# September 2019 A M O N T H L Y P U B L I C A T I O N O F

# PARKINSON'S RESOURCE ORGANIZATION

Working so no one is isolated because of Parkinson's

## M E S S A G E

"Happy Birthday Jo Rosen" has a glorious, in fact, triumphant ring to it again, for it was four years ago that I faced Colon Cancer and the battle for my life. My birthday gift again this year is my medical report of CANCER FREE! I share this because like so many in our Parkinson's community, "Quality of Life" takes work and commitment: In my case, I chose to decline chemo and radiation, I changed my lifestyle, hired a nutritionist, focused on exercise and continue to be conscious of my mental state every day.

It takes tremendous support and a team: family, friends, confidential advisors to keep your spirit high, motivate you, navigate life's details, and guide you during difficult times of traumatic change and struggle.

If you're new to the Parkinson's world or have been on the Parkinson's journey for years, we know the value of support and understanding and are here for you. We offer private consultation, multiple support groups, a wealth of information on our website, and resources dedicated to your "Quality of Life." You are <u>not alone!</u>

Every month PRO brings you topics of interest and invaluable information. Enjoy our Newsletter and review all the pages on our website, as there are answers to questions you may not have even asked yet as well as inspiring stories to brighten your day.

Help me celebrate my birthday again this year by embracing PRO's mission with your donations when The **ROSES FOR ROSEN** invitation arrives in your mailbox (*electronic or postal*). See page 7.

A report on our exceptionally busy August activities: Our SPA (SPECIAL PERSON'S APPRECIATION) DAY was simply wonderful, warm, rewarding and filled with information, enthusiasm and more persons coming forward to help PRO with its mission. Our friends came from as far away as Los Angeles, Glendora, West Covina, Glendale, and San Diego. We had volunteers, board members, support groups facilitators, Wellness Villagers, donors, employees, and former employees; THE CIAM **STUDENTS** did an awesome and incredible job with their MBA projects. I was so inspired by their efforts, verve, vigor, and dynamism. The results of their work will start showing on the website and within some of our work; We will have two new "CAREGIVER ONLY" SUPPORT

## ICBII UPDATE ON THE ROAD TO THE CURE

#### A REAL-TIME SCIENCE REPORT

Reprinted from FORBES, August 25, 2019

Dr. Ram Bhatt, Founder & Chief Scientist: How This Entrepreneur Is Working To Cure Neural Diseases

Joresa Blount, Contributor Enterprise & Cloud BHATT

Neuroscience has been overwhelmed by the challenges of the Blood-Brain Barrier (BBB).



(See *ncbi.nlm.nih.gov/pmc/articles/PMC4292164/*) and how to deliver drugs to the brain with minimal invasion for a long time. Nearly 98% of all drugs do not reach the central nervous system (CNS). BBB permeable drugs that used to ease neurodegeneration today only treat some of the symptoms, not the root cause. With nearly 100 million Alzheimer's and more than 12 million Parkinson's patients in the world, the need for developing BBB permeable disease halting and curative drugs is needed more than ever before.

Dr. Ram Bhatt, the Founder and Chief Scientist of ICB International, Inc., ("ICBII or ICBI, Inc."), is one of the few scientists in the world who has developed technology to overcome the problem of BBB. Dr. Bhatt has worked extensively to find permeable technology for the diagnosis and treatment of neural diseases through "SMART Molecules" (SMs). Protected by 5 US and European patents with 4 other pending approval, SMs technology has received three grant awards from internationally known research foundations and the US Department of Health and Human Services.

Joresa Blount: ICBII has been working on ending brain diseases ever since its foundation. Can you walk us through how your team developed SMART Molecules technology?

**Dr. Ram Bhatt:** Our entire focus has been on non-invasive ways of treating diseases around the brain, keeping in mind that the bloodbrain barrier should be penetrated as minimally and as less frequently as possible. We first realized the potential of these molecules in our laboratory.

Monoclonal Antibodies seemed less efficient compared to the SMART molecules, which we designed, keeping in mind that they can offer 50 to 150 times greater permeability into the BBB. With their size, these molecules could also penetrate through cell walls.

The development was also focused around specificity. Proteins that contain the trait of the diseases in question are targeted with accuracy through the design we use. There's another advantage of multitasking that these molecules grant us. One small molecule has the capacity of binding up to 4 different diseases containing proteins. So our development was primarily focused around minimal permeation and maximum results.

Joresa: The Michael J.Fox Foundation has played an immense role in financing ICBII's aim of finding non-invasive ways to treat neural diseases. How did you get their attention?

**Bhatt:** Getting noticed by researchers such as Michael J.Fox Foundation came by focusing on creating something which was not only powerful but something which could find its way into the central nervous system without having to be pushed.

After re-engineering the designed molecule over and over again, trying

#### **ACUPUNCTURE**

Dr. David Shirazi

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Canine Companions

#### **AROMA THERAPY**

Renee Gauthier

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## SO YOU DON'T HAVE PARKINSON'S AFTER ALL COULD IT BE? NORMAL PRESSURE HYDROCEPHALUS?

**DEFINITION:** Normal Pressure Hydrocephalus (NPH) is an abnormal buildup of cerebrospinal fluid (CSF) in the brain's ventricles or cavities. It occurs if the normal flow of CSF throughout the brain and spinal cord is blocked in some way. This causes the ventricles to enlarge, putting pressure on the brain. Normal Pressure Hydrocephalus can occur in people of any age, but it is most common in the elderly. It may result from a subarachnoid hemorrhage, head trauma, infection, tumor, or complications of surgery. However, many people develop NPH even when none of these factors are present. In these cases, the cause of the disorder is unknown.

Symptoms of NPH include progressive mental impairment and dementia, problems with walking, and impaired bladder control. The person also may have a general slowing of movements or may complain that his or her feet feel "stuck." Because these symptoms are similar to those of other disorders such as Alzheimer's disease, Parkinson's disease, and Creutzfeldt-Jakob disease, the disorder is often misdiagnosed. Many cases go unrecognized and are never properly treated. Doctors may use a variety of tests, including brain scans (CT and/or MRI), a spinal tap or lumbar catheter, intracranial pressure monitoring, and neuropsychological tests, to help them diagnose NPH and rule out other conditions.

The symptoms of NPH usually get worse over time if the condition is not treated, although some people may experience temporary improvements. While the success of treatment with shunts varies from person

## MUSIC THERAPY BENEFITS FOR PARKINSON'S PATIENTS

Jay Anderson, Minding Music - Music Therapy

We love listening to music for sheer joy; to dance, to change our mood, enhance fond memories, and to exercise. How we feel listening to our music is closely allied with the Music therapy health profession, but it is much more.

Clinical music therapy focuses on the intentional use of music and musicrelated therapeutic interventions applied by a professional music therapist. The aim of music therapy is in obtaining, managing, and maintaining symptom control to reduce clinical disability and improve quality of life. Parkinson's Disease Music therapy can assist in recovery from a variety of emotional, mental, and physical diseases, illnesses, disorders, or discomforts.

## A Tool for Treating Neurological Disorders

Music is a unique tool in treating neurological injury because it can activate parts of the brain that have not been afflicted by the disease. Music therapy may help improve motor activity in those with Parkinson's disease and other movement disorders by attuning them to beats and rhythms, that in turn, "prime" muscle movement.

For those engaging in music therapy, musical talent or training is not necessary, and all types of music can be useful to effect change and reach therapeutic goals. Musical preferences, treatment needs, circumstances and goals of the individual or group, help determine the types of music a music therapist might employ.

Music-based movement therapy combines natural cognitive movement strategies, rhythmic cueing techniques, balance exercises, and physical activity while focusing on the enjoyment of moving with music, within individual limitations. Neuroscience research and clinical evidence show that music-based movement therapy can be effective in addressing physical limitations and challenges, so it is an effective intervention to improve gait and gait-related activities. Studies support improvements with speech and communication deficits through individual and group singing. There is evidence that noninvasive music-based therapy is effective in helping voice quality and range, coupled with the absence of a decline in speech quality.

Studies also show that certain types of music and music therapy can have a positive effect in stimulating the production of serotonin and dopamine, two neurotransmitters reduced with Parkinson's Disease.

## **Rhythmic Auditory Stimulation**

"Rhythmic Auditory Stimulation (RAS) is a neurologic technique used to facilitate the rehabilitation of movements that are intrinsically biologically rhythmical, most importantly, music-based gait. RAS uses the physiological effects of auditory rhythm on the motor system to improve the control of music-based."

— M. H Thault - Rhythm, Music and the Brain

Movements are led by the measured beats of a metronome. The idea is to use rhythm to strengthen connections in the auditory part of the brain to the region that controls muscle movement. Thaut's work revolves around the concept of "entrainment": the notion that stimulating the portion of the brain that perceives sound and rhythm can, in turn, synchronize other areas of the brain, including the region responsible for movement.

## **Neurological Music Therapy**

Scientific research and pioneering studies by Michael Thaut, Ph.D. and his colleagues have demonstrated that neurological music therapy (NMT) can improve gross motor signals vital to maintaining gait and balance in stroke patients and those with Parkinson's and other neurological movement disorders. Neurologic Music Therapy (NMT) is defined as the therapeutic application of music to cognitive, sensory, and motor dysfunctions due to neurologic dysfunction of the human nervous system. NMT is recognized by the World Federation of Neurologic Rehabilitation, the European Federation of Neurorehabilitation Societies, and the International Society for Clinical Neuromusicology.

We can use neurological music therapy (NMT) to improve fine-motor skills, essential to everyday tasks; writing, eating, and cleaning-not to

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## NATIONAL PHILANTHROPY DAY IN THE DESERT

**Our Founder Is Being Recognized** 

**Outstanding Nonprofit Founder: Jo Rosen, Parkinson's Resource Organization** 

The 2019 National Philanthropy Day In The Desert will take place on Friday, November 8, 2019, at the Hyatt Hotel in Indian Wells.

To ensure seating and to be seated at the PRO Tables, registration can be accomplished thru the website *ParkinsonsResource.org* or complete and mail the below registration to the PRO office no later than **October 15, 2019.** 

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If you wish to place a full-page/half-page/quarter page in the Tribute Book program, please contact Josh Zahid, NPD Tribute Book committee chairperson, 909-558-5834, <code>jnzahid@llu.edu</code>. Ads may promote your company, or express congratulations to an NPD honoree, or pay tribute to another individual or organizations whose philanthropic spirit embodies the NPD motto, "Change the World With a Giving Heart."

## **GRATITUDE**

## On Thursday, January 29, 2019, Lynn H wrote:

Thank you so much, Jo, for your time and dedication. I will discuss your suggestions with the doctors. Will keep you posted. Take care. xoxo. — Lynn

## On Wed, Jul 10, 2019, Lynn H wrote:

Hi Jo, Hope you are doing well. I am happy to share with you that Jon is doing better now. Must have been 10 straight days of good cognition, no delusions, no delirium.

About two months ago, I could no longer see him getting worse, so I put your advice into action. I started eliminating and decreasing some of his meds. We eliminated carbidopa, entacapone, trazodone, sertraline, and decreased his dosage of Sinemet. His neurologist evaluated him two weeks later and agreed that he was doing ok without all those meds. Yay...

Jon, however, felt so good and overdid himself at Rock Steady Boxing and had to be hospitalized for throwing out his back. During his stay, he also found to have a staph infection. Either his delirium and delusion had not been not fully resolved at that point, or the infection caused them, the hospital neurologist put him on Exelon (rivastigmine). So now I cannot tell whether his continued improvement is due to the fewer drugs taken or the Exelon. Thank you so much for sharing your wisdom. I am so grateful for your help. — Lynn H

## On Thursday, July 11, 2019, Jo Rosen wrote:

What a very nice report, Lynn. The delirium and Delusion, while he was in the hospital, was more than likely caused by the infection. The Exelon patch has it's good and bad. When it works, it is wonderous, when it doesn't, it is awful. I am so pleased that you are the "driving" force behind Jon's wellness. The Parkinson's world (or any other for that matter) often doesn't realize that we are the ones that need to be vigilant, diligent, attentive, observant, and the driving force. Journaling helps tremendously. Thank you for thinking I did something special, it was you that did the specialness. Keep us posted on the progress or reach out if you need additional assistance. Take good care. See you in September when the meetings start again.

## A CLIENT'S LIFE INSURANCE POLICY CAN HELP PAY FOR THEIR CARE

Lisa Rehburg, Rehburg Life Insurance Settlements

Healthcare and long term care expenses can be significant as we age. An article in the May edition of The CPA Journal explained that "50% of individuals over age 85 will need assistance with daily functioning because of medical problems (both physical and cognitive), and chronic care at home, in an assisted living facility or in a skilled nursing home can cost anywhere from \$60,000 - \$180,000 per year." In addition, a sample survey of ALCA membership indicates that 50% of clients can afford \$2,000/month, 30% can afford \$5,000/month, and 20%+ can afford \$10,000/month for products and services related to long term care. Clearly, funding for care is a major issue. But what is the solution?

One solution that very few people think of is their life insurance policy. Life insurance is an important financial planning tool. But many times, especially as we get older, the reason we purchased the policy 5, 10, 20, or even 30 years ago, is no longer an issue. The house is now paid off, the client is retired and no longer needs the income replacement, a policy purchased for estate tax purposes is no longer needed due to tax reform, a term policy is coming to an end, a business or other asset has been sold, a policy may be too expensive now, to name a few examples. Whatever the reason, the policy is no longer needed or wanted.

Life insurance policies can be sold, just like a house. There are investor groups willing to purchase these policies for a lump sum in cash. The process is called a life insurance settlement and can be an additional healthcare funding source for clients. A life insurance settlement generates, on average, 3 – 5 times the cash surrender value of the





policy. Yes, even term policies can be sold! And, life insurance settlements are highly regulated by Departments of Insurance across the country.

An Insurance Studies Institute survey estimates 500,000 seniors a vear lapse their life insurance policies, walking away with little to nothing. 90% of surveyed seniors indicated had they known about a life insurance settlement: they would have considered Life insurance settlements convert an asset that a client no longer needs or wants, into cash, which can be used for anything... including the cost of care.

Lisa Rehburg, a life insurance settlements broker has been in the insurance industry for 30 years. She is now in the Wellness Village at ParkinsonsResource. org/Rehburg

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September 2019

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## MUSIC THERAPY - cont. from page 3

mention enjoyable activities like playing cards, games, knitting and playing the piano. The conceptual framework rests on using entrainment to find "another switch to neurologically light up the motor area of the brain, which Parkinson's slowly affects. The latest research points to the work of NMT to encourage and benefit movement by going through pathways in the brain that are not affected by Parkinson's.

NMT interventions are standardized and evidence-based. They can support rehabilitation goals related to coordination, range-of-motion, balance, strength, endurance, and activities of daily living. Using the musical elements of melody, rhythm, and dynamics, NMT interventions may be used to cue and support movement or to improve perception of the target movement.

- Quality of Movement: Precise parameters and the spatial and temporal aspects of the movement represented by musical elements increases the quality of the target movement, allowing for increased rehabilitation potential.
- Practice of Purposeful Movement: The clinical use of instrument playing can target and encourage specific movements. The use of instruments also provides an auditory feedback cue, supporting the feedforward-feedback loop in movement execution.

There are no claims about the potential long-term effects of NMT. As all people age the brain loses plasticity, the ability to change and adapt to stimuli. That presents an additional challenge for treating people with Parkinson's, many of whom are middle-aged or older. Still, finding ways to slow the progression of the disease is important to help preserve our quality of life.

## **Magnetic Resonance Imaging**

Functional magnetic resonance imaging (MRI) shows that individuals process music in many areas of the brain. Current work in the neuroscience of rhythm and rhythmic synchronization mechanisms has produced results in 3 major areas:

- Empirical data of how the brain synchronizes rhythmic movement to external rhythmic stimuli;
- Evidence for perception of auditory timing information below the level of conscious perception, which the brain uses to guide timing of rhythmic movement;
- Brain mapping technology to describe neural networks involved in rhythmic synchronization.

## In Conclusion

Music, rhythms, and tempos elicit specific motor sensory responses by combining sensory stimulation and rhythmic movement. It is thought that new neural pathways are being formed to replace those damaged by disease.

Music therapy sessions can consist of rhythmic and free body movements; rhythmic auditory stimulation, active stretching and balancing to music, rhythmic gait training, singing, and voice exercise.

A clinically informed music therapy program for individuals with Parkinson's disease is an effective and integrative method for motor rehabilitation and emotional well being. In most cases, clinical music therapy is covered by insurance after being prescribed by the physician.

Jay Anderson joined the Wellness Village in February 2019. ParkinsonsResource.org/the-wellness-village/directory/minding-music-music-therapy/

PRO is inspired by his commitment to the Parkinson's world.

## HYDROCEPHALUS - cont. from page 2

to person, some people recover almost completely after treatment and have a good quality of life. Early diagnosis and treatment improve the chance of a good recovery. Without treatment, symptoms may worsen and cause death.

#### **Treatment**

Treatment for NPH involves surgical placement of a shunt in the brain to drain excess CSF into the abdomen where it can be absorbed as part of the normal circulatory process. This allows the brain ventricles to return to their normal size. Regular follow-up care by a physician is important in order to identify subtle changes that might indicate problems with the shunt.

## BITS AND PIECES

## **HONEY**

The name of this familiar and time-tested household remedy comes from ancient Hebrew and means "enchant." Long used as a culinary sweetener, honey is valued for its many healing properties as well.

Treatment with honey is referred to as apitherapy and includes replenishing energy, enhancing physical stamina and strengthening those weakened by illness or stress. Honey can also help calm the mind and promote rejuvenating sleep. In addition, honey relieves indigestion and is used to treat cardiovascular complaints. Finally, a thin coat of honey can be applied to the skin to disinfect and heal minor skin wounds and chapped lips.

**Therapeutic Effect** — Honey helps restore energy, has a general calming effect and helps to dissolve mucus. Applied externally to the skin, it disinfects and heals minor wounds.

**Components** — The principal constituents of honey are the simple sugars fructose and glucose. Other ingredients include water, pollen, organic acids, enzymes, and various proteins.

Honey and fitness — Honey provides a healthful pick-me-up. The glucose and fructose in honey have been predigested by the bees that produced it. These simple sugars are quickly and easily absorbed in the human digestive tract, and they have an overall soothing effect. Honey may be a healthy treat, but take care when using it as a sweetener: Just 1 tbsp. of honey has 64 calories, compared to 46 calories in 1 tbsp of granulated sugar.

**Shopping Tip** — Many kinds of honey are available. The consistency, fragrance, and taste depend on the types of flowers from which bees collect nectar. Look for honey that has been produced by beekeepers who do not feed their bees refined sugars or use harmful pesticide.

## PRESIDENT'S MESSAGE

**GROUPS** starting in Long Beach the first of 2020; check out our website to see the TV show we did to promote the **3RD ANNUAL BNI CHARITY GOLF EVENT** on page 5. We're the beneficiary!

In addition to resuming the support group meetings this month (see the calendar on the back page), September brings you another PROvocative and informative Newsletter, Getting you started with the exciting news ON THE ROAD TO THE CURE on page 1; SO YOU **DON'T HAVE PARKINSON'S** AFTER ALL. COULD IT BE? on page 2: MUSIC THERAPY **BENEFITS FOR PARKINSON'S PATIENTS** on page 3; a letter of GRATITUDE on page 4; A CLIENT'S LIFE INSURANCE **POLICY CAN HELP PAY FOR** THEIR CARE on page 5; and BITS & PIECES on page 6.

**THANK YOU!** We are so grateful to all the donors who responded to our **continuing** request for funds. We cannot do what we do without you.

Join us in making a difference in your life or the life of a loved one this MONTH by making a donation. Supporting us is simple: Make monthly donations through our safe PayPal donation page at ParkinsonsResource.org/donate or mail your donation to our office in Palm Desert, CA.

Until next month, REMEMBER Labor Day on the 2nd, International Day of Charity on the 5th, Grandparent's Day on the 8th, Patriot Day on the 11th, Start of Fall Equinox on the 23rd and Rosh Hashana starting on the 29th. The flowers are the Aster & Forget-me-not and the Birthstone: Sapphire. ALWAYS remember to CELEBRATE YOU and PRAY FOR OUR TROOPS!

President & Founder

## ROAD TO THE CURE - cont. from page 1

to remove as many redundant parts in it as possible, I arrived at the smallest possible particle, which was effective. I contacted Dr. Mesilah at the University of California, San Diego, to carry out the research for me in an academic setting where facilities could sell their engineered mice.

Once I designed new antigens and saw the inhibiting impact of the molecules through a number of PET scans, the Foundation realized the potential of this research. I really appreciate the grants we have received to date and their continued support.

Joresa: In terms of the technology used, how are the SMART molecules a better option compared to other therapeutic approaches, such as mechanical invasion?

**Bhatt:** SMART is an acronym that stands for Specific Molecular Architecture for Recognition and Therapy. As the name of the technology suggests, the point of making SMART molecules was to ensure that they did not perform random functions and did exactly as they were programmed to do. At present, neural diseases are treated with invasive mechanical techniques or through classical antibodies that find it very difficult to pass through the BBB owing to their bulky size. Compared to these classical antibodies that have been reported to have brain uptake of about 0.1%. ICBII's SMs have a brain uptake of up to 15%.

These SMART molecules are antibody mimics comprised of heavy-chain only. They do not contain light-chains which the classical antibodies made by humans and animals have. We have truncated them to a quarter of the size of classical antibodies. Our SMs are very specific in their approach to disease-specific proteins, minimizing any side effects which can occur as a result of them being injected. In addition, the chances of them penetrating the BBB are much greater because of their smaller size, giving it an edge over the "hit or miss" techniques used today.

Finally, as I mentioned before, having up to 4 binding sites can make every single molecule very productive. Curative drugs become so much more impactful with efficiency, and that is precisely what SMs hope to deliver better than present techniques.

Joresa: When will the SMART Molecule technology be available to people?

**Bhatt:** We are hopeful that it will be soon. Already, 5 of our 9 filed patents were approved. With every result, we are making an impact. We're trying to excel as fast and as cautiously as we can, so the final destination, though tough to get to, might not be very far.

WOULD YOU LIKE TO HELP get ICBII's drugs to market faster? The joy of being a part of this historic event can be had by helping ICBI find the funds to bring these trials to fruition through your investing, and by finding others with the financial ability and humanitarian mindset to accomplish the - until now - impossible. Please contact Jo Rosen at 760-773-5628 or jorosen@ Parkinsonsresource.org or by contacting ICBI directly through their website ICBII.com/ or by phone at 858-455-9880.

IMAGINE the world without Parkinson's, MSA, or Alzheimer's disease. JUST IMAGINE...





# PRO CALENDAR FOR SEPTEMBER 2019

The current support group meeting locations are listed below.

For any information regarding any of these meetings, please contact the PRO Office at 877-775-4111.

1	PALM DESERT Caregiver Only 10:00 AM Holiday Cancelation	3	LONG BEACH 4 Round Table For Everyone 6:30 PM Cambrian Home Care "Training Center" 5199 Pacific Coast Hwy	5 INTERNATIONAL CHARITY DAY	6	7
8 GRANDPARENTS DAY	PALM DESERT Round Table For Everyone 6:30 PM Atria Hacienda 44-600 Monterey Ave	10	PATRIOT DAY 11 GLENDORA Round Table For Everyone 6:30 PM La Fetra Senior Center 333 E Foothill Blvd	NEWPORT 12 BEACH Round Table For Everyone 6:30 PM Oasis Senior Center 801 Narcissus Corona Del Mar	13	14
15	PALM DESERT Caregiver Only 10:00 AM PRO Office 74-090 El Paseo Suite 104	17	ENCINO Round Table For Everyone 7:00 PM Rehab Specialists 5359 Balboa Blvd	SANTA MONICA 19 Round Table For Everyone 7:00 PM Rehab Specialists 2730 Wilshire Blvd. Ste 533	20	21
22	PALM DESERT Speaker Meeting 6:30 PM Atria Hacienda 44-600 Monterey Ave	MANHATTAN 24  Round Table For Everyone 6:30 PM American Martyrs Welcome Center 700 15th St	25	26 SHERMAN OAKS Educational Meeting 1:00 PM Sherman Oaks East Valley Adult Center 5056 Van Nuys Blvd	27	28
ROSH HASHANA	30					

**CAREGIVER MEETING:** (For caregivers only) Come share the ups and downs of living with someone with Parkinson's. Together there are ways of finding solutions that, when alone, might never be considered. No need to continue with your frustrations because you are not alone. Give yourself a break.

**SPEAKER MEETING:** We invite the community, especially the Person with Parkinson's and their family or friends, to attend. Speaker Meetings usually feature guest speakers who are professionals servicing the Parkinson's Community. Speaker Meetings are packed with a wealth of amazing information so bring your pencil and notepad!

"Rosen Round Table" Meeting: Join a loving circle of like-minded individuals including local professionals. Learn what works for others, share what works for you. Find out what doesn't work for certain individuals. Share emotional trials and tribulations. Realize that you are not alone and that others can relate to and learn from your story.

"BEING AN ENTREPRENEUR ISN'T JUST A JOB TITLE, AND IT ISN'T JUST ABOUT STARTING A COMPANY. IT'S A STATE OF MIND. IT'S ABOUT SEEING CONNECTIONS OTHERS CAN'T, SEIZING OPPORTUNITIES OTHERS WON'T, AND FORGING NEW DIRECTIONS THAT OTHERS HAVEN'T,"

— Tory Burch

## MENTAL MORE

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## Parkinson's Resource Organization

Working so no one is isolated because of Parkinson's 74-478 Highway 111, No 102 • Palm Desert, CA 92260-4112 760-773-5628 • 310-476-7030 • 877-775-4111 • fax: 760-773-9803 Email: info@ParkinsonsResource.org • web: ParkinsonsResource.org

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We do not intend the PRO Newsletter as legal or medical advice, nor to endorse any product or service; we intend it to serve as an information guide.