

VIEWPOINTS

Winter 2023

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, 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 Delta, South Okanagan, Surrey, Trail/Castlegar, Tri Cities Caregivers, Tri Cities/While Rock, Vancouver Carepartners, Vancouver Downtown, Vancouver West Side, Vernon, Young Onset Parkinson's Online

EDITORIAL STATEMENT

Articles contained in Viewpoints are for information only. Parkinson Society British Columbia does not guarantee nor endorse any product or claim made by an author. In matters of medical treatment or therapy, patients should consult their physicians.

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Research

The following are upcoming 2023 Trainee Award Recipients, co-funded through a partnership between Parkinson Society British Columbia and the Michael Smith Foundation for Health Research.

The impact of SARS-CoV-2 infection / COVID-19 and microglial contribution on the development and severity of Parkinson's disease

RESEARCHER

Ifeoluwa Awogbindin,
University of Victoria

FUNDING AMOUNT

\$96,750 over three years with matching from the Michael Smith Foundation for Health Research (total of \$193,500)

Parkinson's disease (PD) globally affects 1 in 100 adults above 60. Exposure to environmental agents including, viral infection, increases vulnerability to PD. Hyperactivity of brain immune cells named microglia (special cells in the brain that help the brain grow, keep the connections between brain cells healthy, and fix any damage or injury to cells) is also a strong determinant of PD onset and progression. Altered brain functions persist in patients during and after COVID-19. Evidence in the brains of patients who died of COVID-19 show dysfunctional microglia in brain areas affected by PD. These abnormal microglia were also observed in infected monkeys without breathing difficulty. In British Columbia, where above 89% of total SARS-CoV-2 cases do not require hospitalization, older adults totaling 41% of the population account for 31% of total cases. In mice, SARS-CoV-2 failed to multiply in microglia, but initiated robust harmful microglial functions, which were intensified by the exposure to PD-associated abnormal proteins. Thus, we propose that COVID-19 may cause PD onset or exacerbate its progression. We aim to study the impact of COVID-19 pathology on PD onset/progression and microglial implication in a mouse model expressing the human receptors of SARS-COV-2. This study will inform on COVID-19 long-term effects and may position microglia as a future therapeutic target.

Coordinating movement in a complex world: How the midbrain and oculomotor cerebellum encode visual motion originating from realistic scenes to guide locomotion

RESEARCHER

Anthony Lapsansky,
University of British Columbia

FUNDING AMOUNT

\$96,750 over three years with matching from the Michael Smith Foundation for Health Research (total of \$193,500)

As we move about the world, we experience optic flow – the movement of surfaces and objects resulting from self-motion. Studies of human behaviour have shown that optic flow is critical for controlling posture, walking, driving, and navigating complex environments. Deficits in optic flow processing are linked to diseases including vertigo, oscillopsia (an illusion of unstable vision), ataxias (loss of muscle control), Parkinson's disease, and Alzheimer's disease. Determining how and where the brain processes optic flow is therefore crucial to human health and behaviour, but major gaps in knowledge remain. Typically, optic flow processing is studied by exposing subjects to simple patterns. These methods allow for tight control of experimental designs, but simple patterns lack features provided by the real world – features we use every day. How and where the brain encodes realistic visual motion to control our movement is almost entirely unknown. This severely limits our ability to treat those with optic flow deficits. This proposal aims to understand how and where the brain processes visual motion originating from realistic scenes using pigeons as a model system.

Ask an Expert

Dr. Michael Jakowec discusses the powerful benefits of exercise for Parkinson's



Dr. Michael Jakowec, PhD, is Associate Professor in the Department of Neurology at the University of Southern California. He focuses on how molecules

and drugs affect the brain, especially in Parkinson's disease (PD). His lab uses different methods, like studying animal behavior, looking at structures in the brain, and working with cells, to understand how exercise and other treatments can change how the brain works in PD. Recently, his research has been looking at how energy in the brain and other cells besides nerve cells can help the brain heal itself. Alongside his research, he has been teaching undergraduate students about how drugs affect the brain for 20 years.

Why is exercise consistently regarded as one of the most effective non-medical interventions for individuals with Parkinson's disease?

Our brains evolved to control our body's movements, from basic tasks like picking up objects to more complex challenges like long-distance navigation. Practicing these skills makes them automatic, allowing our consciousness to focus on other activities, such as socializing. To maintain our motor skills, we must continuously engage them, and that is what physical activity does for us. Exercise strengthens learned behaviours and facilitates the acquisition of new skills. A feature of the brain is that we lose connections if we do not use them, which is why the common term "use it or lose it" applies to maintaining proper brain function.

While we are gathering research evidence that exercise is one of the most important factors impacting the progression of Parkinson's disease (PD), it is not the cure. There is evidence that the

loss of dopamine in PD occurs years before motor symptoms become most evident. Is this a more effective period to prescribe interventions such as exercise and possibly neuroprotective compounds? The lack of a reliable biomarker to detect changes in the brain long before motor symptoms emerge is a major challenge for researchers.

In terms of treating Parkinson's disease, exercise is now considered a component of the standard of care. Twenty years ago, when we began lab and clinical research to study the impact of exercise on the brain, exercise was not considered important. In fact, patients were told exercise could increase the risk of falls and injury and thus should be avoided. Now we know that everyone with PD should exercise, since it has tremendous impact on symptomatic progression and quality of life.

Can exercise prevent people from getting Parkinson's or delay its onset, and if so, how?

Over decades, epidemiological studies in large populations across a lifespan have suggested that being physically active has tremendous benefits on delaying or reducing the onset of Parkinson's disease and other brain disorders impacting cognition. One hypothesis about why exercise protects the brain and may alter disease progression is that physical activity over a lifespan can build resilience and generate reserve to resist brain disease and promote repair. Diet, stress, and a healthy gut microbiota may also contribute to strengthening brain health. Building resilience may delay the onset of Parkinson's disease in some individuals, but there are many individuals who have high degrees of physical activity but still get the disease. We do not know why. The health of our brains is impacted by a combination of lifestyle, genetics, and environmental factors. Together these parameters highlight a complex series of interactions. However, research continues to support that lifestyle, especially exercise and diet, is critical to brain health and healthy aging.

It is never too late to embrace the benefits of exercise and healthy diet for individuals with Parkinson's disease. Exercise shows benefits at

any age and at any stage of the disorder. Diet and exercise can also have tremendous benefits for PD symptoms.

Research shows that exercise does not make the brain produce more dopamine but does allow it to more effectively use what dopamine it already has. Can you please elaborate and explain why this is?

It was once assumed that exercise simply increases the amount of dopamine in the brain and that this leads to its benefits. This is not necessarily the case. In fact, our studies and the research of several other groups around the world have shown that exercise alters how the brain uses the remaining dopamine. Changes in the release of dopamine from existing neuronal fibers in the basal ganglia, along with changes in its uptake, result in an increase in the time dopamine spends in the synapse acting as a signal between neurons. In addition, we also observe increases in the expression of dopamine D2 receptors in the brain; these play a critical role in cognition, especially cognitive flexibility, as well as many other aspects of learning. Exercise appears to strengthen some of the molecular features necessary for thinking and cognition, all of which are central to our ability to move.

Can you speak to the difference between neurogenesis and neuroplasticity, and how they differ in the context of exercise and PD?

Neurogenesis refers to the birth of new neurons in the brain, whereas neuroplasticity refers to changes in the brain, mainly concerning the number and strength of connections between brain cells.

We know that exercise increases neurogenesis, as seen in the birth of new neurons. However, this does not appear to occur throughout the brain, but is limited to specific regions, such as the hippocampus, an area of the brain responsible for memory and learning. There is little evidence that neurogenesis is enhanced by exercise in other regions, such as the basal ganglia and frontal cortex, which are regions critical for motor and cognitive behaviours, and are also affected by Parkinson's.

Interestingly, our studies reveal that exercise doesn't boost overall brain blood flow, but is increased in specific regions involved in the exercise. For example, forms of exercise that engage a high degree of cognition and motor behaviours, such as pickleball, increase blood flow in these regions of the brain, especially the basal ganglia and frontal cortex. The result is an increase in the promotion of connections within these regions. In other words, exercise can be targeted to promote repair of specific brain regions.

Can you explain what synaptogenesis is, and how exercise promotes it? How does synaptogenesis help people with PD?

Synaptogenesis is a general term that describes changes in the connection between neurons, specifically at synapses, the primary physical connection that exists between neurons. The communication between neurons is made possible by neurotransmitters, such as dopamine. Exercise impacts the number and strength of these connections, as observed in both animal and human models of Parkinson's disease, where we can see the loss of synaptic connections, especially in the basal ganglia (where movement is controlled) and in the frontal cortex (where cognition and thinking reside). Within these regions of the brain are morphological or structural changes with synaptic loss, and this loss of connections is reflected in the reduced number of dendritic spines, the site of communication between neurons. Importantly, we and others have shown that exercise can reverse this loss and increase the number of synapses, as well as the strength, between neurons.

Recent studies, including those from our lab, have begun to show that synaptogenesis involves more than just changes between neurons. In fact, astrocytes and microglia, non-neuronal glial cells that support and protect neurons, exhibit biochemical changes due to exercise, reversing deficits seen in disease. This is a new frontier in finding novel treatments for Parkinson's disease.

How exercise increases brain-derived neurotrophic factor (BDNF), a chemical in the brain that is associated with cognitive improvement and neurogenesis, has been an exciting area of research for many years. How do increased levels of BDNF impact individuals with PD?

Decades ago, researchers showed that exercise increases the expression of neurotrophic factors, which are chemicals that feed and nurture neurons in the brain, including BDNF. While this is beneficial, the full molecular mechanism remains unclear. If proven helpful, we may need to discover and test new drugs that increase the expression of BDNF in humans, especially in those with Parkinson's disease.

Studies in our lab have shown an interesting relationship between exercise and BDNF. Neurotrophic factors like BDNF were thought to repair the brain. However, the brain requires guidance, as it may not recognize its own impairment and can persist in responding to its current state, potentially leading to behavioural deficits. The benefits of BDNF and repair of the brain (through synaptogenesis, for example) are seen when the brain is undertaking new behaviours like exercise. In other words, the brain will establish new connections for motor behaviours when it is driven to do so, and exercise is one means to drive these beneficial changes.

Are there any potential risks to consider when prescribing exercise for people with Parkinson's disease?

Any exercise, in any amount, of any type is beneficial, no matter how much or how intense. We do know that there are important parameters of exercise we try to achieve to get the most benefits. For example, studies in our group have shown that achieving 150 minutes per week of moderate to vigorous exercise leads to a high degree of benefit. A moderate level of exercise is achieved when you start to break a sweat and your ability to carry out a conversation with a partner is reduced, but not eliminated. This target of 150 minutes per week can be accomplished in very short bouts of exercise of less than 10 minutes. Another important parameter is intensity. Make your exercise as intense as possible.

What is the best form of exercise for people with PD who want to maintain or improve their cognitive function?

Studies from our group have highlighted some critical factors impacting the relationship between exercise and cognition. In simple terms, make your exercise a learning modality and make it intense. Try to learn a new skill. Pickleball and trail hiking are two popular means to achieve these goals. Additionally, one of the most important aspects of exercise and physical activity is the tremendous benefits of socializing, such as doing exercise with a partner or in a group. In fact, studies have shown that the social aspects of group exercise are as important as the exercise itself for brain health.

Anything else you would like to add?

We need to find a cure. While we are learning a great deal from studying the mechanisms by which exercise alters the brain in Parkinson's disease, we have not yet stopped the disease from progressing, though exercise appears to alter disease progression. We need to know the cause of Parkinson's disease, when it starts, and to develop biomarkers to detect and monitor disease progression.

We need to continue to better understand the role of lifestyle, especially the impact of diet, stress, immune, and gut on brain disorders like Parkinson's disease. Diet is critical to enhance brain health, maintain the energetic state of the brain, and repair circuits compromised in motor and cognitive behaviours.

In the meantime, make exercise a central part of your daily routine.

Did You Know?

Parkinson Society British Columbia offers free counselling and healthcare navigation services!

Counselling can provide a safe environment to address emotional challenges associated with a Parkinson's diagnosis.

Healthcare navigation can assist in simplifying the complexities of the healthcare system to reduce stress and support individual needs.

Learn more at parkinson.bc.ca/hcn-counselling

Stories

Gary and Cathy Harasym: Generosity in the Face of Adversity



Pictured: Gary and Cathy.

Gary and Cathy Harasym's commitment to helping others is reflected in their long-standing support of Parkinson Society British Columbia (PSBC). Their deep dedication to assisting those facing the challenges of Parkinson's disease (PD) is a testament to their value of making a meaningful difference in their community.

Gary reported that his parents' ability to rise above adversity from their humble beginnings influenced how he has been able to deal with his own adversity with his Parkinson's disease.

Gary, the eldest of four children, was born in Winnipeg and raised in Ottawa. His parents, however, were born into impoverished farming families in rural Manitoba. These humble beginnings on small family farms instilled in him a deep understanding of the hardships faced by people living in rural environments. Reflecting on his family's history, Gary noted that the absence of basic amenities, like indoor plumbing, water, and electricity, were daily challenges for the farmers.

Despite the unpredictability of factors like grain prices and adverse weather conditions that often threatened their livelihoods, Gary's family persevered. Education, however, was a luxury often compromised for the sake of familial responsibilities. This pattern of struggle and sacrifice perpetuated the cycle of poverty in many farming families.

Gary's mother, however, broke this pattern. Recognizing education as the key to disrupting the cycle of poverty, his grandmother championed his mother's pursuit of further schooling, and she ultimately became a registered nurse. Gary's family history left a lasting impact on his own outlook on life.

Gary pursued his postgraduate education at the University of British Columbia, leaving Ottawa to study law. Following his studies, he embarked on a successful career as a lawyer in a downtown law firm. Motivated by his parents' financial struggles, Gary was driven to work very hard, dedicating long hours to ensure a comfortable lifestyle. Outside of work, he enjoyed various sports, specifically hockey, downhill skiing, and tennis.



Pictured: Gary (in pink) with golf buddies.

It was during a school gathering that he and his now-wife, Cathy, first crossed paths, eventually leading to their marriage two years later. Similar to Gary, Cathy's life journey was shaped by her passion for education. Growing up as the

second eldest of three sisters in Victoria, her determination led her to a fulfilling career as an elementary school teacher in North Vancouver, and later as a contributor to the educational textbook publishing industry.

Their lives took an unexpected turn when Gary was diagnosed with Parkinson's disease in 2010 at age 62, just a few years before he intended to retire. The news brought with it a wave of uncertainty and anxiety that echoed through his entire family, yet Gary and Cathy faced the challenge head-on, determined to handle the condition with resilience and a positive outlook. Despite the initial shock, they drew strength from each other and the support of their loved ones. For the first nine years following the diagnosis, the couple continued to lead very active lives, both socially and recreationally. They travelled with friends and did many bike trips in both Europe and Canada. Gary did decide to shut down his law practice at the end of the first year after his diagnosis, but he continued to be an avid tennis and hockey player and was skiing on the slopes of Whistler Mountain, until the beginning of the COVID-19 pandemic. Life was good, with some PD bumps along the way.



Pictured: Gary and Cathy hiking in Palm Springs.

However, things have changed in the last three years. Despite her best efforts, Cathy found it increasingly difficult to manage Gary's progressing symptoms. As a result of the conflict this caused, their relationship became increasingly tenuous, and the couple made the difficult decision to move Gary into a retirement home. These days, Gary believes that being pleasant and avoiding

arguments with others has improved his mental health greatly. "I try to do nice things for people, like donating my time when I can, and donating generously to charities, societies, and foundations like Parkinson Society British Columbia," he says. "As a result, I avoid dwelling on my own problems."

To help them navigate the complexities of the disease, the couple found valuable guidance in the resources and programs provided by Parkinson Society BC, especially in the early days following his diagnosis. Through PSBC's support groups, they were able to connect with others facing similar challenges, fostering a sense of community and understanding. Cathy has also benefited from one-on-one counselling, finding it very professional and useful.

Additionally, the educational webinars and conferences provided by PSBC have helped them become very knowledgeable about Parkinson's. "The high-quality resources offered [by the Society] have succeeded in making life more bearable and a happier experience," says Gary. In particular, the couple says that the programs and services during COVID on Zoom were a "life saver."

Reflecting on their experiences, Gary emphasized the importance of maintaining a positive attitude and giving back to the community. He highlighted the significance of contributing to causes that make an impact on the lives of individuals and families also dealing with Parkinson's disease. Their journey stands as a testament to the power of resilience, compassion, and community support. Through their dedication to each other and commitment to supporting others, Gary and Cathy have exemplified perseverance and generosity in the face of adversity.

Parkinson Society BC would like to thank Gary and Cathy for their generous ongoing support. Donations from individuals and families are critical to our operations and help ensure that no one needs to walk the Parkinson's road alone. If you would like to help empower the PD community in British Columbia, please consider making a donation at www.parkinson.bc.ca/donate or by phoning 1-800-668-3330.

Stories

Fighting Parkinson's: My Warrior, My Burnout, My Village

By Arlene Tigar McLaren



Pictured: Arlene and her spouse, Angus, who loves to play billiards.

My spouse has Parkinson's disease (PD), and I am his primary caregiver. As often noted, PD is not a cookie-cutter disease. It varies widely both for those with the disease and for those who care for them. His PD experiences and mine are unique, yet they can resonate with others. We know we are not alone.

MY WARRIOR

My spouse is a fighter. He continues to battle PD, never giving up. As his PD progressed, his enemy changed from occasional falls to many faints throughout the day and evening. He was ambushed by postural hypotension, a condition in which his blood pressure drops dramatically when he moves from lying down to sitting up, or from sitting to standing.

Despite the dangers of fainting and falling, PD does not take over his life. His fighting spirit is awe-inspiring. He is upbeat and demands a good quality of life. He no longer easily reads a book but likes telling stories, watching movies, listening to music, and using the computer. He enjoys walks and seeing family and friends.

Recently, he fell and hit his head. A small gash needed medical attention. Because of his faints, he spent a week in the hospital. The medical team sought to stabilize his blood pressure, which ricocheted from very high to very low. As they kept him safe from falling, their primary solution was to constrain him, including belting him into the bed. He was terrified by his loss of control.

It took him a week back home to recover from the hospital experience and the delirium it induced. After this heart-wrenching experience, I wondered what will happen if, and when, he falls again, and we return to the hospital? I am hoping that we will be better prepared. For example: to insist that PD medication be given exactly on schedule; to emphasize his baseline of low blood pressure; to convey how restraints are triggering for him; to sleep overnight in his room with him to reduce his anxieties.



MY BURNOUT

As a family caregiver, I'm on his roller coaster PD ride (unfortunately, I've never liked the terrifying plunge of the roller coaster!). My learning curve is a steep uphill battle. Just as soon as I've figured one thing out, something else comes along. Sudden shifts in his condition catch me off guard. One minute, he is animated, the next worn out; one minute, cognitively very sharp and then not. I work hard to hear his soft voice, trying not to show impatience. All of this, along with his growing confusion, add to my anxiety and fatigue.

Each day on average, he faints six to eight times. After some faints, he recovers quickly. Other faints include loss of consciousness and seizure-like symptoms. His faints have made me dread caring for him on my own. I'm coping but feel I could crash and hit rock bottom at any time. I'm often close to tears (as is he).

I've learned that No Assist policies at Assisted Living homes mean that the facility calls on paramedics or the fire department to attend to a resident who has fallen. If we had a No Assist policy at home, we would keep emergency responders very occupied indeed.

MY VILLAGE

As much as my spouse fights the disease and seeks independence, he does not win battles on his own or only with my help. Far from it. We have an army, although I prefer the metaphor of a village, a *supportive collectivity*, that sustains us.

Experts outside our home provide vital assistance (e.g. Parkinson Society BC, the UBC Brain Wellness Centre, Holy Family Hospital, social workers, a geriatric doctor, a general physician, a case manager, and neurologists). Extensive Parkinson's disease resources (e.g. boxing classes, support groups) make it easier for us to tackle the mammoth changes in our lives. Sometimes, the resources have been extraordinary, such as social work guidance to navigate the healthcare system as our needs change. In my state of exhaustion, trying to figure out this complex system has been overwhelming.

Without in-home caregiving help, my spouse could not have resided at home, and I could not have provided daily care. Our in-home caregivers have provided a wide range of services throughout the day. They also supported my spouse when he was in hospital. They helped to calm him down and shared their knowledge of his condition with the medical staff. The staff greatly appreciated their assistance.

My spouse and I are one of the lucky ones. We have been able to afford to pay for private in-home care. We tried government-funded Home Support, but the services and hours did not correspond with the demands of his PD.

Although many resources are available for addressing complex Parkinson's conditions and caregiver burnout, publicly subsidized in-home care is limited. What about family caregivers who do not have the financial means to pay for adequate help?

Based on our experiences, PD care recipients and family caregivers would benefit from access to

health care services that are publicly funded and attuned to the specific demands of Parkinson's. This would include subsidized in-home caregiving, facility respite care to give caregivers a break, and in-home caregiving that can be incorporated into care facilities.

In our home, friends, family, and paid caregivers have given us day-to-day support. Our caregivers have provided us with amazing help that includes watching for and handling faints, providing a rigorous exercise program, doing housework, making meals, and giving me a few hours of respite. With respite, I've been able to pursue some of my interests. My spouse has benefited from our in-home caregivers in unexpected ways. For example, their exercise program and companionship have optimized his condition and slowed down the progression of his disease – enabling him to live at home rather than in a facility and to enjoy his day-to-day life.

Parkinson Society BC's advocacy efforts maintain a crucial focus on supporting carepartners and caregivers, as their unique challenges can lead to significant consequences, such as early transitions to residential care and heightened reliance on emergency services. Prioritizing initiatives like home care and respite support is vital to sustain the wellbeing and resilience of caregivers throughout the province.

Learn more about how you can be involved in Parkinson Society BC's advocacy efforts at www.parkinson.bc.ca/advocacy.

Additionally, Parkinson Society BC is pleased to offer Aware in Care kits, to help people with Parkinson's disease get the best care possible during a hospital stay, whether it is a planned visit or an emergency. Each kit includes valuable tools and information.

Learn more at www.parkinson.bc.ca/awareincare.

The Society also offers healthcare navigation and counselling services, so people with Parkinson's and their carepartners can be supported every step of the way on the PD journey.

To access these services, please visit www.parkinson.bc.ca/resources-services.

Newsworthy

Upcoming Education & Exercise Events

Thursdays, Nov 9 – Dec 14

SongShine

🌐 **Online**

This program harnesses the power of the brain, breath, and emotion to reclaim voices. Joani Bye will engage participants to help improve communication while facilitating a sense of community, camaraderie, and confidence!

Tuesdays, Dec 5 – 19

Move with Confidence (Level 1)

🌐 **Online**

In this introductory class, experienced instructor Janey Enmil will guide you through a series of exercises and activities that focus on improving mobility, balance, strength, and coordination. The exercises will incorporate a combination of gentle stretching, range-of-motion movements, balance exercises, and light aerobic activities. Seated or standing, everyone is welcome!

Thursday, Dec 7

Debriefing 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.

Friday, Dec 8

Strategies for Holiday Stress Management

🌐 **Online**

This workshop, facilitated by registered clinical counselor, Sara Ahmadian, will explore how the holiday season can be particularly challenging for many individuals with chronic illnesses. The primary focus will be on providing participants with practical tools, including mindfulness, boundary-setting techniques, and self-care practices, tailored to alleviate stress.

Tuesday, Dec 12

Holiday Caroling

🌐 **Online**

Jingle all the way with Joani Bye as she leads this virtual caroling event! Not only is this activity fun, but it's also a great way to relax and practice your linguistic and vocal skills.

Date: Thursdays, Jan 11 – Feb 1, 2024

Bollywood Dance Series (Level 1)

🌐 **Online**

Move to the beat of the music! Bollywood dance is a newly popular, fun, and interactive dance class tailored towards individuals with Parkinson's disease. This class will be taught by registered occupational therapist, Gina Fernandez.

Thank You to Our Fundraisers & Donors

Special thanks to Bryan Stewart for participating in Ryder Hesjedal's Tour de Victoria, a mass cycling event in Victoria, BC. Opting for the challenging 140-kilometer route, Bryan raised an impressive \$3,500. We extend our gratitude to him and all the generous donors who contributed to his fundraising goal.

Special thank you to Linda Perry for fundraising through Avon product sales, raising \$142!

A big thank you to everyone who attended and supported the Burger & Beer Night event. We are very grateful for the remarkable efforts of Gail Soliski and Mark Glenwright in organizing this incredible event, which led to a very generous fundraising total of over \$855.

A special thank you to UBC Paths for raising \$1,000 for our cause.



PARKINSON SUPERWALK®

Total Raised by Our Community¹

\$358,195.84... and counting!

Everyone’s incredible support of Parkinson SuperWalk in 2023 has helped raise **\$358,195.84... and counting!**

These funds directly support Parkinson Society BC’s mission to empower people with Parkinson’s by providing resources and services to enable self-management, self-reliance, and self-advocacy. Thank you to everyone who participated, donated, and volunteered, and we can’t wait to see you again next year!

For the most up-to-date SuperWalk totals and photos, visit www.parkinson.bc.ca/sw-totals

100 Mile House	\$3,445.00
Chilliwack	\$8,175.00
Comox Valley (Virtual Walk)	\$1,850.00
Cranbrook	\$1,000.00
General Donations	\$4,200.00
Kamloops	\$40,959.25
Kelowna	\$43,000.94
New Westminster	\$7,330.00
Parksville/Qualicum Beach	\$19,248.25
Pitt Meadows/Maple Ridge	\$14,843.05
Prince George	\$12,657.00
Vancouver	\$129,488.35
Vernon	\$20,990.00
Victoria	\$12,778.00
Virtual Walkers	\$23,875.00
White Rock	\$23,875.00

Thank You to Our Provincial Sponsors



¹ We endeavour to provide accurate listings using the information available at the time of publishing. If there is information you are aware of that has been overlooked, please contact us.

Top Fundraising Individuals

SUPERB SUPERSTAR WALKERS (RAISED \$5,000+)

Kamloops: Rendy Olthuis, Jane Osterloh

Kelowna: Gary Toop

Vancouver: Elspeth Banerd, Jeanette Fisher Pynn, Holly Parrish, Sally Pollock, **TOP FUNDRAISER Deborah Yeates**

Virtual Walker: Wendy Murray

White Rock: Elizabeth Campbell Holroyd

SUPERSTAR SUPREME WALKERS (RAISED \$2,500-\$4,999)

Chilliwack: Angela Hutchinson

Kamloops: Bryan White

Kelowna: Deborah Hartley, Carole Taylor

New Westminster: Kathy Lynn

Parksville/Qualicum Beach: Doug Pickard

Prince George: Barbara Robin

Vancouver: Tracey-Lee Eddy, Eva Moser, Margaret Mutch, Chris Parrish, Catherine Pezarro, Nancy Pow, Patricia Rupper, Parveen Sandhu, Valerie Zilinski

Vernon: Beverly Russell, Laura Wilson

Victoria: Wayne Benning, Terry Gorsuch

Virtual Walker: Alaudin Manji

SUPERSTAR WALKERS (RAISED \$1,000-\$2,499)

100 Mile House: Philip Konrad

Chilliwack: Christine Jewell, Clifford Roulston

Comox Valley (Virtual Walk): James Stevenson

Kamloops: Daryle Arden, Janice Hobbs, Rodney Hobbs, Laurie McKichan, Rita Schneider, Amanda Single, Susanne Touhey

Kelowna: Sally Caisley, Cheryl Daniels, Jean Flintoft, Neil Syme, Daryl Wile

New Westminster: Joseph Resendes

Parksville/Qualicum Beach: Peggy Jensen, William Laurie, Raymond Nicklin, Rory Polson, Vicki Polson, Donald Reid, Richard Wageman

Pitt Meadows/Maple Ridge: Pamela Cowan, Edith Elliott, Wim Hunfeld, Richard Maki

Prince George: Carol Lamb

Vancouver: Wayne Babcock, Nav Bring, Amanda Brooks, Jan Carley, Peter Chappell, Mario Dalla Pace, Bryn Evans, Judi Hopkins, Annie Kuan, Brian Lake, Sandra Marotto, Olivia Moore, Marla Neufeld, Ian Perry, David Van den Kerkhof, Courtney Vasquez

Vernon: Mary Ann Cooper-Wilkie, Albert Hiebert, Wray McDonnell, Joseph Negraeff, Judith Nelson

Victoria: Adrian Millington, Kate Wood

Virtual Walker: Patti Leggett, Sylvia Bull, Bente Svendsen, Rehana Wilson

White Rock: Shelley Jackson, Patricia Jones

Top Teams

BC TEAMS (RAISED \$1,000+)

Comox Valley (Virtual Walk): Stir It Up

Kamloops: Rita's Movers & Shakers, Shake Rattle & Roll, Team Arden, Team Colleen, Team Single, Touhey's Travelers

Kelowna: Good Vibrations, OK Movers, Team Caisley, Team Ian, Ted E Bears

New Westminster: Century House, Manuel F Resendes

Parksville/Qualicum Beach: Berwick Parksville, Oceanside Rock Steady Boxing, PD Warriors, Walk in the Park

Pitt Meadows/Maple Ridge: Elliott Walkers, Grams Gang, Lumbering Lloyd's, Pop's Posse, Shake Rattle & Roll

Prince George: Barbsie's Team, Grandpa Frank

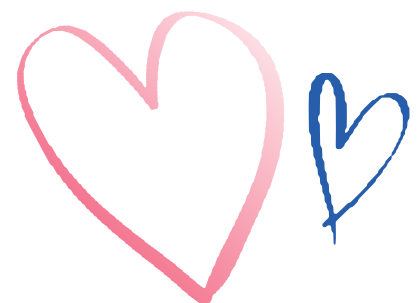
Vancouver: **TOP TEAM Red Hot Chili Steppers**, A&W Cruisers, Marla's Motivators, Parkin-Steppers, PPRC, Tapestry, Team Gran, Team Jas, Team Mojo, Team PD Avengers!, Team Wayne and Mirdza, Tedsters, VASS Team

Vernon: Team McDonnell

Victoria: For the Love of Paddi, Herding Kats

Virtual Walker: Team Manji

White Rock: Buena Vista Massage, Team Elizabeth, Team Jones





2024 at a Glance

Parkinson Society British Columbia (PSBC) is pleased to announce our tentative education and support services plan for the upcoming year. More details will be provided on our website as they become available. *Schedule is subject to change.*

Upcoming Events

ONLINE WORKSHOPS AND IN-PERSON CONFERENCES

February · New Diagnosis Workshop Series

March · Nanaimo Regional Conference

April · Victoria Regional Conference

May · Carepartner Series

June · Kelowna Regional Conference

September · Lower Mainland Regional Conference

ONLINE EXERCISE CLASSES

Thursdays Jan 11 – Feb 1 · Bollywood Dance Series

Tuesdays, Feb 6 – 27 · Move with Martial Arts Fundamentals

Tuesdays, Mar 5 – Apr 30 · Rock Steady Boxing

Thursdays, May 9 – 30 · Seated Exercise Series

Tuesdays, Jun 4 – 25 · Move with Shelly

UPCOMING ACTIVITIES (TBC)

SongShine, Art Therapy, DOPABEATS, Writing Workshop

Support Groups: We will continue to check in by phone and virtually with our support groups throughout the year, to maintain regular contact with group facilitators and ensure ongoing support; to write the GroupLink monthly publication; and to schedule facilitator webinars/teleconferences as needed. We will also continue to foster our support group needs and participation. We welcome all invitations to visit, however please connect with PSBC for updated details of each support group.

Information and Referrals: Ongoing service is available by telephone or email. If we are unable to answer your questions or concerns immediately, we will research your inquiry and get back to you.

Counselling & Healthcare Navigation (CHCN): Parkinson Society BC acknowledges the multifaceted challenges of living with Parkinson's. Our Counselling & Health Navigation team, made up of a clinical counsellor and social worker, offers free services through three focused pathways:

- 1. Short-term psychotherapy:** Tailored therapy addressing emotional complexities such as anxiety, depression, and grief, fostering resilience, and emotional well-being.
- 2. Psychoeducation:** Equipping individuals with knowledge on disease progression, treatment, and effective coping strategies for managing daily life.
- 3. Healthcare navigation:** Simplifying the complex healthcare system through advocacy, explanation of medical information, community resource connections, long-term care planning guidance, and disability benefits assistance.

Virtual Physiotherapy: We believe every person with Parkinson's disease should have access to a physiotherapist who is experienced in treating movement disorders and neurodegenerative diseases. However, geographic and/or financial barriers may make this inaccessible for many individuals. To increase access to Parkinson's-specific therapies, we launched a virtual physiotherapy service in 2021. Our own neuro physiotherapist provides phone or video-conferencing sessions free of charge for people meeting certain criteria.

PD Connect®: We will continue to increase awareness of PD Connect®, a referral program intended to help healthcare professionals connect individuals diagnosed with Parkinson's disease and their carepartners to PSBC's support services at the time of diagnosis or at any point in the disease progression.

PDLink: We will continue with this peer program that connects persons living with Parkinson's and carepartners on a one-to-one basis for support. Individuals will be connected based on similar experiences. Connections are maintained through phone and email only.

Healthcare Professional Scholarship Program:

- Continuing Education Scholarships (6 x \$1,000.00)
- PD Warrior Level 1 + 2 Training in late Summer/Fall (Location TBD)

Online Resources: We will continue to produce up-to-date resources for people affected by Parkinson's, as well as healthcare professionals. In addition to making recordings of presentations available on our website and YouTube channel, we will distribute them through our publications, like Good News, GroupLink, and Pathways.

Stay Connected to the Parkinson's Community

It's that time of year again! Renew your membership with Parkinson Society British Columbia and continue to be part of our friendly, caring, and supportive community.

For only \$25, you will receive an annual membership for you and your household, valid until December 31, 2024. *Reasons to renew your membership:*

Get Discounts

Your membership provides you with great discounts on events that are not to be missed!

Stay Informed

Get the latest information on research, medication, caregiving, exercise, wellbeing, and nutrition when you receive our quarterly magazine, Viewpoints, and other publications.

Be Heard

Vote at our Annual General Meeting and add your voice to the community to garner support from donors, sponsors, and politicians.

Gain Support

Link to our provincial network of over 50 support groups, and speak with our knowledgeable and compassionate staff.

www.parkinson.bc.ca/membership



Questions? Contact Susan Atkinson at 1-800-668-3330 ext 263 or satkinson@parkinson.bc.ca



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