VIEWPOINTS

Fall 2026

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Quarterly Newsletter by Parkinson Society British Columbia

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.

YOUR SUPPORT IS ESSENTIAL

Parkinson Society BC would not exist without the support of our members, donors, and volunteers. Here are a few of the ways you can support your Society:

MEMBERSHIP

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

DONATIONS

Make a difference with a one time or monthly gift to Parkinson Society BC. Visit parkinson.bc.ca/ways-to-give to find out more.

GIFTS IN WILL

A gift in your will can provide enduring support for years to come. Learn more at parkinson.bc.ca/legacy.

FUNDRAISING

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SUPPORT GROUPS

100 Mile House, Abbotsford Parkinson's, Advanced Carepartner Online, Campbell River, 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, Kimberley, Langley Young at Heart, Maple Ridge/Pitt Meadows Caregivers, Nanaimo, Newly Diagnosed, New Westminster, North Shore, Parkinson's Disease Online, Parksville/Qualicum, Parksville/Qualicum Caregivers, Peachland, Penticton Carepartner/Family, Powell River, Prince George, Quesnel, Salmon Arm, Sechelt/Sunshine Coast, Solo PD, South Delta/Tsawwassen, South Okanagan, Trail/Castlegar, Vancouver Carepartners, Vancouver Downtown, Vernon, Voice Exercise Group, Women Living with PD, Young Onset Parkinson's Online, YOUTHConnect.

EDITORIAL STATEMENT

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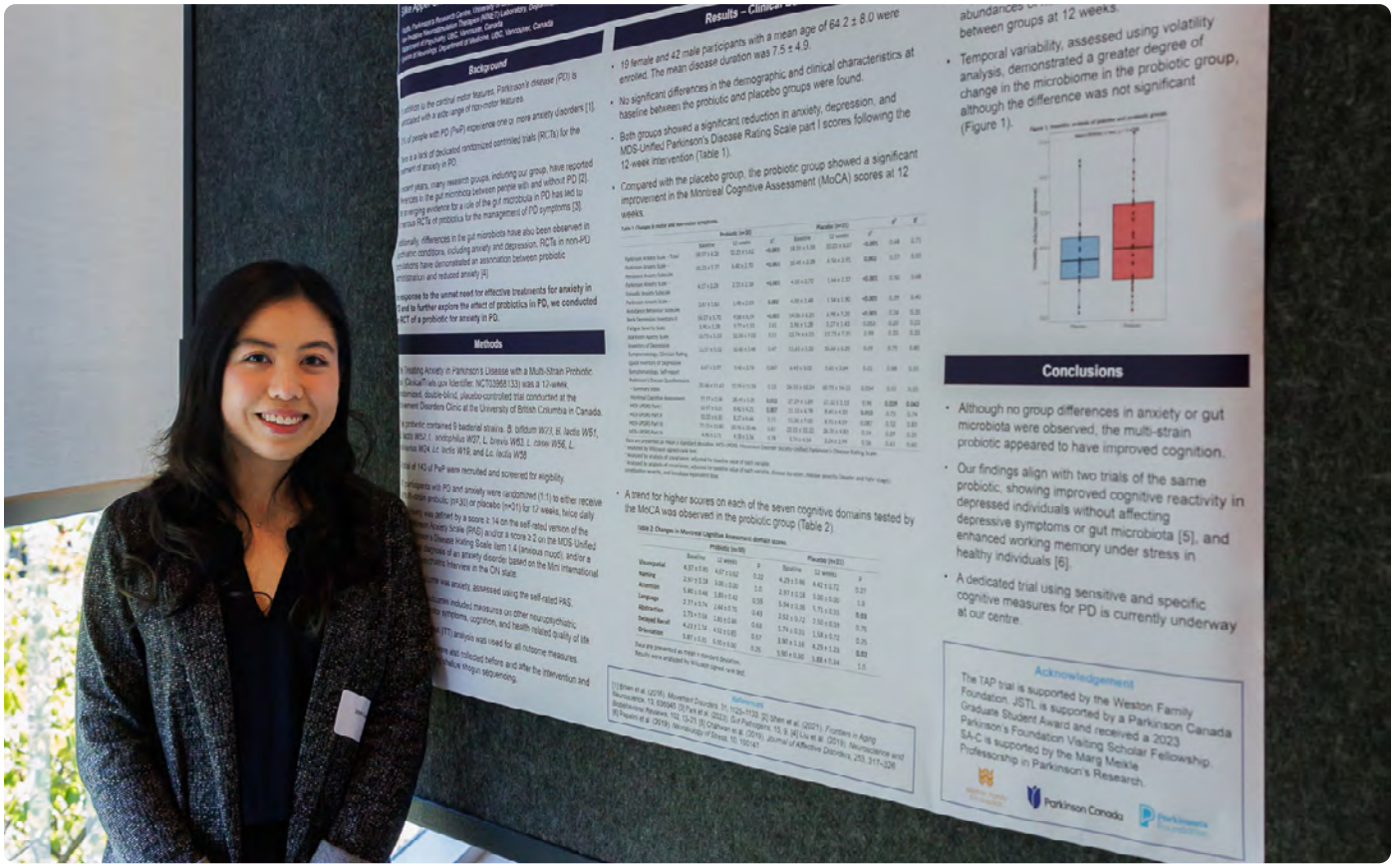
Parkinson Society British Columbia

Research

Treating Anxiety in Parkinson's Disease with a Multi-Strain Probiotic: A Randomized, Controlled Trial



RESEARCHER

Dr. Joyce Lam, University of British Columbia

FUNDING AMOUNT

Graduate Student Award (2022 - 2024), $20,000 co-funded through a partnership between Parkinson Society British Columbia and the Parkinson Canada Research Program

Under the supervision of Dr. Silke Appel-Cresswell, Dr. Joyce Lam and colleagues at the University of British Columbia (UBC) sought to test whether a probiotic supplement could ease anxiety in people living with Parkinson's disease (PD).

Anxiety is one of the most common, yet often overlooked, non-motor symptoms of PD. About 25–30% of people living with PD experience anxiety serious enough to interfere with daily life, and it can be just as disruptive to quality of life as tremor or stiffness. Current treatment options are rather limited: conventional medications used to treat anxiety don't always work well for people with PD and can bring side effects such as drowsiness or an increased risk of falls.

In recent years, researchers have become increasingly interested in the "gut-brain axis" — the communication network linking the trillions of bacteria living in our gut (our "microbiome") to the brain. Growing evidence suggests this connection may play a role in mood and anxiety, raising the possibility that probiotics, which are supplements containing live, beneficial bacteria, could offer a new way to ease anxiety symptoms.

To test this idea, Dr. Lam led the TAP trial (short name for *Treating Anxiety in Parkinson's Disease with a Multi-Strain Probiotic*) as her PhD research project in Dr. Appel-Cresswell's lab at UBC. This was the first randomized clinical trial specifically designed to evaluate whether probiotics can ease PD-related anxiety.

Sixty-one people with PD and clinically significant anxiety were randomly assigned to take either a nine-strain probiotic supplement or a placebo (an inactive product without bacteria, identical in appearance, taste, and smell) twice daily for 12 weeks. Neither participants nor the research team knew who was taking the probiotic until after the trial was fully complete. This "double-blind" design reduced bias, since participants knowing which treatment they received could affect how symptoms were reported, and researchers knowing could affect how data were collected. Anxiety in the trial was tracked using the Parkinson Anxiety Scale, a questionnaire designed specifically to capture the anxiety symptoms that people with PD experience.

By the end of the 12 weeks, anxiety scores had dropped substantially in both groups, with no meaningful difference between the probiotic and placebo groups. In other words, the probiotic did not outperform the placebo at easing anxiety. This finding, while not what the team had hoped for, likely reflects the fact that regular contact with a caring study team, increased awareness of one's own symptoms, and the natural ebb and flow of anxiety over time can all drive meaningful improvement, regardless of whether someone received the probiotic or the placebo. Similar patterns have been observed in other PD anxiety trials testing cognitive behavioural therapy and acupuncture.

Interestingly, the team also uncovered an unexpected finding: participants taking the probiotic showed a small but statistically significant improvement on cognitive testing (memory, attention, and related thinking skills) compared with those on placebo. This finding should be interpreted cautiously, as the study was not designed to test cognition, and most participants started with relatively healthy cognitive scores, therefore leaving little room for a large change to be detected. Still, it echoes findings from other probiotic studies in aging and neurological populations, and points to a promising direction for future research. Importantly, the probiotic was very well tolerated, with high compliance and comparatively mild side effects. These side effects were mostly minor digestive symptoms in both groups.

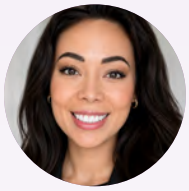
While the results at this point do not support recommending probiotics as a treatment for anxiety in PD, they open the door to further investigation of their potential cognitive benefits. This study contributes to the growing effort to understand how gut health and brain health may be connected in PD, and points to areas worth exploring in future research on microbiome-targeted therapies. Building on this work, Dr. Appel-Cresswell's team is now running a related trial testing a multi-strain probiotic for depressive symptoms in people with PD, and looks forward to sharing what they learn with the Parkinson's community as the study progresses.

ABOUT JOYCE

Dr. Joyce Lam completed her PhD in Neuroscience at the University of British Columbia in 2025 and is currently a Postdoctoral Research Fellow at UBC's Pacific Parkinson's Research Centre. Her research spans basic, translational, and clinical work on PD: during her master's degree, she validated a rat model of PD using brain imaging techniques, and her doctoral work included leading the TAP trial. Looking ahead, she plans to continue researching PD, with a focus on its neuropsychiatric symptoms, working to bring more attention and better treatment to the non-motor side of the disease that so often goes unaddressed.

Ask an Expert

Mai-Ling Greschner discusses how Nurse Practitioners can support people with Parkinson's



Mai-Ling Greschner is a Nurse Practitioner (NP) specializing in movement disorders. Over the past several years, she has worked closely with individuals living with Parkinson's disease (PD) and related neurological conditions, providing expert assessment, treatment, and ongoing management. Her practice emphasizes evidence-based care, patient education, and optimizing quality of life for people affected by movement disorders. She is committed to advancing excellence in Parkinson's care through clinical leadership, professional education, and advocacy for the expanding role of Nurse Practitioners within specialized neurological practice. She is also dedicated to promoting greater awareness of Parkinson's disease and supporting initiatives that strengthen interdisciplinary, patient-centered models of care.

Can you please describe your role as a Nurse Practitioner in caring for people with Parkinson's disease?
As a Nurse Practitioner specializing in movement disorders and Parkinson's disease, I provide assessment, diagnosis, treatment, and ongoing management for individuals living with PD and related conditions. My role involves monitoring symptoms, optimizing treatment plans, addressing both motor and non-motor symptoms, and helping patients navigate changes that occur over time.

I also provide education and support to patients and their families and work closely with other healthcare professionals to ensure care is coordinated and responsive to individual needs. My overall goal is to help people maintain function, independence, and quality of life throughout their disease journey.

What led you to work with people living with Parkinson's and movement disorders?
I have always been drawn to caring for people with complex, chronic conditions because the care is highly individualized and allows for meaningful, long-term relationships and the opportunity to support people over time as their symptoms and needs change. Even small improvements in mobility, confidence, or independence can have a significant impact on quality of life, and I find it very rewarding when I can help make that happen.

The field of movement disorders is continually evolving these days, with new research and treatment options emerging, which motivates me to keep expanding my knowledge and incorporating evidence-informed approaches into care.

How does your role differ from that of neurologists or other members of the healthcare team?
While there is considerable collaboration within the healthcare team, the unique contribution of my role as a Nurse Practitioner is often the ability to provide ongoing, patient-centered care with time to explore how Parkinson's affects a person's daily life. In addition to managing symptoms and treatments, I address concerns related to mood, cognition, sleep, caregiver wellbeing, function, and access to community resources.

I provide ongoing follow-up and serve as a consistent point of contact, helping coordinate care with neurologists and other healthcare professionals as needs develop. This continuity allows me to develop long-term relationships with individuals and families and support them through the different stages of the disease.

A unique aspect of my role within our clinic has been leading the implementation and ongoing management of continuous subcutaneous foslevodopa/foscarbidopa therapy. Introducing this advanced treatment required the development of clinical processes, patient education pathways, and monitoring strategies. For individuals with advanced Parkinson's disease experiencing significant motor fluctuations, this therapy has been transformative, improving symptom control, independence, and

quality of life. It has been especially rewarding to see patients who were previously struggling regain confidence and function through access to this innovative treatment option.

How can a person with PD see an NP for care? What are the benefits of seeing an NP, and when might other members of the healthcare team also be involved?
NPs are autonomous healthcare professionals who assess individuals, diagnose and manage health conditions, order and interpret diagnostic tests, prescribe medications, and provide comprehensive ongoing care. Many NPs work in primary care practice, serving as the most responsible healthcare provider for their patients, however some NPs practice in specialty healthcare settings such as neurology. NPs within specialty clinics retain their autonomous clinic functioning.

A person with PD may see an NP within a neurology or movement disorders clinic upon referral and admission to the clinic, often as part of a specialized Parkinson's care team. One of the benefits of seeing an NP is the opportunity for comprehensive, longitudinal care. Appointments often provide time to discuss symptoms, treatment goals, daily functioning, caregiver concerns, and quality of life. Many people living with PD value the continuity, accessibility, and ongoing support that NPs provide.

Depending on an individual's needs and presentation, other members of the healthcare team may become involved, including neurologists, physiotherapists, occupational therapists, speech-language pathologists, pharmacists, social workers, dietitians, and mental health professionals. Each member of the team lends their expertise to provide coordinated care that supports individuals and families throughout the course of PD.

What role do you play in medication management and monitoring side effects?
Medication management is a core component of my role as a neurology NP caring for individuals with Parkinson's disease. Because symptoms and treatment needs evolve over time, ongoing assessment and medication optimization are essential. I independently evaluate treatment response, initiate and adjust medications, optimize dosing schedules, and work with individuals to achieve the best possible symptom control while minimizing side effects.

I also monitor and manage medication-related side effects and complications, including nausea, dizziness, orthostatic hypotension, hallucinations, confusion, excessive daytime sleepiness, dyskinesias, impulse control disorders, and wearing-off fluctuations. Through regular follow-up and comprehensive clinical assessment, I can often identify subtle changes early and make timely adjustments to improve safety, symptom control, and daily functioning.

Education is an important part of medication management. I advise individuals and their families on how medications work, the importance of timing and consistency, potential side effects, and when to seek support. By providing this information, I help patients and carepartners feel more confident and engaged in managing treatment decisions, which supports safer medication use and better outcomes.

When appropriate, I also help individuals understand advanced treatment options, such as deep brain stimulation (DBS) and infusion-based therapies (levodopa-carbidopa intestinal gel and subcutaneous foslevodopa/foscarbidopa). My role is to provide education, guide discussions, and help determine whether these options align with an individual's goals, symptoms, and overall care priorities.

How do you help individuals stay informed and involved in their own care? Are there any ways you specifically involve carepartners and family members?
Education and shared decision-making are central to helping people remain active participants in their PD care. Following a diagnosis, many individuals and families feel overwhelmed. Part of my role is to help them better understand the condition, treatment options, and strategies for managing symptoms so they can feel more confident and informed when making decisions about their care.

Appointments are structured to allow time for discussion, questions, and individualized education based on each person's symptoms, stage of disease, and goals. I believe that understanding the "why" behind symptoms and treatment recommendations

is just as important as the treatment itself. Rather than simply making recommendations, I take the time to explain the underlying causes of symptoms and the rationale behind different management options, so individuals are informed regarding decisions about their care.

Family members and carepartners are, with the patient's consent, included in discussions whenever possible. They often provide valuable insight into changes in symptoms, cognition, behaviour, and daily functioning, and their involvement helps ensure that care plans are practical, effective, and sustainable at home.

Additionally, I help connect individuals and families with local, provincial, and national resources, including rehabilitation services, counselling, caregiver supports, and Parkinson's organizations. In an era where health information is readily available online, it can be difficult to distinguish evidence-based information from misinformation.

Part of my role is helping patients and families navigate this landscape by directing them to trusted, current, and evidence-based resources.

Are there lifestyle changes (such as exercise, diet, or routines) you emphasize?
Lifestyle strategies are a fundamental part of PD management and are emphasized alongside medical treatment. Regular exercise is strongly recommended because it helps maintain mobility, balance, strength, flexibility, and overall function. Clinical evidence supports aerobic exercise in PD; however, recommendations are individualized and may include walking, resistance training, stretching, balance exercises, yoga, tai chi, or Parkinson's-specific exercise programs such as boxing programs.

Establishing consistent daily routines can also be helpful, particularly with medication timing, meals, sleep, hydration, and activity. Structured routines may help address symptoms such as apathy by providing external cues and reducing barriers to initiating activities. Consistent routines can also support symptom management and make day-to-day activities more predictable.

Nutrition is another important focus, including maintaining hydration, a high fiber diet to help manage constipation, and addressing challenges

such as reduced appetite or swallowing difficulties. I work with individuals to develop realistic and sustainable lifestyle strategies that align with their abilities and goals. When needed, I involve other members of the interdisciplinary team, such as physiotherapists, occupational therapists, and dietitians, to provide additional support and expertise.

What are the biggest gaps you see in Parkinson's care today, and what barriers do you think people face in accessing the support they need?

One of the most significant gaps I see in Parkinson's disease care is the challenge of accessing timely, coordinated, and comprehensive support. While movement disorder clinics provide an important foundation for diagnosis and medical management, many individuals and families are left to navigate a complex healthcare system involving multiple providers, services, and settings. Managing appointments, referrals, and changing needs can be overwhelming, particularly while also adapting to the physical, emotional, and functional challenges of living with Parkinson's disease.

Many individuals and families experience uncertainty in the early stages of Parkinson's disease and may not know where to find trusted information, resources, or community support. Barriers such as geography, wait times, caregiver availability, and financial limitations can further affect access, particularly for those living in rural or underserved communities.

There is a clear need for more integrated, team-based models of care that bring interdisciplinary services—such as physiotherapy, occupational therapy, speech-language pathology, social work, and mental health support—into closer coordination with neurology care. When care is better connected, communication between providers improves, duplication is reduced, and individuals with Parkinson's and their carepartners are better supported in making informed decisions and managing the disease over time.

Therefore, strengthening integrated care pathways and improving access to coordinated interdisciplinary support represent important opportunities to make Parkinson's care more accessible, consistent, and responsive to the needs of individuals and their carepartners throughout the disease journey.

How do you see the role of Nurse Practitioners evolving in Parkinson's care?

The role of NPs in PD care continues to expand as healthcare systems work to improve access to specialized services and address the growing demand for movement disorder care. With limited specialist availability in many regions and increasing complexity of PD care, NPs are helping bridge gaps by providing timely assessment, follow-up, education, and support within interdisciplinary teams.

Beyond direct clinical care, NPs are well positioned to improve continuity and patient experience across the healthcare system. They help individuals and carepartners navigate services, facilitate communication between providers, and support more integrated, patient-centered models of care. Their broad scope of practice allows them to adapt to evolving needs while providing consistent, long-term support.

Looking ahead, I expect NPs will continue to play a larger role in specialized movement disorder clinics, community-based care, and initiatives aimed at improving care for rural and underserved populations.

What has been the most rewarding part of working with individuals with Parkinson's?
The most rewarding part of working with individuals with Parkinson's disease is seeing how individualized care can make a meaningful difference in daily life. Whether through medication adjustments, education, or interdisciplinary support, even small improvements—such as better mobility, improved sleep, reduced symptom fluctuations, or greater confidence in daily activities—can have a significant impact on patients and their families.

Another rewarding aspect is helping individuals and their carepartners build confidence in managing the challenges of Parkinson's disease. As their understanding of the condition grows, many become better equipped to participate in decision-making, adapt to change, and maintain a sense of independence despite disease progression.

On a personal level, my patients have taught me a great deal about resilience, perseverance, and gratitude. Watching people work tirelessly to maintain abilities that many of us take for granted has given me a deeper appreciation for movement and everyday function. Their determination inspired me to challenge my own assumptions about what I was capable of. After not running for more than a decade, I gradually returned to the sport, completed my first half marathon, and have since registered for a full marathon. I have also made other lifestyle changes, such as choosing to cycle whenever possible.

Overall, the dedication and resilience of my patients continue to inspire me. They have shaped not only how I care for others but also how I approach my own health, goals, and daily life.

Is there anything else you would like to add?
Caring for people with Parkinson's disease has reinforced the importance of treating the whole person, not just the disease. While medications and symptom management are important, meaningful care also involves understanding an individual's goals, values, support systems, and priorities for quality of life. Every person's experience with Parkinson's is different, and effective care requires a personalized approach that evolves over time.

I am continually impressed by the resilience of the people and families I work with. Despite the challenges that come with Parkinson's disease, many individuals find ways to adapt, remain engaged in meaningful activities, and maintain a strong sense of purpose. Being able to support them through that journey is both a privilege and one of the most rewarding aspects of my work.

I have also been impressed by the exceptional sense of community within the Parkinson's world, among both patients and healthcare professionals. Numerous organizations, many of them volunteer-led, offer opportunities for individuals to access trusted resources, connect with supportive communities, and participate in Parkinson's disease–specific exercise and physiotherapy programs. Through local, national, and international collaborations, I have had opportunities for mentorship, education, teaching, and clinical partnership with movement disorder specialists, advanced practice providers, researchers, and patient advocates. These relationships have broadened my perspective, strengthened my clinical practice, and reinforced the value of a supportive community in improving patient care.

The collective knowledge, generosity, and commitment within the Parkinson's community continue to motivate me and serve as a reminder that caring for people with Parkinson's disease extends far beyond the clinic walls.

Living Well

Your Diagnosis, Your Decision: Navigating Stigma and Disclosure in the Workplace

A Parkinson's disease (PD) diagnosis can bring many changes to several aspects of your life, including work. Disclosing that you have been diagnosed with PD in a professional setting can mean accepting that your life has permanently changed and can mark the start of a new chapter characterized by greater openness. On the other hand, it may lead to anxieties about being treated differently by coworkers, managers, or people you manage. Research suggests that people who disclose their Parkinson's diagnosis often report higher quality of life and greater social support than those who conceal it, although every person's circumstances are different.

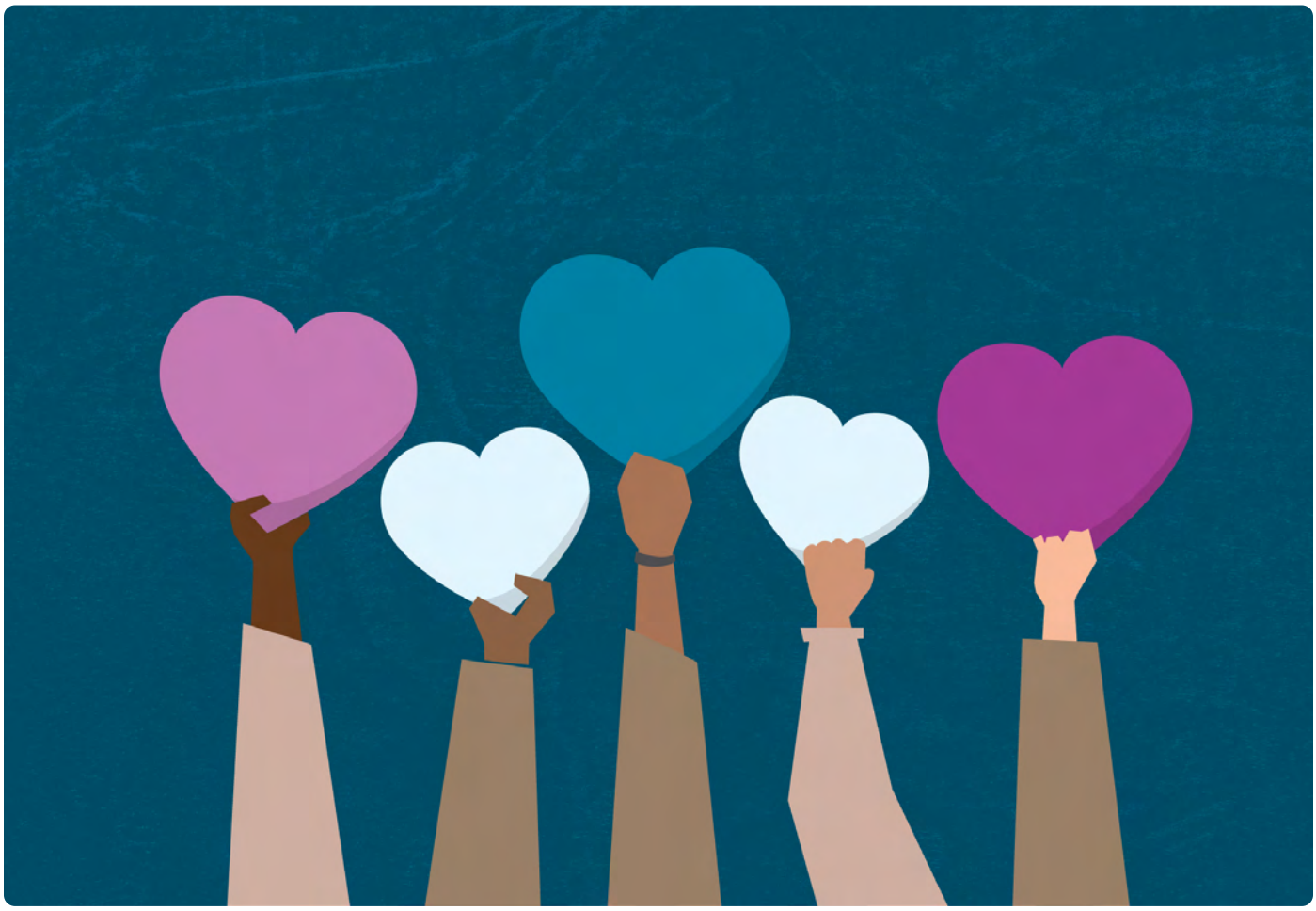
Disclosing a PD diagnosis at work can create space in the workday for managing the day-to-day aspects of the disease, as Parkinson's requires keeping on top of routines like medication schedules and specific meal timings. Additionally, being open about PD can give you the chance to correct any misconceptions your colleagues may have. While correcting such misconceptions is not your duty, doing so may help create a more understanding and supportive work environment.

If someone does not feel comfortable disclosing their PD diagnosis, they will likely conceal it. A study conducted in 2025 measured 150 respondents with Parkinson's disease, 34 of whom concealed their diagnosis in the workplace. The study found that respondents who concealed experienced lower health-related quality of life than those who disclosed, as well as more stigma and lower social support *(Naamneh-Abuelhija et al., 2025)*.

The study also measured respondents' knowledge of Parkinson's disease and self-management strategies and found that concealers exhibited lower knowledge of both topics. Notably, because the severity of PD symptoms did not vary significantly between the groups, disease progression alone is unlikely to explain these differences. The researchers note that to live well with a chronic disease like Parkinson's, an understanding of the symptoms and treatment options is imperative. Because the concealment group lacked this knowledge, it is suggested that they do not have the tools to manage PD in the long run as effectively as the disclosers *(Naamneh-Abuelhija et al., 2025)*.

STIGMA

Stigma refers to negative beliefs, stereotypes, and discriminatory attitudes towards someone or something. In Parkinson's disease, stigma may arise due to visible motor symptoms and communication difficulties. Fear of stigma can be a major factor influencing decisions about whether to disclose a diagnosis in the workplace. A study conducted in 2017 looked to objectively understand stigma, which is usually a highly subjective experience. Researchers analyzed previously published studies on experienced stigma and found that stigma coming from external sources affects people with PD so deeply that it has been linked to poorer disease management, including reduced treatment adherence and increased depressive symptoms. Because of this, the researchers argued that stigma should be recognized as a significant



non-motor aspect of living with Parkinson's because of its substantial impact on wellbeing *(Maffoni et al., 2017)*.

PD-related stigma does not always come from external sources. Internalized stigma, also known as self-stigma, may occur if the person with Parkinson's anticipates unfair treatment and internalizes the stigma they believe they are going to receive. This can lead to concealing a diagnosis at work *(Hanff et al, 2022)*.

Self-stigma can also come from preparing for common misattributions of PD, like being labeled as intoxicated, depressed, or socially deviant. The National Center for Excellence in Research on Parkinson's Disease (NCER-PD) found that self-stigma often materializes away from the comforts of home and family and is especially present in the workplace, as well as unfamiliar places *(Hanff et al, 2022)*.

STRATEGIES FOR REDUCING STIGMA

Interference from stigma does not stop at PD symptoms. Stigma can cause social withdrawal, and in extreme cases, social isolation. A study conducted in 2022 attempted to understand the causes for social withdrawal in individuals with PD and found that both internalized and external stigma increased social withdrawal. Specifically, they found that symptoms affecting mobility, like gait disturbance, were the most likely to cause negative emotions like depression, leading to higher cases of social withdrawal *(Ahn et al, 2022)*. However, social activity programs helped improve social participation, directly treating the problem of social withdrawal. Parkinson Society British Columbia (PSBC) offers free exercise classes and activities for the Parkinson's community. If you are feeling socially withdrawn, consider looking into what we offer at www.parkinson.bc.ca/events.

Social activity programs may help reduce social withdrawal and increase social participation, regardless of whether withdrawal is driven by internalized or external stigma. However, increasing social participation alone may not address the emotional effects of self-stigma. Research also suggests that self-compassion can help protect against these effects, although it may not be as effective in buffering the effects of external stigma. A 2022 study found that self-compassion was associated with lower distress among people who experienced self-stigma *(Eccles et al., 2022)*. Practicing self-compassion can be an important part of coping. Remember to give yourself grace.

INTERSECTIONS OF PD WITH OTHER MARGINALIZED IDENTITIES

Parkinson's disease often co-occurs with other health conditions, which can be associated with perceived stigma from others, especially in the workplace. A study of people with Parkinson's conducted in 2022 found that 79% of its respondents had other health conditions, like depression and anxiety, which increased the perceived stigma directed toward them. Importantly, respondents who identified with marginalized groups reported that they experienced more stigma towards their PD symptoms *(Islam et al, 2022)*.

Not disclosing a PD diagnosis in environments like the workplace may increase the likelihood that visible symptoms are misinterpreted. It can also add to potential judgements made about additional health conditions or identity markers like race, gender, or sexuality. Stigma towards PD, perceived or not, does not exist in a vacuum, and, in fact, intersects with health conditions and identities alike. The extra stigma experienced by individuals from marginalized groups with PD may make it more difficult to disclose their diagnosis. A study conducted in 2025 surveyed people with Parkinson's who had disclosed their diagnosis in places like the workplace versus those who had concealed their PD diagnosis. The survey found that people who were women, participants identifying as Muslim, and those without a higher education concealed their diagnosis at a higher rate compared to other respondents *(Abuelhija et al, 2025)*. Social pressures towards people belonging to groups that experience stereotyping exist independent of any visible health conditions, so concealing a diagnosis like PD in environments like the workplace may feel like the only option.

However, it is important to note that while there may be benefits of disclosing, every individual and circumstance is unique. The decision to disclose a Parkinson's diagnosis is deeply personal and should be made based on an individual's own needs, priorities, and sense of safety. There is no universally "right" choice. Ultimately, people living with Parkinson's are the best judges of what is appropriate for their situation, and choosing not to disclose should not be viewed as a failure to advocate for oneself, but rather as a valid decision made within the realities of one's social and professional environment.

WORKPLACE ACCOMMODATIONS AND YOUR LEGAL RIGHTS

Some individuals with Parkinson's may benefit from workplace accommodations, which involve making adjustments to workplace practices, policies, or requirements to reduce barriers related to a disability or health condition. To access accommodations, individuals typically need to inform their employer of their functional limitations and may be asked to provide supporting documentation from a healthcare professional. While the employer may ask questions about job duties and function, they do not have the right to ask about your specific diagnosis *(Disability Alliance BC, 2016)*.

There may be representatives employed at your workplace that can help you work through accommodation and disclosure processes. If your employer has an equity advisor, consider speaking with that person. Similarly, if you are represented by a union, you may benefit from discussing your situation with a union representative.

The most important thing to remember about disclosing your diagnosis is that you have full control over it. You control when you disclose, how much you disclose, and who you disclose to.

Also, there are legal frameworks in place to protect you from discrimination. Parkinson Society British Columbia has partnered with the law firm Blake, Cassels & Graydon LLP to provide members of the Society access to pro bono legal advice in appropriate cases. If you have any concerns about disclosure of your diagnosis, please contact us at info@parkinson.bc.ca.

TIPS FOR DISCLOSING A PD DIAGNOSIS AT WORK

If you decide to disclose your Parkinson's disease diagnosis to a current or prospective employer, it can help to approach the conversation with a clear plan. In general, it is useful to focus on your skills, experience, and ability to perform the essential duties of the role, rather than framing Parkinson's as a limitation. Being prepared can help you communicate confidently and keep the discussion focused and constructive.

You may also want to anticipate questions or concerns an employer might have and be ready to provide practical information, resources, and strategies that address them. It can be helpful to explain, in your own words, why you have chosen to disclose and to identify any barriers you experience as a result of Parkinson's, along with how these may affect your work. Where possible, you can also outline specific workplace accommodations that would support you, and, if applicable, provide examples of successful adjustments from previous roles.

Living with Parkinson's disease may require adjustments, but it does not diminish a person's value, expertise, or capacity to contribute. By carefully considering whether to disclose in the workplace, people with PD can make informed choices that support their ability to participate in work in a way that meets them where they are.

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Newsworthy

Upcoming Education & Exercise Events

Mondays biweekly, ongoing from 11:00 – 11:30am

Mindfulness Mondays

Online

Join Registered Clinical Counsellor Sara for virtual mindfulness designed for anyone living with or affected by Parkinson's disease. These 30-minute guided sessions offer a supportive space to pause, reset, and reconnect. Participants will explore strategies to cultivate calm, manage stress, and support emotional wellbeing. Whether you attend every session or drop in when you can, all are welcome.

Wednesdays, Aug 5 – Sep 16 from 12:00 – 1:00pm

Boxing with Rhythm – Level 2

Online

Join Doug Pickard (a former Rock Steady Boxing Affiliate Owner), who will lead a seven-week fitness boxing class for Parkinson's. People living with Parkinson's will experience a total workout for both their mind and body, as this class incorporate cardio, strength, balance, hand-eye coordination, and speed! The exercises target Parkinson's symptoms by using high-intensity (but safe) drills, introducing multi-tasking skills, promoting movements to reduce freezing, and focusing on large movement patterns that counteract the shuffling gait. Doug is also excited to introduce a new fun component this time around– boxing to music!

Tuesdays, Sep 1 – 29 from 12:00 – 1:00pm

Chair Yoga – Level 1

Online

Join Rheanna for four sessions of 60-minute gentle chair yoga designed to warm your body and encourage movement in stiff joints and muscles. This fully seated class will bring awareness to all your limbs, providing you with valuable skills to integrate into your daily routines and morning practices.

Thursdays, Sep 3 – 24 from 10:00 – 11:00am

September Challenger – Level 3

Online

Let's get moving! Kick-start autumn with the annual September Challenger! Join PSBC's physiotherapist, Shelly Yu, as she leads you through a fast-paced circuit-style exercise class aimed at challenging your strength, balance, coordination, and stamina. Participants must be able to walk and get on and off the floor independently.

Tuesdays, Oct 6 – Nov 3 from 11:30am – 12:30pm

Voice Aerobics ®

Online

Voice Aerobics® combines voice exercises with gentle movement to strengthen communication for people living with Parkinson's or related neurological conditions. Throughout this five-week series, speech-language pathologist Mary will guide participants through exercises focused on posture, breathing, voice production, and swallowing. All exercises can be completed while seated, with time for questions at the end of each session.

Thursdays, Oct 8 – Dec 10 from 1:00 – 2:00pm

SongShine

Online

This program harnesses the power of the brain, breath, and emotion to reclaim voices. Joani Bye will engage participants in uplifting sessions using singing, breath work, diction, articulation, and creative imagination exercises to strengthen voices affected by Parkinson's or other neurological challenges. The series will conclude with a festive, Christmas-themed session on December 10, featuring holiday carol singing.

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

www.parkinson.bc.ca/events

PD Warrior Training comes to Nanaimo!

Parkinson Society BC is offering a subsidized PD Warrior Level 1 and Level 2 course bundle, an evidence-based training program designed for healthcare and exercise professionals working with people living with Parkinson's disease. PD Warrior focuses on neuro-active exercise to improve function, quality of life, and long-term exercise habits. It is open to physiotherapists, occupational therapists, kinesiologists, exercise professionals, and new graduates.

Level 1: Online Theory (15 hours)

A self-paced online course focusing on the latest evidence on exercise for PD, the principles of intensive, neuro-active exercise and neuroplasticity, pathophysiology of PD, exercise tailoring for different types of PD, and creating an enriched exercise environment.

Level 2: In-Person Workshop (8 hours)

- **Date & Time (Level 2 Workshop):** Saturday, Oct 3, 9:00am – 4:30pm PT
- **Location:** Bowen Park Clubhouse, 500 Bowen Road, Nanaimo, BC
- **Early Bird Registration:** $275 until Sep 3, 12:00pm PT
- **Regular Registration:** $325 until Sep 18, 12:00pm PT

Register early to avoid disappointment!

For more information, contact Shelly Yu at 1-800-668-3330 ext. 232 or syu@parkinson.bc.ca.

Register online at

parkinson.bc.ca/pd-warrior

Thank You to Our Fundraisers & Donors

Our community continues to inspire us with incredible generosity and creativity. Thank you to everyone who has fundraised, donated, and helped raise awareness for Parkinson's disease.

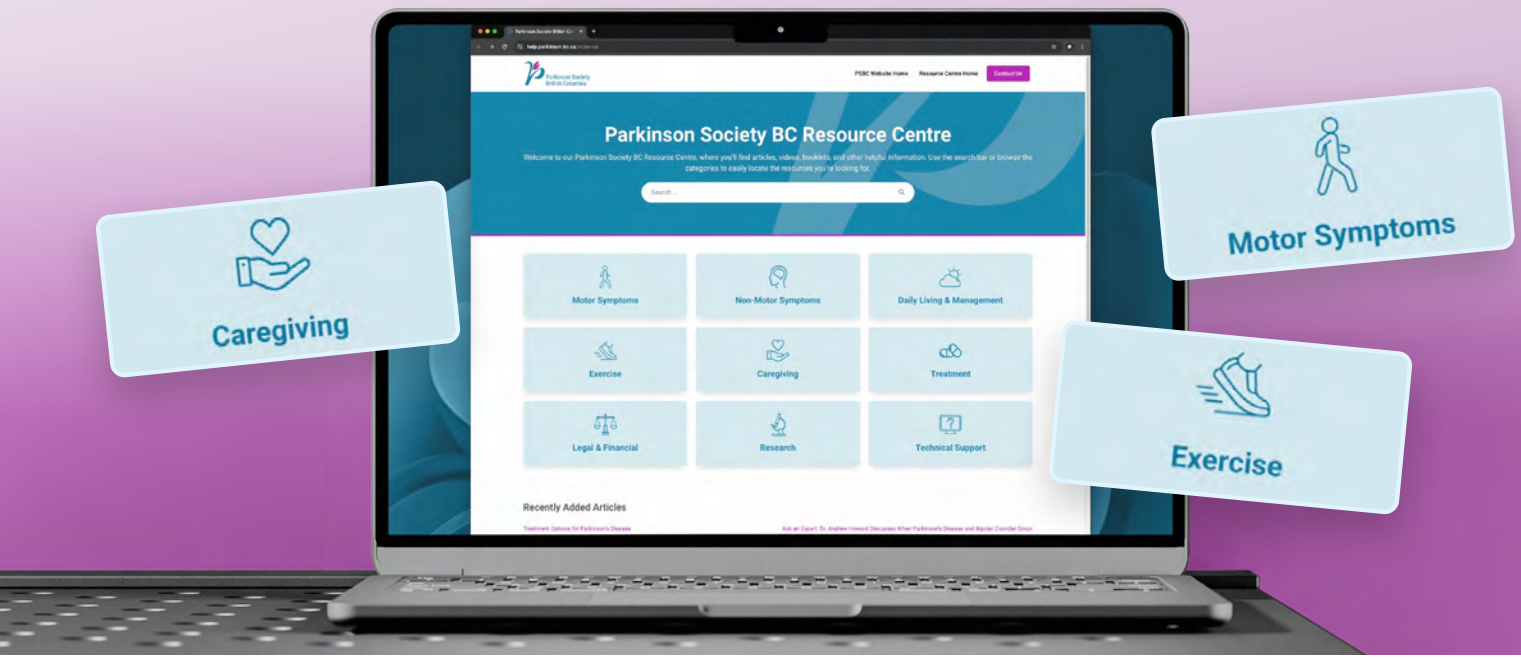
- The 10th annual Full Throttle fundraiser brought the community together on May 31, raising $17,142. Since 2017, this event has raised an outstanding $135,903 for PSBC. A special thank you to Jim Smerdon and his family for another successful year.
- Janet Mansbridge and music therapist Tiana Dick hosted the Before & After fundraiser, celebrating Janet's original music with a special performance at a Nanaimo café. The event raised an incredible $2,553 while highlighting Janet's remarkable songwriting talent.
- During Parkinson's Awareness Month, residents of Langley Seniors Village took part in an indoor walk, raising $282 to support people affected by Parkinson's. We also celebrated Parkinson's Day at Aldor Acres Family Farm, where the community came together and raised $2,001.
- A special congratulations to Meghana Narra, who marked her 31st birthday by running 31 kilometres to raise awareness and funds for Parkinson's, bringing in $996.

Every fundraiser and donation helps PSBC provide essential support, education, and resources to people living with Parkinson's, their families, and care partners across BC. Thank you for making a difference!

Interested in hosting a fundraiser for Parkinson's Society? **We're here to help.**

Reach out to us at events@parkinson.bc.ca with any questions, we're happy to support you. Thank you for your generosity, time, and commitment.

Explore the New Parkinson Society BC Resource Centre



Parkinson Society British Columbia (PSBC) is thrilled to announce the launch of our brand-new **Parkinson Society BC Resource Centre!** Designed for people living with Parkinson's, carepartners, family members, friends, and healthcare professionals, this growing online hub brings together more than **500 trusted resources** to help you find the information you need, when you need it.

Inside the Resource Centre, you'll find:

- Articles from Parkinson Society BC publications
- Recorded exercise classes and educational webinars
- Informative booklets and guides
- And much more!

Learn more at **help.parkinson.bc.ca**

Finding resources is simple.

Use the search bar to look up a specific topic or browse by category to discover new information. You can also refine your results using filters to narrow by content type, topic, and more, making it easy to find resources that are most relevant to you.

Whether you're newly diagnosed, supporting a loved one, or looking to expand your knowledge, the Parkinson Society BC Resource Centre is your trusted destination for evidence-based Parkinson's information.

Can't find what you're looking for or need assistance navigating the Resource Centre?

Contact us at info@parkinson.bc.ca.
Our team is always happy to help!

Parkinson SuperWalk

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

On **Saturday, September 12** across the province, incredible British Columbians 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
Registration 1:00pm · Walk 1:30pm

ABBOTSFORD
YALE SECONDARY SCHOOL TRACK
Registration 9:00am · Walk 10:00am

CHILLIWACK
THE LANDING SPORTS CENTRE
Registration 9:00am · Walk 10:00am

COMOX VALLEY
COURTENAY RIVER WALKWAY
Registration 11:00am · Walk 11:30am

KAMLOOPS
RIVERSIDE PARK
Registration 10:00am · Walk 11:00am

KELOWNA
WATERFRONT PARK
Registration 9:00am · Walk 10:00am

MAPLE RIDGE
HAMMOND COMMUNITY CENTRE MAIN HALL
Registration 9:30am · Walk 10:00am

NEW WESTMINSTER
MOODY PARK
Registration 11:30am · Walk 12:00pm

PRINCE GEORGE
LHEIDLI T'ENNEH MEMORIAL PARK
Registration 11:30am · Walk 12:30pm

SALMO
SALMO VALLEY YOUTH & COMMUNITY CENTRE
Registration 9:30am · Walk 10:00am

VANCOUVER
STANLEY PARK/CEPERLEY PARK PLAYGROUND
Registration 9:00am · Walk 10:00am

WHITE ROCK
MEMORIAL PARK
Registration 9:00am · Walk 10:00am

To register or donate, visit **parkinson.bc.ca/superwalk**

Takeaways from the World Parkinson Congress

The 7th World Parkinson Congress took place May 24 to May 27, 2026 in Pheonix, Arizona. A small group of British Columbians from the Parkinson's community travelled to attend the conference, including two staff members, Joanne Baker, Chief Executive Officer, and Alicia Wrobel, Director, Communications and Operations. The Congress presents an opportunity to learn from and network with like-minded individuals and organizations dedicated to a common cause. We are pleased to share some key takeaways from several of the presentations we attended.

ALTERNATIVE AND COMPLEMENTARY PARKINSON'S TREATMENTS

There are several reasons a person may explore complementary or alternative therapies as part of their Parkinson's disease care. These may include dissatisfaction with medication because of side effects, unpredictable responses, or reduced effectiveness over time; a personal preference to delay medication while consulting functional medicine practitioners or other alternative providers; or limited time during medical appointments, which may lead individuals to conduct their own research and seek additional treatment options.

A recurring message was the importance of hope, trust, and open communication. People may be reluctant to tell their healthcare providers about complementary therapies because they fear judgment or dismissal. Creating space for respectful conversations can help people make safer, better-informed decisions while reducing the risk of medication interactions or other unintended effects.

STEM CELL THERAPIES

Stem cell-derived dopamine cell therapy is an important area of Parkinson's disease research, but it remains experimental. The goal is to replace some of the dopamine-producing cells lost in Parkinson's, potentially providing lasting improvement in symptoms that respond to dopamine and reducing the need for medication.

Early studies suggest that these cells can be transplanted and may improve movement symptoms for some people. However, results have not yet been consistent, and researchers still need to determine the most effective dose, delivery method, approach to immunosuppression, and long-term safety.

This type of therapy would not cure Parkinson's disease or address symptoms that do not respond to dopamine. People should also be cautious of clinics that charge for unproven stem cell treatments outside legitimate clinical trials.

Alicia Wrobel, Director, Communications & Operations

CANNABIS

Despite widespread interest and many personal stories of benefit, there is currently no reliable evidence that cannabis improves the motor symptoms of Parkinson's disease or slows its progression. Some people may find that cannabis or cannabinoid products help with particular non-motor symptoms, including pain, sleep difficulties, nausea, appetite loss, or anxiety, but the research remains limited and responses vary considerably. Cannabis can also cause side effects such as dizziness, low blood pressure, changes in cognition, apathy, or worsening mood, which may be especially concerning for people already experiencing balance or thinking difficulties. Anyone considering cannabis should identify the specific symptom they hope to address, begin with a low dose, proceed cautiously, and discuss its use openly with their healthcare provider.

DIET AND NUTRITIONAL SUPPLEMENTS

The Mediterranean diet currently shows the most promise among the dietary approaches studied in people with Parkinson's disease. This way of eating emphasizes vegetables, fruit, whole grains, legumes, fish, and olive oil, providing fibre, antioxidants, and anti-inflammatory nutrients that may support cognition, constipation, gut health, and overall well-being. By comparison, ketogenic diets can be difficult to maintain and may contribute to weight loss, nutrient deficiencies, higher cholesterol, and other health concerns, so they should only be considered with professional guidance. Probiotics may help relieve constipation, but researchers do not yet know which strains, doses, or products are most appropriate, and some may affect how levodopa is processed. People should tell their healthcare provider about any supplements they take and consider seeking individualized advice from a registered dietitian.

Thank you to our generous community for providing us with the privilege and opportunity to attend The Congress!

Alicia Wrobel, Director, Communications & Operations and Joanne Baker, CEO

Messages of hope from all over the world

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, 2027. 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.

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

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