

A photograph of a man and a woman walking hand-in-hand on a pebbly beach. The woman is on the left, wearing a white quilted vest over a black long-sleeved shirt and glasses. The man is on the right, wearing a black jacket and dark pants. In the background, there are houses, trees, and a body of water under a cloudy sky. The title 'VIEWPOINTS' is overlaid in large blue letters, with a purple leaf-like graphic behind the 'P' and 'O'.

Fall 2024

VIEWPOINTS

Quarterly Newsletter
by Parkinson Society
British Columbia

3

Ask an Expert: Naomi Casiro
discusses falls prevention and
training for people with PD

6

Living Well: Impact of ultra-
processed foods on health and
neurodegenerative disorders

10

Support & Education:
Financial tools and tax
breaks for people with PD

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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, Solo PD, 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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Ask an Expert

Naomi Casiro discusses falls prevention and training for people with Parkinson's



Naomi Casiro is a physiotherapist and the owner of NeuroFit BC, a Parkinson's-specific clinic with locations in both Victoria and Vancouver. She was born and raised in Winnipeg, MB and moved

to BC to pursue her undergraduate degree in kinesiology, followed by her master's in physiotherapy. Naomi spent her undergraduate years as a student athlete on the University of Victoria swim team and as a lifestyle bootcamp instructor/swim coach. It was from these experiences that her passion for using physical activity to improve the lives of others grew.

After graduating, Naomi quickly became focused on neuro rehabilitation, working in both the public and private sectors before opening NeuroFit BC, a company she founded to allow her to better serve the Parkinson's population and as a platform on which to educate healthcare professionals. Naomi teaches her course *"Changing Parkinson's: The Fundamentals of Functional Movement"* across Canada and is an adjunct professor at the University of British Columbia in the physiotherapy program.

When not in the clinic, Naomi can be found playing with her three young children, in the gym or pool, or baking treats in the kitchen.

What inspired you to focus on falls prevention and training for people with Parkinson's disease (PD)?

As physiotherapists, we are often taught to help people get up from a fall, but rarely taught how to teach people to fall properly. After many years of treating older adults and neurological populations, I began to realize that there was a gap in both education and treatment that needed to be addressed. I was able to work with some incredible martial arts experts who helped me combine my physiotherapy and kinesiology training with my martial arts training to create a program which would address this missing puzzle piece.

After realizing the important impact and improved outcomes this treatment led to, I became passionate about spreading the word to health professionals across the country.

What are some key facts individuals with PD and their loved ones should know about falls?

- Falls happen and are one of the leading causes of mortality in older adults. No matter how much we try to prevent them, many people fall, and many fall more than once.
- Falls are very common in older adults and even more common in those living with Parkinson's disease.
- We know two important things from the research:
 1. How you fall matters when it comes to fractures and injuries.
 2. Older adults can be safely taught how to fall properly.
- If you or someone you know has fallen or is at increased risk of falls, you likely need a two-fold approach to treatment. You need falls prevention, and you need to learn how to fall safely.
- Falls with PD can come from a number of different issues, including blood pressure changes, freezing of gait, balance issues, dystonia, and more. Understanding the root cause of your falls is important and helps to guide treatment.

How do you evaluate falls risk for your clients?

In our clinics, clients begin with a one-hour 1:1 assessment with a physiotherapist. This allows us to collect important information, which we use to create a falls portfolio and individualized plan. We include details such as direction and number of falls, environment, and cause, as well as physical examinations of strength, balance, rigidity, gait, blood pressure, etc. to create a clear picture of what each client's risks are, and what treatments we can use to mitigate them.

What are the key techniques you teach to help individuals control their movement and momentum during a fall?

When it comes to falls training, it's important for everyone to understand that it doesn't just consist of getting someone to go from standing to falling on the ground. We work with clients to

ensure they build up the components necessary to learn to fall properly. We work on falling in multiple directions from various heights and angles on safe shock-absorbent mats, and provide assistance and guidance on learning to protect the head and spine, while continuing momentum instead of arresting it.

We want our clients to avoid fractures if they do fall, and help them be more confident in their ability to carry their momentum all the way down to the ground. We get clients to learn to focus on relaxing and 'rag dolling' instead of stiffening up and reaching out. Most importantly, we practice and repeat so that if it happens in the real world, they have the experience behind them to create a different, better outcome.

Are there any specific conditions/situations where falls training might not be advisable or safe?

Falls training should only be done in an environment with a trained professional on safe, protective flooring. Safe falls training, in my opinion, requires an individual assessment to rule out any contraindications and ensure the client is informed. There are individuals for whom this may not be appropriate; for example, those with a current unhealed fracture or untreated heart issues. We also need to remember, however, that often those most at risk of fractures are left out of this training for fear of injury, when in reality, they are the groups who need it the most.

Can you share any success stories or notable improvements you've seen in clients who have undergone falls training programs?

The reason I am so passionate about this topic is because I have seen client after client who has been trained to fall properly and has had a subsequent fall without injury. Often these are scenarios where there had been injuries in the past from a similar fall, or where there would likely have been one had they fallen differently.

I believe, and have been told, that this training instills people with the confidence to do more of what is important to them in life, be it hiking, walking, playing with grandkids on the floor, or anything else that involves them living their lives to the fullest.

One notable memory is a client who had significant shuffling and freezing issues. He was participating

in our outdoor track class and had been taught falls training in the clinic. While pushing himself in the intervals, he began to shuffle (a common issue that he had been struggling with and was nervous about). He fell forwards, landed, and rolled sideways. He then got up and participated in the rest of the class without issue. Not only was he able to confidently participate and challenge himself because of his training (both important aspects of treating PD through exercise), but he was able to fall safely and return to activity without missing a beat.

Are there any at-home exercises people with PD can do to help their balance and reduce their risk of falling?

There are lots! Exercises will vary depending on an individual's level of function, but in the clinic, we often start by working with each client to practice getting up and down off the floor. If that's not something that is safe and achievable, we work on the components you need to get there, such as deep knee bending (deep squats), ankle mobility, core strength, and upper and lower body motor patterning and strength.

The first step to improving your balance and deciding which exercises you need to do is figuring out why and where your balance is off. Start by asking yourself some questions like, "which direction do I most often tip? When do I feel most unstable? Can I predict the environments where I tend to be off balance or fall?" The answers will help guide you and your healthcare team to the most effective exercises you can do to treat your challenges.

Anything else you would like to add?

Though the goal may be to not fall at all, the reality is that for many, falls do happen. It is integral to learn to fall properly, because what comes after a fall depends almost entirely on how you land. I would like people to understand that there **are** things you can do if you are at risk of falls or already falling. Please see a healthcare professional who can help.

Naomi was recently a guest speaker on the *I Love Neuro* podcast, discussing falls prevention and training in depth. To listen to this episode, please visit <https://bit.ly/FallsPodcastPD>

Research

Stimulation-task-based fMRI, a practical clinical modality for personalizing therapy in the treatment of Parkinson's disease with Deep Brain Stimulation (DBS)

Dr. Brendan Santyr from the University of Toronto is aiming to enhance the efficacy of Deep Brain Stimulation (DBS) therapy for individuals with Parkinson's disease (PD). DBS is a surgical intervention, where permanent electrodes are implanted in the brain to deliver electrical impulses, alleviating symptoms for patients whose medication is insufficient. Despite its benefits, determining the optimal stimulation settings for each patient involves a lengthy and often uncomfortable process of trial and error.

Dr. Santyr's team was the first to use magnetic resonance imaging (MRI), a non-invasive imaging technique, in people with Parkinson's disease with DBS, and have since become world-leading experts. Their previous research demonstrated that MRI could identify when a patient is receiving their ideal DBS settings. The current project focuses on assessing the utility of a special type of MRI called functional magnetic resonance imaging (fMRI) in predicting these optimal settings shortly after surgery, potentially bypassing the prolonged clinical adjustment period.

This innovative approach aims to reduce the number of hospital visits for patients, saving both time and healthcare costs. By enabling quicker identification of the best DBS settings, patients can experience the maximum benefits of their surgery sooner.

Looking ahead, Dr. Santyr envisions a future where fMRI significantly shortens the time required for patients to benefit from DBS therapy. He aims to promote individualized symptom management and reduce the financial burden on both patients and healthcare systems. Successful outcomes from this project could lead to the broader adoption of new DBS technologies and expand access to DBS in both expert and non-expert centers globally.

Source: Parkinson Canada Research Program.



RESEARCHER

Dr. Brendan Santyr,
University of Toronto,
Basic Research
Fellowship

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Research Program

Living Well

Understanding the impact of ultra-processed foods on health and neurodegenerative disorders



Ultra-processed foods (UPF) have become very commonplace in the modern diet, making up more than 50% of the total calories consumed in countries like the USA, Canada, and United Kingdom (*Claudino et al., 2024*). Despite their convenience and appeal, the consumption of UPF has been linked to a myriad of health issues, including obesity, cardiovascular diseases, and neurodegenerative conditions like Parkinson's disease (PD). Understanding the implications of consuming ultra-processed foods is crucial for making informed dietary choices that promote long-term health and wellbeing.

What are ultra-processed foods?

Ultra-processed foods are, as their name suggests, food items that have been highly modified, with the intent of extending their shelf life, reducing production costs, and/or enhancing palatability (the food's pleasantness or appeal), often in an effort to promote over-consumption. However, it is important to differentiate between *processed* and *ultra-processed* foods. Almost all foods are processed to some extent; for example, whole wheat berries are processed into whole wheat flour, but UPF goes beyond this basic processing

by adding chemicals (e.g., emulsifiers, anti-caking agents, or preservatives), and modifying ingredients (e.g., deodorization of oil). A good test for whether something is a UPF is to read the ingredients label and ask yourself if the item contains anything you would not commonly find in a household kitchen (*Monteiro et al., 2019*).

The most obvious examples that commonly come to mind when people think about UPF are sugary soda drinks, packaged snacks like cookies, breakfast cereals, and fast food. However, a food can be considered UPF even if it includes buzzwords like 'organic' and 'natural,' which is why it is always best to carefully read any labels.

In 2009, Brazilian epidemiologist Carlos Monteiro came up with a classification system for ultra-processed foods called NOVA (Portuguese: *nova classificação*, meaning 'new classification'). While the definition of UPF can be controversial and lacks clear boundaries, the NOVA classification system is the most widely used standard, despite some criticism for its vagueness. It has been used around the world to guide policies and research.

NOVA breaks food down into four different categories:

- **NOVA Group 1:** includes minimally processed and unprocessed foods (e.g. milk, eggs, fruits and vegetables, plain yogurt)
- **NOVA Group 2:** includes processed culinary ingredients (e.g. salt, sugar, oils, honey)
- **NOVA Group 3:** includes processed foods where Group 2 products have been added to those in Group 1; can also include foods that have been preserved by means of canning and bottling (e.g. cheese, canned fruits and vegetables, salted nuts)
- **NOVA Group 4:** industrially produced ultra-processed foods, where Group 1 foods make up very little of the final product (e.g. ice cream, breakfast cereals, instant soups)

The harms of ultra-processed foods

Because ultra-processed foods tend to have higher levels of fat, including saturated fat, sugar, sodium, and overall energy density (calories), while also having lower levels of vitamins, minerals, and fibre (unless fortified), their consumption is related to several negative health consequences. These can include obesity, cardiovascular disease, gastrointestinal issues, and various cancers, including those of the breast (*Monteiro et al., 2019*). In fact, it seems that UPF consumption may be associated with higher all-cause mortality (*Lane et al., 2022*).

Recently, there has been growing interest in how ultra-processed foods can affect the brain, including their potential impact on neurodegenerative disorders like Parkinson's disease. New studies have emerged that suggest UPF consumption may be linked to lower cognitive performance and higher rates of mental health conditions, such as depression and anxiety (*Claudino et al., 2024*).

What is even more alarming is that a 2022 prospective cohort study (a type of observational research study that follows a group of people over time) found that UPF consumption is linked to a higher risk of developing Alzheimer's disease. This study found that swapping out 10% of ultra-processed food (in weight) for minimally or unprocessed food is associated with a 19% lower risk of dementia (*Li et al., 2022*).

Furthermore, an analysis from 28 different studies suggests that the more UPF someone eats, the higher their risk of developing Parkinson's (*Pourmotabbed et al., 2024*). This may be because of oxidative stress, an imbalance between free radicals (molecules that damage cells) and antioxidants (molecules that protect cells from free radicals) (*Bernstein, 2024*). Oxidative stress is a key factor in the development of PD, and can be exacerbated by consuming processed meat, which contains high levels of oxidized fats, cholesterol, and free fatty acids that form harmful compounds during cooking (*Miranda-Díaz et al., 2020*). Additionally, UPF is usually very low in fiber, which is key for the gut microbiome (the diverse bacteria that live within our gut) and its production of short chain fatty acids, which, in turn, can reduce inflammation.

The harms associated with UPF also seem to stem partly from systemic inflammation and the neurodegenerative processes in the brain it promotes, driven by the high levels of sugar, fat, sodium, and chemical additives in these foods (*Claudino et al., 2024*). Ultra-processed foods also tend to cause high glycemic responses (rapid increases in blood sugar after eating foods that are quickly absorbed) and can disrupt the microbiome in ways that promote inflammatory disease. Compounding this problem, UPF can displace healthier unprocessed foods from the diet, which can have big impacts on someone's overall nutrition (*Monteiro et al., 2019*).

**It is essential to acknowledge that despite the studies' findings, the relationships between UPF and chronic diseases and mortality are correlational, not casual, which means we do not know if UPF is the cause of the events. Multiple factors could impact our food choices and the development of chronic diseases.*

An important note about UPF

There is no denying a few key facts about ultra-processed foods: they are extremely convenient, tasty, and often much cheaper than their healthier counterparts. The Food Foundation, a nonprofit organization in the United Kingdom, reported that healthier foods are on average twice as expensive per calorie than unhealthy, processed ones (*The*

Food Foundation, 2023). The high cost of living in Canada and other parts of the world makes UPF appealing from a financial standpoint. Many households struggle to make ends meet, and the lower cost of these foods can provide a viable solution for families on tight budgets.

Additionally, people with physical limitations, such as those with Parkinson's disease, may find it challenging to invest a great deal of time and energy into cooking meals from scratch. Tasks that require fine motor skills, like chopping vegetables or stirring pots, can be particularly difficult. Furthermore, the psychological impact of living with a chronic illness cannot be overlooked. Managing a condition like PD can be physically and emotionally exhausting, and the ease of ready-made meals can reduce some of the stress associated with meal planning and preparation.

Alternatives

While the thought of cutting out all ultra-processed foods can feel overwhelming and may not be completely necessary to develop healthy dietary habits (*Hess et al., 2023*), there are many gradual steps individuals with Parkinson's can take to improve their health and diet, such as:

1. **Recognizing that UPF falls along a continuum.** As noted above, foods can be classified in one of four NOVA groups, with the fourth group typically being less nutritious and more calorie dense. For example, while canned beans (NOVA group 3) are technically a processed food, especially those with added sodium, the benefits of the nutrition and fibre you would get from eating the beans almost certainly outweigh the risks (*Bowman, 2024*). "Processed" does not equal "bad." Apart from choosing foods that are closer to their natural state, you can make more conscious decisions by being critical of how the food is processed and the impact of the processing (e.g. what is added and what is lost) and choose foods that meet your health goals.
2. **Cooking at home whenever possible. Preparing your own food gives you control over its ingredients and allows you to cut out artificial additives and excessive amounts of salt, sugar, and fat.** Making meals at home also allows you to be more mindful of what your body needs and portion sizes, which can be a problem with pre-packaged, ultra-processed foods that are designed to be hyper-palatable and easy to overconsume.
3. **Make less-processed foods/snacks more available.** It can be tempting to reach for prepackaged snacks when you find yourself busy or overwhelmed, or when your PD symptoms are particularly bothersome. However, choosing alternatives like fresh or frozen fruit and homemade granola bars instead is an easy way to reduce your UPF intake.
4. **Meal prepping or batch cooking in times when energy levels are higher, or your symptoms are better controlled.** By taking advantage of medication "on" times, you can ensure you have nutritious foods available that can quickly be reheated. Try freezing meals in individual portions, so they can be thawed as needed.
5. **Taking a cooking class or checking out the cookbooks in your local library.** Cooking can be great fun, and learning it is a skill like any other. While you can sign up for cooking classes, you can also learn from a variety of free YouTube videos that will teach you everything from basic knife skills to making soufflés! Try cooking with loved ones as a fun activity you can do together.
6. **Enlisting the help of adapted kitchen tools.** These are specialized products that help those with mobility or motor challenges, such as adapted utensils, non-slip mats, and plate guards (*Ability Superstore, n.d*). An Occupational Therapist (OT) may be able to help you select which tools are right for you.
7. **Shopping the perimeter of the grocery store.** Grocery stores typically place whole foods like fruits, vegetables, and dairy around the edges of the store.

It is important to note that discussing ultra-processed foods is not a moral judgment. The choice to consume them is often driven by a complex interplay of factors, many of which are out of our control. As a result, diet and nutrition are nuanced issues that require understanding and empathy. Ultimately, individuals should strive to make the best choices possible within their circumstances.

This article was reviewed for accuracy by Yolanda Wang, Registered Dietitian & Dr. Silke Appel-Cresswell, Co-founder/Director from the BC Brain Wellness Program | bcbrainwellness.ca

ADDITIONAL RESOURCES

- **Food & Nutrition Resources** - BC Brain Wellness Program
bcbrainwellness.ca/resources/nutrition-resources
- **The Role of Diet in Parkinson's Disease** (Article)
<https://bit.ly/RoleofDietPD24>
- **23-Year Study Links Ultra-Processed Foods to Increased Risk of Death** (Article) - American Society of Nutrition | <https://bit.ly/ASN-UPF2024>

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Support & Education

Financial tools and tax benefits for people with Parkinson's and their carepartners



Utilizing financial tools and taking advantage of several key government benefits is crucial for individuals with Parkinson's disease (PD) and their loved ones, as it can significantly alleviate the financial burden that is sometimes associated with the condition. Managing the costs of ongoing medical care, home modifications, and potential loss of income due to the disease can be overwhelming. Fortunately, by making thoughtful and informed decisions, families can better prepare for these challenges, ensuring a more secure financial future.

Parkinson Society BC (PSBC) is dedicated to providing the necessary resources and guidance to help you navigate financial complexities while empowering you and your loved ones.

Note: *The information provided here is intended for general guidance and should not replace consultation with a professional financial advisor.*

Financial tools and tax benefits

Whether you're looking to reduce your tax burden or build a more secure financial future, the following information can help you make informed decisions and ensure you receive the benefits you deserve.

Disability Tax Credit

The Disability Tax Credit (DTC) is a non-refundable tax credit designed to assist individuals with disabilities, as well as their family members, in reducing their income tax. To be eligible for the DTC, a medical practitioner must certify that you have restrictions in specified categories of basic activities of daily living, or that you require life-sustaining therapy that supports a vital function. Categories include walking, mental functions, dressing, feeding, bowel or bladder functions, hearing, speaking, vision, and life-sustaining therapy. You can qualify if you have a severe restriction in one category, or are restricted a little less, but in two or more categories. Restrictions must also have lasted or are expected to last at least one year.

There are many ways to apply. You can fill in Part A using a paper form (Form T2201). To download a printable copy, visit <https://bit.ly/DTCFormT2201>.

When applying with the paper form, medical practitioners can complete Part B of the same form, then return it to the applicant, who must send in a completed application to the CRA.

A medical practitioner for the purposes of the DTC includes the following: medical doctor, nurse practitioner, audiologist, occupational therapist, optometrist, physiotherapist, psychologist, or speech-language pathologist.

You can also apply online or over the phone with the CRA. When applying in either of these two ways, applicants will receive a reference number that their practitioners can use to send in the application on their patient's behalf through the online digital application for medical professionals.

It is important to apply for the DTC even if you do not make taxable income, because it is a gateway to other important benefits – importantly, the Canada Workers Benefit, Home Accessibility Expenses, Registered Disability Savings Plan, Canada Disability Benefit, and more. It also can play a role in the Canada Caregiver Credit.

In 2023, the maximum disability amount was \$9,428 for people 18 years and older. Depending on how much tax you pay, you will receive a portion of the maximum as a reduction to the amount of taxes owing, or as a tax return.

Disability Supports Deduction

Individuals with physical or mental impairments who have incurred certain medical expenses may be eligible to claim the Disability Supports Deduction (DSD) under specific conditions.

This deduction can be claimed only by the person with the disability and covers expenses paid in the year to enable them to work, attend school, or conduct research for which they received a grant. Eligible expenses include attendant care, electronic speech synthesizers, and job coaching services, among others, often requiring a prescription or certification from a medical practitioner.

Certain amounts, such as those claimed as medical expenses or reimbursed by insurance, cannot be claimed. To calculate the deduction, individuals

must use Form T929 and report the amount on line 21500 of their tax return, ensuring the expenses are claimed in the year they were paid.

Home Accessibility Tax Credit

The Home Accessibility Tax Credit (HATC) is intended for eligible home renovation or modification expenses. If you made any renovations to your home to make it more accessible, you can claim up to \$20,000 in renovations on your taxes. The HATC is calculated by applying the lowest personal income tax rate, which was 15% in 2024, to a maximum of \$20,000, which would provide a tax credit of up to \$3,000. An individual qualifies if they are either eligible for the Disability Tax Credit (DTC) at any time in the year, or 65 years of age or older at the end of the year.

Examples of what may be included are wheelchair ramps and walk-in bathtubs/showers. A list of eligible expenses can be found at <https://bit.ly/HATCexpenses>. The HATC is non-refundable.

Canada Caregiver Credit

The Canada Caregiver Credit (CCC) is available to anyone who supports a spouse, common-law partner, or dependent with a physical or mental impairment. The amount you can claim varies based on your relationship to the individual for whom you are claiming the CCC, your specific circumstances, their net income, and whether other credits are also being claimed for that person.

For a spouse or common-law partner, you may be able to claim \$2,499 on line 30300. Additionally, you could claim up to \$7,999 on line 30425. You do not need any supporting medical certification if the CRA already has an approved Form T2201, Disability Tax Credit Certificate for the specified period. The CCC is non-refundable.

Registered Disability Savings Plan

A Registered Disability Savings Plan (RDSP) is designed to help individuals approved for the Disability Tax Credit (DTC) save for long-term financial security. Contributions to this plan are not tax-deductible. Individuals can only open the plan up to the calendar year in which they turn 59.



They can only access grants and bonds up to the calendar year in which they turn 49. Grants can be triggered contributions, while bonds do not require contributions, which benefits those with low to no income. Always make sure to file your taxes to ensure you are getting the full grant and bond amounts. Any money in the plan is considered an exempt asset and, therefore, will not affect receiving provincial disability benefits.

Withdrawals from the RDSP do not count as income for the beneficiary. However, amounts from the Canada Disability Savings Grant, the Canada Disability Savings Bond, investment earnings within the plan, and rollover proceeds are taxable when paid out.

Canada Pension Plan – Disability

The Canada Pension Plan (CPP) disability benefit is a monthly payment available to individuals who are unable to work due to a disability. To qualify, individuals must be under the age of 65, have a long-term physical or mental limitation that prevents them from gainful (sufficient to support oneself) employment, and have contributed enough to the CPP.

Those who currently receive the monthly CPP retirement pension, have received it for more than 15 months, and are between the ages of 60 to 65 can qualify for the CPP post-retirement disability benefit instead. Those who have had it for less than 15 months can apply for the Canada Pension Plan (CPP) disability benefit.

To fulfill the minimum contribution criteria, individuals must have made eligible contributions to the CPP in four out of the last six years, or have at least 25 years of contributions, including three of the last six years, or satisfy the late applicant provision requirements.

If you have any questions about your financial options, please make sure to speak with a financial advisor who specializes in disabilities.

This article was reviewed for accuracy by Cynthia Minh & Sharareh Saremi from Disability Alliance BC | disabilityalliancebc.org

SOURCES

- The Government of Canada. canada.ca

PARKINSON SUPERWALK®

Join us for Parkinson Society British Columbia's (PSBC) largest fundraising event of the year, Parkinson SuperWalk!

Beginning the weekend of September 7 and 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. Funds raised in BC through this event help PSBC continue to grow programs and services, expand advocacy efforts, and increase investment in innovative research.

100 MILE HOUSE

Centennial Park
Saturday, September 7

ABBOTSFORD

Yale Secondary School Track
Sunday, September 8

BURNABY VIRTUAL WALK

September 7 or 8

CHILLIWACK

The Landing Sports Centre on
Spadina
Saturday, September 7

COMOX VALLEY

The Courtenay River Walkway
Saturday, September 7

KAMLOOPS

Riverside Park
Saturday, September 7

KELOWNA

Waterfront Park
Saturday, September 7

LANGLEY VIRTUAL WALK

September 7 or 8

NANAIMO VIRTUAL WALK

September 7 or 8

NEW WESTMINSTER

Moody Park
Saturday, September 7

OLIVER VIRTUAL WALK

September 7 or 8

PARKSVILLE/ QUALICUM BEACH

Rathrevor Beach Provincial Park
Saturday, September 7

PITT MEADOWS/ MAPLE RIDGE

Hammond Community Centre
Saturday, September 7

PRINCE GEORGE

Lheidli T'enneh Memorial Park
Saturday, September 7

RICHMOND VIRTUAL WALK

September 7 or 8

SALMO

Salmo Valley Youth &
Community Centre
Saturday, September 7

VANCOUVER

Stanley Park/
Ceperley Park Playground
Sunday, September 8

VERNON

Civic Memorial Park
Saturday, September 7

VICTORIA VIRTUAL WALK

September 7 or 8

WHITE ROCK/ SURREY

Crescent Park
Sunday, September 8

TO REGISTER OR DONATE, VISIT

WWW.PARKINSON.BC.CA/SUPERWALK

Newsworthy

Upcoming Education & Exercise Events

Global Symposium Series 3 Days from September 5 – 18

Thursday, September 5 at 9:00am

Insights into Genetics, Management, and Personal Impact Online

Dr. Thomas Gasser, a distinguished professor of neurology and director of the Department of Neurodegenerative Diseases at the Hertie-Institute for Clinical Brain Research in Germany, joins us to explore Parkinson's genetic underpinnings, recent discoveries, and effective management strategies.

Wednesday, September 11 at 1:00pm

Psychosis in Parkinson's Online

Numerous individuals with Parkinson's disease suffer from psychosis symptoms, such as hallucinations and delusions. In this session, Dr. Ross Dunne from the United Kingdom will provide an explanation of psychosis, its impact on individuals with PD, and guidelines on when and how treatment should be administered.

Wednesday, September 18 at 3:00pm

Sleep Disorders and PD Online

Dr. Okeanis Vaou, the Vice Chair of Faculty Development at the University of Texas Health in San Antonio, as well as a board-certified sleep specialist, joins us to discuss sleep disorders related to Parkinson's. Developments in the understanding and management methods of sleep and PD will also be explored.

**Thursdays, September 5 – 26
from 11:00am – 12:00pm**

September Challenger – Level 3 Online

Kick-start the fall season with this high-intensity and fast-paced exercise class suitable for those who can stand and move unassisted. Our very own neuro physiotherapist, Shelly Yu, will challenge your balance, coordination, and exercise stamina.

**Thursdays, September 5 – October 10
and October 24 – November 28
(Both sessions from 1:00 – 2:00pm)**

SongShine Online

Unleash the power of your voice! Harnessing the brain, breath, and emotion, SongShine empowers those with Parkinson's through singing, breath work, and creative exercises.

Thursdays, September 5 – 26 from 5:30 – 6:30pm

Zumba® Gold – Level 1 Online

Add some music and movement to your day with this seated exercise class, which is inclusive of all mobility and balance abilities. Easy-to-follow Zumba® choreography will be introduced. No dance experience is needed and there are no wrong moves!

Mondays, September 9 – 30 from 12:00 – 1:00pm

Chair Yoga – Level 1 Online

Join yoga instructor Rheanna Corpuz for gentle chair yoga sessions designed to warm up your body and encourage movement in stiff joints and muscles.

Fridays, September 13 – October 25
from 1:45 – 2:45pm

Let's Get Loud Voice Class Online

Join us for this progressive voice group focusing on skills to maintain and improve vocal loudness. Each class will build upon skills learned in the previous one. Registrants must be pre-screened by the speech-language pathologist facilitator, Erin Tschopp, by filling out a self-assessment questionnaire.

Tuesdays, October 1 – 29 from 12:25 – 1:25pm

Rock Steady Boxing – Level 2 Online

Experience a total workout for both your mind and body, as this class incorporates cardio, strength, balance, hand-eye coordination, and speed!

Wednesdays, October 2 – November 6
from 12:25 – 1:25pm

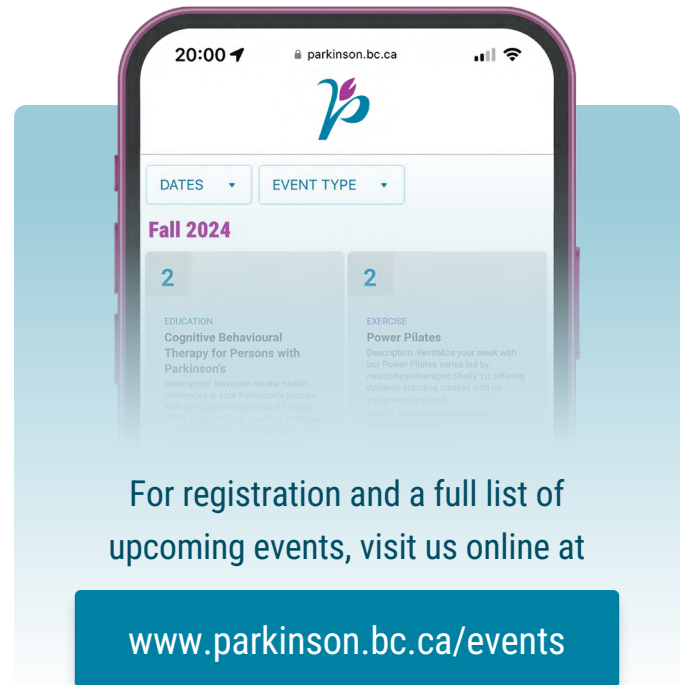
DOPABEATS Online

This drumming class will allow you to express your feelings with easy-to-follow beats and rhythms, and add drumming to your toolbox of therapies and self-management strategies!

Saturday, October 26 from 10:00am – 2:30pm

Communication and Swallow Workshop Victoria – Location TBD In-Person

This workshop, led by registered speech-language pathologist Jasmine Cload, addresses communication and swallowing difficulties in individuals with Parkinson's and other neurological conditions. It will utilize clinically proven methods from the Lee Silverman Voice Treatment® to enhance communication. Member pricing available.



Thank You to Our Fundraisers & Donors

We want to thank all of those who fundraised in lieu of flowers for the memorial of Helen Lim. With your generosity, the Lim family was able to raise a total of \$2,335.

Thank you to Gail Macadam for hosting a World Parkinson's Day event at the Aldor Acres Farm! We are grateful to all those who attended, raising an incredible \$7,864.

We would like to thank everyone who participated in our first Spring Online Auction since 2019, raising \$4,165! A special congratulations to all the winning bidders.

We express our heartfelt appreciation to all who attended and supported the Full Throttle event and are grateful for the remarkable efforts of Jim Smerdon. His dedication resulted in fundraising a total of \$7,070.

A massive thank you to Adam Toner and his team for hosting another successful Elk Valley Golf Tournament. Their remarkable efforts resulted in a fundraising total of \$17,697!

We're Moving

We're excited to announce that our office has relocated. Please update your records to reflect our new address:

1021 West Hastings Street, 9th floor,
Vancouver, BC V6E 0C3

Please direct all future mail to this address. Thank you for your continued support and cooperation as we settle into our new space!



1021 West Hastings Street, 9th floor,
Vancouver, BC V6E 0C3



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PORT DE RETOUR GARANTI