobsen
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Victor Gordon Cameron Neil
Margaret Leona Taylor
Thomas John Kenneth Thompson

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Todd Brown
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Victor Dyck
Murray and Carol Firth
Jeanette Fisher Pynn
Jean H. Flintoft
Matthew Freeman
Abe and Lillian Friesen

Janice and Terry Gibbon
Karen Giesbrecht
Brian W. Gillespie
Catherine and Gary Harasym
Grace Harling
Carolyn Harper
Margaux M. Hennebery
Janice and Rodney Hobbs
Judi Hopkins
Colleen Horner
Mark and Angela Hutchinson
Ruth and Donald James
John Johnson and Eva Maria Moser
Simon Kahl
John King
Nurkhatun Ladha
Maureen Legg
Patti Leggett
Marna Leslie

Roberta and Angus Leslie
Diane Marsh
Mary E. Martin
Bill Mathieson and Meg Clarke
Ellen McCurrach
Wray McDonnell
Alan and Holly Meadows
Doug and Brenda Morris
Norah Morrow
Margaret E. Mutch
Joseph Negraeff
Robin and Judith Nelson
Joan Nielsen
Alison Norman and Brian Pollard
Marilyn and Darcy Olson
Paul Pearlman and Stephanie Soulsby
Catherine Pezarro
Vicki and Rory Polson
Nancy Pow and Peter Chappell

Dr. K. David Reich and Family
Adam Rich
Ted Rich
Gennine Richardson
David and Elaine Rickards
Claire Finch and Steve Russell
Nancy Segsworth
Theresa Sheehan and Terry Ellis
Laird and Annalee Siemens
Christopher Silvan
Alberta V. Sirosky
Bernice and Michael Smerdon
Joan and Richard Smyth
Peter and Gabriele Stojak
Laurie Stovel
Dr. Jennifer L. Takahashi
Garry and Cheryl Toop
Malcolm Whittall
Stan and Tilly Wiebe
Sherri and Julian Zelazny

Individual Tulip Circle \$500+

Anonymous (72)
Rob Aird
Dean Alexander
Raymond & Doreen Alley
Clifford & Carol Anderson
Margaret Shan Atkins
Peter & Marie Baigent
Georgina Beddome
TPT Holdings
Marilyn Blusson
Sheryl Bolton
Janice & Bryan Brooking
Linda Bruder
Mark & Susan Bullock
Stephen Carlman
IMPACT Parkinson's
David & Debbie Couling
In Memory of Carlo Mancini
Barbara Cox & William Reed
Andrew Davenport & Tanya Takeuchi
Evelyn Davis Johnson
Tony Dawson
Elzo & Lynn deVries
Gavin Dirom
Bruce & Delight Dobby
Pierre Ducharme & Allison Haley

Mrs. Sharon Dyball
Henry Fetigan
Nigel & Joan Fitzpatrick
Todd Follett
Alistair Galbraith
Sandra Galbraith
Beverly & Kenneth Gelhorn
Carol Gordon
Steve & Lynda Grisack
Larry Harper
Sandra Harrison
Deborah & Garry Hartley
Hugh Hemphill
Katharine Hennebery
Lorna Hightower
Angela & Michael Hope
Victor Hori & Heather M. Yamada
Katharina Huang
Chris Huff
Catherine Huston & Jerry Hurtubise
Peter M. Jarvis
Penny Jennings
Michelle & Les Jickling
Mary & Bill* Jordan
Pat & Bryan Kassa
Jeff & Wendy Keeble

Ruth & Alf Konrad
John Kot
Marian Lewis-Peel
David & Julie Lloyd
Barbara Lockyer
Eileen Mate
Barry & Barbara McBride
Shirley McGillivray
Bruce A. McIntyre
Max & Margrit Meier
Ben & Dorothea Meulenbeld
Roger & Dominique Miller
Ernest & Janis Molgat
Dwight & Heather More
Mary Mowbray
Nick Nuraney
Fumiko Oguchi-Chen
Gordon & Wendy Olinger
Chris & Harold Olsen
Rendy & Brian Olthuis
Jacqueline Ordroneau
James H. Patterson & Lauren Kwan
Iris Pierrot
David Probst
Dr. Allan Quigley
Deborah & Dave Ralston

Wayne Reeves
Susan Renning
Jean Reston
Donna Rich
Parveen Sandhu
James Smerdon & Deana Grinnell-Smerdon
Ian Smith
Julie Steiner
Barry Taylor
Carole Taylor
Tiffany Taylor
Jack & Ann Thomson
Jasdeep Uppal
Monica & Gary Vaughn
Phil Wakefield
Ulrika Wallerstein
Val Walters
Maire & Duncan Watson
Bryan White & Glennis Davidson-White
Max Whitney
Robert Wiens
Daryl Wile
Faye Wong
Catherine Wyse

Organization Leadership Circle \$5,000+

A&W (Newton/Strawberry Hill, Cloverdale, Surrey/Glenlyon, & Burnaby)
Aqueduct Foundation
Bell Media
Blake, Cassels & Graydon LLP
BMC Networks Inc. Technology Services

BMO
Corus Entertainment Inc.
Falcon Foundation
Harken Towing
Jakobsen Foundation via Strategic Charitable Giving Foundation

Lewis Family Fund, held at NWM Private Giving Foundation
Parke Pacific Projects Ltd.
Provincial Employees Community Services Fund
Raven Foundation

River Foundation
Stingray Group
The Alan and Doreen Thompson Charitable Foundation

Organization Benefactors Circle \$1,000+

1173461 BC Ltd.
2725380 Canada Inc.
Air Canada Foundation
Anthem Capital Corp.
Anytime Fitness West End
Beaver Valley Lions Club
Bond Repro
Coast Capital Savings (Help Headquarters)
Eagle Family Fund, held at Nicola Wealth Private Giving Foundation

Fograscher Family Fund, held at Nicola Wealth Private Giving Foundation
Fraternal Order of Eagles Cranbrook Aerie No. 3032
Inner City Diesel
Kamloops Parkinson's Awareness Group
Loyal Order of Moose Lodge #1552
McElhanney Ltd.
Me-n-Ed's Enterprises Canada Ltd.
Carole & David Muller Family Fund, held at Vancouver Foundation

North Kamloops Unit 290 Holding Society
Odlum Brown Ltd.
Omineca Fabricating
Pekarsky Family Foundation
Neil & Deborah Reiner Fund, held at Nicola Wealth Private Giving Foundation
Royal Canadian Legion #88 Ladies Aux.
Sparwood Hose & Fittings
St. Francis Xavier School
Teck Coal Ltd.

TELUS
TELUS Friendly Future Foundation
UBC Project PATHS
Wells Fargo Equipment Finance Co.
Werner and Helga Hoing Foundation
Whites Location Equipment Supply Inc.
Wilson M. Beck Insurance Services Inc.

Our Year in Review 2023

THANK YOU TO OUR VOLUNTEERS

3,456+

Hours Provided to Support the Society's Programs, Services, Advocacy, and Fundraising



Registration volunteer at Parkinson SuperWalk 2023 in Vancouver, BC

FUNDRAISING

\$358,940

Raised for Superwalk

PARKINSON SUPERWALK®

LEGACY GIFTS



\$827,911

Given from the Estates of Ten Individuals



Allie Saks leading warm-up exercises prior to the 2023 Superwalk in Vancouver, BC

PD Connect®

125

Referrals from Healthcare Professionals through our PD Connect® Program

CONSULTATION + INQUIRIES

1,830

Information and Referral Inquiries

149

In-Depth Consultations

COUNSELLING

678

Hours

129

New Clients

2

Held two PD Warrior Training Courses for 32 Healthcare Professionals

5

Hosted five in-person Conferences and Workshops



PD Warrior certification training September 2023 in Kelowna, BC



Alana Dhillon at our Kelowna Regional Conference

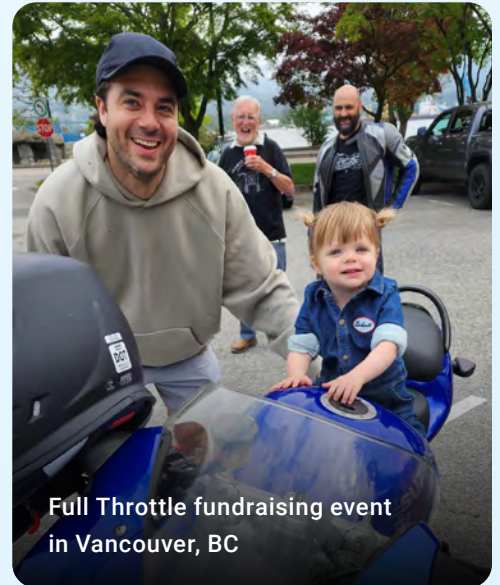
PHYSIOTHERAPY

233

Virtual Hours

46

New Clients



Full Throttle fundraising event in Vancouver, BC



Superwalk 2023 in 100 Mile House, BC



Superwalk 2023 in Vancouver, BC

WEBINARS

168

Exercise, Activity, and Education Webinars

2,526

Participants Served

Board of Directors

Andrew Davenport
CHAIR

Dave Rickards
VICE CHAIR

Sherri Zelazny
SECRETARY

Martie Rose Mendoza
TREASURER

Mark Hutchinson
DIRECTOR

Arne Johansen
DIRECTOR

Sean Lee
DIRECTOR

Bill Mathieson
DIRECTOR

Richard Mayede
DIRECTOR

James Patterson
DIRECTOR

Cec Primeau
DIRECTOR

Elisabeth Sadowski
DIRECTOR

Jim Wu
DIRECTOR

Martin McKeown
MEDICAL ADVISOR

Our Staff

Jean Blake
CHIEF EXECUTIVE
OFFICER

Alana Dhillon
MANAGER, EDUCATION &
SUPPORT SERVICES

Shelly Yu
EDUCATION & SUPPORT
SERVICES COORDINATOR/
PHYSIOTHERAPIST

Jessica Chow
PHYSIOTHERAPIST

Alexandra Hernandez
EDUCATION & SUPPORT
SERVICES COORDINATOR

Kelly Felgenhauer
EDUCATION & SUPPORT
SERVICES COORDINATOR

Courtney Doherty
COUNSELLOR

Tricia Wallace
COUNSELLOR

Corrina Masson
SOCIAL WORKER

Madelaine Ross
COUNSELLOR

Alicia Wrobel
SENIOR MANAGER,
RESOURCE DEVELOPMENT
& COMMUNICATIONS

Mirela Prime
MARKETING &
COMMUNICATIONS
SENIOR COORDINATOR

Nadia Ali
MARKETING &
COMMUNICATIONS
COORDINATOR

Meghna Powani
MARKETING &
COMMUNICATIONS
COORDINATOR

Domenica Kozy
SPECIAL EVENTS &
FUNDRAISING OFFICER

Susan Atkinson
DONOR & MEMBER
SERVICES COORDINATOR/
OFFICE MANAGER



Vancouver 2023

PARKINSON SUPERWALK®

Save the Date!

Parkinson SuperWalk will return
to British Columbia the weekend of
September 7 & 8, 2024

For more information and to register, visit:

parkinson.bc.ca/superwalk



Phone: 604-662-3240
Toll Free: 1-800-668-3330
Fax: 604-687-1327

 @ParkinsonsBC
 @ParkinsonSocietyBritishColumbia
 @ParkinsonSocietyBC

Charitable Registration Number:
11880 1240 RR0001

Suite 600–890 West Pender St,
Vancouver, BC V6C 1J9

www.parkinson.bc.ca
info@parkinson.bc.ca

Newsworthy

Upcoming Education & Exercise Events

Mondays (ongoing) from 10:30 – 11:30am

Coffee Connect

 Online

Join us every Monday to beat isolation and enjoy casual chats, new friendships, and lively discussions, intended to provide a refreshing break from Parkinson's-focused conversations.

Thursdays, June 27 – August 1, 1:00 – 2:00pm

SongShine

 Online

Instructor Joani Bye will help participants harnesses the power of the brain, breath, and emotion to reclaim and strengthen voices affected by Parkinson's or other neurological challenges.

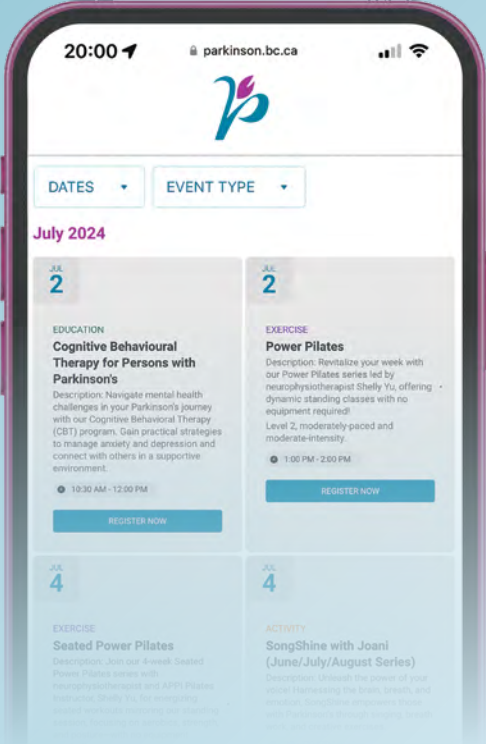
Thursday, June 20 from 10:00am – 12:00pm

Debriefing the Caregiver Role

 Online

When a loved one passes away, it is one of life's most difficult experiences. You may find yourself struggling with many intense and frightening emotions. PSBC offers this workshop, led by social worker at the Pacific Parkinson's Research Centre, Elaine Book, to those who have recently lost a loved one with Parkinson's disease within the last two years.

 **Events Hosted in Person**  **Online Events**



For registration and a full list of upcoming events, visit us online at

www.parkinson.bc.ca/events

Thank You to Our Fundraisers & Donors



A special thank you to Donate a Car for raising \$275.

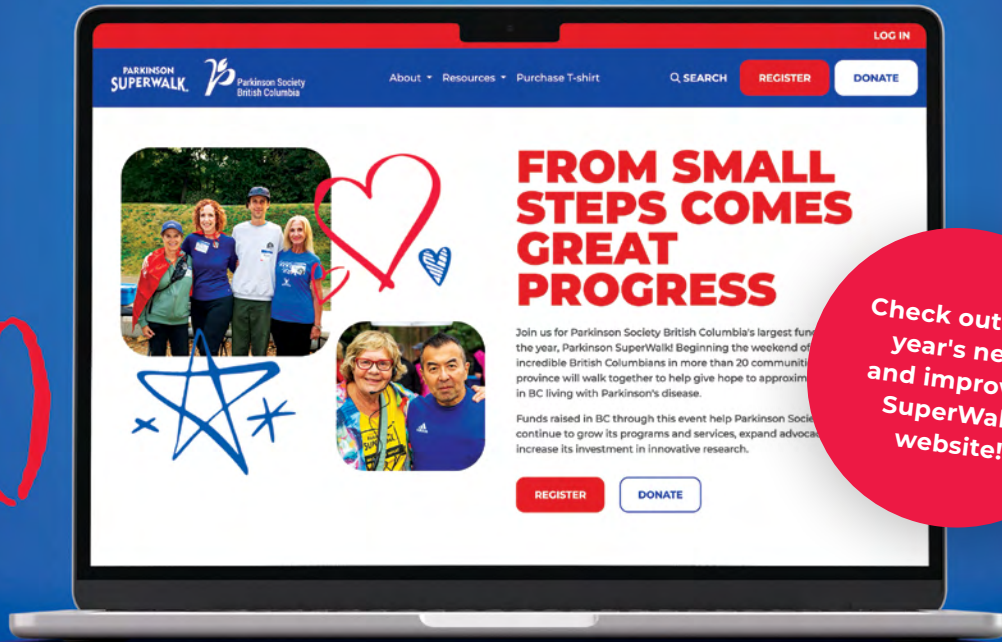
We would like to thank Me-n-Ed's Pizza Parlours for their fundraising efforts during the Sweetheart Pizza Sales. Through their dedication and hard work, a remarkable amount of \$814 was raised. We look forward to another successful year in 2025!

We express our heartfelt appreciation to all who attended and supported the Doug Le Page Exhibit in Nelson! We are very grateful for the remarkable efforts of Nicholas Lampard and Doug Le Page in organizing this incredible event. Their dedication resulted in a fundraising total of over \$2,336.

PARKINSON SUPERWALK®

Register Now for SuperWalk 2024!

Lace up your runners, gather your teams, and join us for Parkinson Society British Columbia's largest fundraising event of the year, Parkinson SuperWalk!



Beginning the weekend of **September 7 & 8**, incredible British Columbians in more than 20 communities throughout the province will walk together to help give hope to approximately 17,500 people in BC living with Parkinson's disease.

Register today at:

parkinson.bc.ca/superwalk



600–890 West Pender Street,
Vancouver, BC V6C 1J9



RETURN POSTAGE GUARANTEED
PORT DE RETOUR GARANTI