Issue No. 332

5

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PARKINSON'S RESOURCE ORGANIZATION

Working so/no one is isolated because of Parkinson's

MESSAGE

Jeepers Creepers! July 2020 already. The roses should be in bloom so let's stop and smell them, especially now in these uncommon, unprecedented, uncertain and uninvited times.

We now have in excess of 20 videos on *Things To Know RIGHT NOW* on our *YouTube* channel. Our readers have informed us of how grateful they are to have these snippets of information available to them. Check them out, each a resource worth knowing about. We are so grateful to all of the wonderful PROfessionals in our *WELLNESS VILLAGE* and we've just added a few more. The new ones are featured on the Wellness Village home page.

We are zooming through this year it seems, we held, all Zoom, 5 Partners In Care meetings, 5 Round Table meetings, and 2 Village Meetings in June. The last Village Meeting will be posted as a "pay per view" item on the website. The information is so necessary for people with Parkinson's because it talks about falling, balance and Neurogenic Orthostatic Hypotension, and an autonomic dysfunction of orthostatic hypertensions. The video includes information about Real Estate and Deep Brain Stimulation. The value is having an expert ask the presenters questions for the audience's benefit. ALL ROUND TABLE MEETINGS are closed July and August. There will be one VILLAGE MEETING on July 15th about Quality Of Life. Watch your eMails. We will hold Partners In Care meetings all summer.

The **ROAD TO THE CURE** is moving slowly back into the lab, and that article is on this page.

Check out our other PROvocative articles and informative news items such as: *IN-HOME CAREGIVERS ARE UNRECOGNIZED HEROES* on page 2; *CBD FOR ANXIETY RELIEF* on page 3; *COMMUNICATION WHILE WEARING A MASK* on page 4; *TREATMENTS INADEQUATE FOR PEOPLE WITH LATE-STAGE DISEASE, STUDY SAYS* also on page 4; *THE NEUROGENIC BLADDER* on page 5; *END OF LIFE DOULA: WHO ARE THEY AND WHAT DO THEY DO*? on page 6; and *BITS AND PIECES / TRUE STORIES OF LOVE AND COURAGE: FIVE GREAT LESSONS* on page 7.

Nonprofits have never been more clearly both the front lines and the heartbeat of our communities. In this difficult time, we hope you will consider donating. Join us in becoming a part of our advocacy efforts, contact us to "Get Involved." Make monthly donations through

ICBII UPDATE ON THE ROAD TO THE CURE A Real-Time Science Report

Advances in Parkinson's Disease Therapies

The hallmark of Parkinson's disease is the loss of dopamine producing neurons in the substantia nigra region of the brain. Like other major neurodegenerative disorders, there are no diseasemodifying treatments for Parkinson's. Current therapies only provide short-term symptomatic relief without slowing down or halting the disease progression. While most treatment strategies aim to prevent dopamine producing neuronal loss or protect vulnerable neuronal circuits, a potential alternative is to replace lost neurons to reconstruct disrupted circuits. This is exactly what UCSD researchers did as described in Nature, 582, 550(2020). The researchers reported an efficient one-step conversion of isolated mouse astrocytes to functional neurons by depleting the RNA-binding poly-pyrimidine tract-binding (PTB) protein. These scientists first generated a chemically induced model of Parkinson's disease in a mouse. Then, they mechanically injected an antisense oligonucleotide into the brain of Parkinson's mouse to inhibit PTB. The publication claims that a single injection/treatment converted midbrain astrocytes to dopaminergic neurons, accompanied by restoration of dopamine levels and rescue of motor deficits.

"On the surface, this report appears almost too good to be true," says Ram Bhatt of ICB International, Inc., ("ICBII"), La Jolla. "However, most big discoveries have almost always been unbelievable and ridiculed by the scientific community, initially. There may be some questions for the believability of this report for two reasons:

- 1. Lack of validation in the hands of a third party.
- 2. Retraction and/or correction of previously published research articles by the same authors who published the above Nature article. "

Nevertheless, if this study pans out, delivery will be a big issue because injecting drugs into the human brain will require hospitalization that often poses serious risks, in addition to outrageous hospital bills.

How ICBII Can Convert this Discovery into a Realistic Non-Invasive Therapy?

Should PTB turn out to be a genuine target whose inhibition or depletion converts midbrain astrocytes into dopaminergic neurons, ICBII can develop a blood-brain barrier permeable SMART Molecules for PTB that can be injected intravenously without the need for drilling a hole in the brain to inject the drug.

Would you like to help get ICBII's drugs to market faster? The joy of being a part of this historical 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 ICBI directly through their website *ICBII.com* or by phone at 858-455-9880, or contact Jo Rosen at PRO for a personal introduction to the scientists.

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

ANIMAL-ASSISTED THERAPY **Canine Companions**

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Renee Gauthier

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their dedication.

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every day, often unrecognized.

END OF LIFE DOULA

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Palm Desert Hypnosis

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LSVT LOUD PROGRAM

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- Bolden Communication, Inc

LSVT BIG PROGRAM

Rosi Physiotherapy

IN-HOME CAREGIVERS ARE UNRECOGNIZED HEROES

Rhiannon E. Acree, R.N., CEO/President - Cambrian Homecare

We see the headlines and pictures: doctors, nurses, hospital

personnel, EMTs -- gowned and masked -- fighting the battle

against an unseen coronavirus that has sickened and killed

thousands of people around the world. We all appreciate

Who we may not see are the in-home caregivers who help keep our seniors and developmentally disabled family

members safe and cared for. They are heroes who serve

In-home caregivers travel to family homes and ensure

that meals are prepared; dishes are washed, trash removed,

household chores are completed, and that the living situation

is safe. They provide personal care to their clients such as

bathing, grooming and dressing. Often, they are with those

under their care early in the morning or late at night. They monitor the vulnerable, ever alert to a cough, a fever, or a

change in behavior that might indicate further investigation.

- **MASSAGE & BODYWORK**
- Rehab Specialists

MEDICAL MARIJUANA The Leaf El Paseo

MEDI-CAL CONSULTING

Medi-Cal Consulting Services, LLC

Minding Music – Music Therapy

Easy Speech Therapy Center

VIBRA Rehabilitation Hospital

Easy Speech Therapy Center

VIBRA Rehabilitation Hospital

John Sloan Real Estate Group

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Senior Living Options of the Desert

REHABILITATION HOSPITALS

RESIDENTIAL CARE FACILITIES

Easy Speech Therapy Center

VIBRA Rehabilitation Hospital

At all times, caregivers are an important link to the larger

healthcare delivery system. They help bridge the gap between

the community and the clinic by bringing hands-on care to

the doorsteps of people who may be homebound, and they

also communicate what they observe to the professionals

significant help in-home caregivers provide in the bigger

healthcare picture -- all the time -- but especially now, during

the coronavirus pandemic. Thank you, caregivers, for the

service you give. We recognize how essential a team member

you are as we work together to keep vulnerable citizens

We are so proud of the work Rhiannon and her Company

does for the Parkinson's world. Cambrian Home Care is in the Wellness Village ParkinsonsResource.org/the-wellness-

village/directory/cambrian-homecare/ where they have been

This letter is to remind community members about the

Optometric Vision Care, Dr Eric Ikeda

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PHARMACIES

REAL ESTATE

MUSIC

.

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CBD FOR ANXIETY RELIEF

Paul Cotterell, General Manager, The Leaf on El Paseo / Discount Coupon included

During this unique time in history, cannabis dispensaries have encountered a large amount of people that need help with anxiety and stress related issues but would like to avoid adding a pharmaceutical solution to their daily regimen. At the same time, individuals would like to enjoy the relaxing benefits of cannabis, but simply don't have the ability or time to be slowed down during the day. Fortunately, you can count on CBD (Cannabidiol) to help solve this issue! It is important for people to find the right product and dosage that fits their lifestyle, so learning how CBD works is a vital step for individuals being able to take control over their own anxiety.

Cannabis and close relatives to cannabis, like hemp, produce a fascinating array of molecules known as cannabinoids. Cannabinoids like THC and CBD interact with different receptors in our body, and provide a variety of effects with this interaction. Recent medical studies (such as Cannabidiol as a Potential Treatment for Anxiety Disorders, published in the Neurotherapeutics medical journal) has found that although CBD closely resembles THC on a molecular level, it does not provide euphoric or "high" effect, which makes CBD a perfect anti-anxiety option during your busy day.

Using CBD daily and getting a daily dose of the cannabinoid is the best way to see relief, it has not seemed to be as effective if it is only used in anxious moments.

Now that we have gained a little understanding for how CBD works, let's dive into finding the right product for you! There is a plethora of CBD products, ranging from tinctures that are applied under the tongue, to tasty edible treats, and even pain-relieving creams. As mentioned above, it is best to find a product that you can use each day, so product cost can sometimes play a factor. Just always be sure to find a reputable brand that has put in the effort to create a consistent product. At The Leaf, we recommend finding a CBD tincture to introduce you to the potential effects. We recommend a tincture, because it is one of the more cost-effective options that also provides a consistent dose day after day. Many people enjoy inhaling cannabis smoke or vapor that is rich in CBD, but it can be challenging to find a consistent daily dose when using an inhalable product.

When starting out with cannabis products, it is always important to find the right dose (measured in milligrams or 'mgs' of CBD) for you as well. There are many theories as to where to start, but we have found that a good starting CBD dose is equal to ¼ of your body weight. So, a 200 lb person can start with 50mg of CBD per day and adjust up or down from there, in 10 mg increments. We also recommend using a consistent dose for 7-10 days to see if that is the right spot for you. Luckily, using too much CBD at a time can only provide a little sleepiness, so you are able to test out the efficacy of each product knowing that you won't have a mind-altering experience and will be able to remain anxiety-free any time of the day.

If you are in the area and would like to learn more about how cannabis works, please visit The Leaf, members in the Wellness Village since June 2020. In addition to having your questions answered by their professional and highly trained Cannabis Consultants, until August 31st they are giving 10% off for all customers from PRO. For their online website use promo code "VILLAGE10" or for in-store just let them know you are a member of PRO and they'll apply the discount at the store. They encourage guests to stop by and ask any cannabis questions they may have.

Parkinson's Resource Organization (PRO), through its WELLNESS VILLAGE (**ParkinsonsResource.org/the-wellness-village**) has begun its campaign to populate all categories of professionals that provide services or products to people with Parkinson's or their caregivers. If you refer a professional into the WELLNESS VILLAGE that has helped you or your family gain "quality of life," alleviate symptoms, helped you through the Parkinson's Journey in some fashion and therefore wants to and can help others, and if that professional becomes a subscriber, we will thank you with some tokens of our gratitude.



3

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COMMUNICATION WHILE WEARING A MASK

Sharon Krischer

In a conversation with Lauren Simmons of PD Buzz in Orange County, California, we discovered that we were both audiologists in our past lives.

We have both gone on to do other things, but we are still audiologists at heart. We talked about how much more difficult communication is when wearing a mask or scarf over our mouths, which can present a real challenge for people with Parkinson's.

Parkinson's and soft voices

Before the COVID-19 quarantine, many of us already had problems common to PD, such as a soft voice and masked expression. That is compounded by the fact that we, or our spouses, also have hearing losses common with aging. Add a mask and 6-foot social distancing and communication becomes so much more difficult.

Wearing a mask muffles our already soft voices. I noticed when I wear a mask, it is almost impossible for Mr. Twitchy to understand me. He has a hard enough time hearing me under normal circumstances.

When I am wearing a mask, another important piece of communication goes missing – visual clues. Visual clues are so important, even for those with great hearing. So he can't hear me, he can't see my lips move. He also cannot see me smile or make other facial expressions when I am wearing a mask.

Non-verbal facial expressions

Lauren recounts a recent trip to the grocery store: "At the store, I realized how difficult it was to communicate in my usual way. I no longer knew what someone meant when they stopped and nodded to me. I couldn't see their whole face. Were they pausing to let me go cont. on page 6

TREATMENTS INADEQUATE FOR PEOPLE WITH LATE-STAGE DISEASE, STUDY SAYS

Marisa Wexler

Reprinted from BioNews Services / Parkinsons News Today

Current Parkinson's treatments are insufficient for people with late-stage disease, inadequately controlling for many notable motor and non-motor symptoms, a study in these patients across Europe reports.

The study, "The late stage of Parkinson's — results of a large multinational study on motor and non-motor complications," was published in *Parkinsonism & Related Disorders*.

Although therapies like levodopa — its most widely prescribed treatment — effectively manage Parkinson's symptoms, they tend to lose effectiveness over time. Off periods (times during which symptoms are not controlled by medication) are experienced by about 40% of people diagnosed with Parkinson's within four to six years, and about 90% of those with a disease duration of more than 10 years.

To better understand how the disease is experienced in the long term, researchers evaluated 692 people with Parkinson's in six European countries. All were diagnosed at least seven years ago (average disease duration, 15.4 years).

Their daily levodopa dose was a mean equivalence of 874.1 mg.

Falls were the most commonly reported symptom, experienced by 82% of those assessed. These included falls related to freezing (16%), falls unrelated to freezing (21%), and falls both related and unrelated to freezing (45%). Falls were reported as "frequent" by about a quarter (26%) of the people assessed.

Off-periods were present in 68% of these patients and experienced by 13% for at least half of each day.

Many reported moderate-to-severe severe difficulties in turning in bed (51%), speech (43%), swallowing (16%), and tremor (11%). More than half also reported experiencing fatigue, constipation, urinary symptoms and nocturia (waking up to urinate at night), and problems with concentration and memory.

About a third (37%) of these people had dementia, and 63% experienced hallucinations or delusions, which were severe in 15%.

Long-term levodopa use is known to sometimes cause involuntary movements, referred

4

Issue No. 332

Newsworthy Notes

July 2020

THE NEUROGENIC BLADDER A common problem in Parkinson's

Definition: The Neurogenic bladder is a dysfunction that results from interference with the normal nerve pathways associated with urination.

The most common symptoms of neurogenic bladder are:

- ✓ Urinary tract infection (UTI)
- ✓ Kidney stones.
- ✓ Urinary incontinence (unable to control urine)
- ✓ Small urine volume during voiding.
- \checkmark Urinary frequency and urgency.
- ✓ Dribbling urine.
- \checkmark Loss of feeling that the bladder is full.

In a normal bladder, the muscles and nerves of the urinary system work together to hold and release urine at the right time. Nerves carry messages between the bladder and the spinal cord and brain. The messages tell the muscles of the bladder to either tighten or release. In neurogenic bladder, these nerves do not work the way they should.

Any number of things can cause a neurogenic bladder, probably the most common are:

- ✓ Diabetes
- ✓ Infections
- \checkmark Accidents that cause injury to the brain or spinal cord
- ✓ Genetic nerve problems
- ✓ Heavy metal poisoning
- ✓ Brain or spinal cord tumors

Because the symptoms of neurogenic bladder may look like other conditions it is advisable to speak with your healthcare provider for an accurate diagnosis and treatment plan.

If your healthcare provider, typically a urologist, thinks you might have a neurogenic bladder, s/he will want to check your brain, spinal cord, and bladder. S/he will review your health history and do a physical exam, and then proceed to other tests like:

- ✓ X-rays of the skull and spine. This imaging test uses invisible energy beams to make images of tissues, bones, and organs.
- \checkmark Imaging tests of the bladder and ureters
- ✓ Ultrasound (also called sonography). This imaging test uses high-frequency sound waves to create images of the organs on a computer screen.
- ✓ Cystoscopy. Where a thin, flexible tube and viewing device is put through the urethra to examine the urinary tract. It checks for structure changes or blockages, such as tumors or stones.
- ✓ Tests that involve filling the bladder, such as urodynamics. These tests show how much the bladder can hold and check to see if it fully empties.

Treatments for neurogenic bladder vary depending on the cause. They are aimed at preventing kidney damage and may include:

- ✓ Medicines
- \checkmark Emptying the bladder with a catheter at regular times
- ✓ Preventive antibiotics to reduce infection
- ✓ Placing an artificial cuff around the neck of the bladder which can be inflated to hold urine and deflated to release it
- \checkmark Surgery to remove stones or blockages
- \checkmark Botox injections into the bladder muscle

✓ Placement of an electrical device to stimulate or slow down bladder activity

- Symptoms often linked to a neurogenic bladder:
- \checkmark Urine leakage often happens when the muscles holding urine in do not get the right message.
- ✓ Urine retention happens if the muscles holding urine in do not get the message that it is time to pass urine.

Damage to the tiny blood vessels in the kidney may happen if the bladder becomes too full and urine backs up into the kidneys. This causes extra pressure and may lead to blood in the urine.

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END OF LIFE DOULA WHO ARE THEY AND WHAT DO THEY DO?

Glendon Muir Geikie, MSW (Retired), INEDLA

Birth doulas work with pregnant mothers and have been in our health care system a long time. Recently, we have begun to look at the other end of the life cycle, one that is hard to think about and hard to talk about - death.

End of life doulas work with people who have a terminal illness or just want to better prepare for the final phase of this life's journey. Loved ones are included in this process.

End of life doulas (ELDs) bring a deeper, more meaningful, and spiritual experience to the end of life period. We open the option to experience the dying process as a deeply profound and sacred period. In death we recognize and celebrate humanity in all its complexity rather than just an ending. We want to transform the approach away from a medical undertaking to a period of connection, family, love, and humanism.

ELDs have in-depth discussions surrounding the meaning of the individual's life and how that life will be remembered. We call this developing a legacy. This in-depth discussion may look at things such as making and receiving amends, forgiveness and being forgiven, as well as finding the deeper meaning of your life. It also includes rituals the family may want to carry out as ways to remember their loved one. During these discussions ELDs may also work with guided visualization, mindfulness, and meditation.

Rituals are a mainstay in our society and are a bridge from one part of our journey to another. Transitions bring changes and changes arouse emotions. Rituals help keep these emotions in perspective and free people up to experience and focus on other things, in this case, the dying process. ELDs discuss whether there are any rituals the dying person or family want performed, both pre and post death. These rituals may be culturally based, religiously based, or just something the dying person and family want to do. They may be as simple as holding hands, singing, or saying a prayer, to more complex rituals of washing the hands, feet or face post-death.

A major part of the ELD's work is planning the vigil. This encompasses the last days of life when the person is actively dying and transitioning to the next part of their journey. What does the person want in their surroundings? Do they want music playing, and, if so, what music? Would they prefer it to be quiet? Who do they want there with them in their final hours? What do they want others to do during that time with them? Do they want a lighted candle? Do they want to be touched, and if so, where, how and by whom? The plan assures that during this last part of the journey there is always someone with the dying person. There will be someone there to hold their hand as this part of the journey comes to an end.

The dying person's input is crucial, and ideally, they participate in the discussions. All plans are put in writing to assure the dying person's wishes will be carried out as they wanted.

When this work is completed early enough it can be given to your attorney to be incorporated into Trusts, Wills and obituaries. The process is certain to help in life and financial planning.

The intensity of this work brings the ELD close to the dying person and their loved ones. The ELD can meet with the family for two to three months post-death to assist in the grieving process, make referrals if necessary, and plan a final ritual for the ELD and family to say good-bye to each other.

Glendon Muir Geikie Sr. is an End of Life Doula in Palm Springs and a member of the International End of Life Doula Association (INELDA). He is a member of the Wellness Village since June 2020 and can be found at **ParkinsonsResource.** org/the-wellness-village/directory/end-of-life-doula-palm-springs/ WEARING A MASK – cont. from page 4

in front of them? Were they warning me not to get too close? Were they smiling or grimacing? Likewise, others couldn't see my facial expressions."

She says: "Did you know that 70% of communication is non-verbal? This includes body movement and orientation, hand gestures, vocal intonation, eye contact, and facial expressions."

Some ideas for improving communication while wearing masks

- Work on speaking louder and with intent. Singing and vocal exercises help a lot. Don't let the stay at home order deter you. There are online programs to help you out. Try joining a group like the Tremble Clefs or the Parkinson's Voice Project.
- Try to be more expressive with your eyes, hands, or whatever will help give visual clues.
- Don't hesitate to ask someone to repeat themselves. Remember, they are probably having trouble hearing you too.
- If there are distractions, like a vacuum cleaner or loud TV, wait to talk until things are quieter. Don't be afraid to turn down the volume so that you can speak and be understood.
- On Zoom, or other online platforms, use a computer if possible instead of an iPad or phone. It will be easier to see the speakers on a bigger screen. And for those who use it, put on some lipstick. It makes it easier for others to read your lips – but remember it doesn't do any good if you are wearing a mask!
- Using a headset that has a microphone or Airpods will make your voice louder and clearer to those listening.
- If you wear hearing aids, find out if they have Bluetooth. (This was NOT available when I was a practicing audiologist) The Bluetooth brings the speaker's voice right to your hearing aids.
- Because a third of people over 65 have some hearing loss, get your hearing checked annually by an audiologist, along with an annual eye exam.

Even though the restrictions are starting to ease up, it looks like we will be wearing masks and social distancing for quite a while. Keep on smiling, even behind the mask.

6

BITS AND PIECES

TRUE STORIES OF LOVE AND COURAGE: FIVE GREAT LESSONS

Some Important Lessons Life Teaches You

Reprinted from PRO's January 2001 newsletter, recently received from our friend and benefactor, Ken Becker, found in his Memory Box.

Most Important Lesson

During my second month of nursing school, our professor gave us a pop quiz. I was a conscientious student and had breezed through the questions, until I read the last one: "What is the first name of the woman who cleans the school?" Surely this was some kind of joke. I had seen the cleaning woman several times. She was tall, dark-haired and in her 50s, but how would I know her name? I handed in my paper, leaving the last question blank. Just before class ended, one student asked if the last question would count toward our quiz grade. "Absolutely," said the professor. "In your careers, you will meet many people. All are significant. They deserve your attention and care, even if all you do is smile and say 'hello'." I've never forgotten that lesson. I also learned her name was Dorothy.

Second Important Lesson — Pickup in the Rain

One night, at 11:30, an older African American woman was standing on the side of an Alabama highway trying to endure a lashing rain storm. Her car had broken down and she desperately needed a ride. Soaking wet, she decided to flag down the next car. A young white man stopped to help her, generally unheard of in those conflict-filled 1960s. The man took her to safety, helped her get assistance and put her into a taxi cab. She seemed to be in a big hurry but wrote down his address and thanked him. Seven days went by and a knock came on the man's door. To his surprise, a giant color TV was delivered to his home. A special note was attached. It read: 'Thank you so much for assisting me on the highway the other night. The rain drenched not only my clothes, but also my spirits. Then you came along. Because of you, I was able to make it to my dying husband's bedside just before he passed away. God bless you for helping me and unselfishly serving others." Sincerely, Mrs. Nat King Cole.

PRESIDENT'S MESSAGE - cont. from page 1

our safe PayPal donation page at **ParkinsonsResource.org**/ **donate** or mail your donation to our office in Palm Desert, CA.

Until next month, do your social distancing, wash your hands, wear your masks, stay safe, and REMEMBER Canada Day on the 1st, Independence Day on the 4th, World Chocolate Day on the 7th, Bastille Day on the 14th, National Hot Dog Day on the 22nd and National Vanilla Ice Cream Day on the 23rd. The flowers are the Larkspur & Water Lily and the Birthstones: Ruby and Onyx.

ALWAYS remember to CELEBRATE YOU and PRAY FOR OUR TROOPS!

Love, President & Founder

Third Important Lesson — Always Remember Those who Serve you

In the days when an ice cream sundae cost much less, a 10-year-old boy entered a hotel coffee shop and sat at a table. A waitress put a glass of water in front of him. "How much is an ice-cream sundae?" he asked. "Fifty cents," replied the waitress. The little boy pulled his hand out of his pocket and studied the coins in it. 'Well, how much is a plain dish of ice cream?' he inquired. By now more people were waiting for a table and the waitress was growing impatient. 'Thirty-five cents," she brusquely replied." The little boy again counted his coins. "I'll have the plain ice cream," he said. The waitress brought the ice cream, put the bill on the table and walked away. The boy finished the ice cream, paid the cashier and left. When the waitress came back, she began to cry as she wiped down the table. There, placed neatly beside the empty dish, were two nickels and five pennies. You see, he couldn't have the sundae, because he had to have enough left to leave her a tip.

Fourth Important Lesson — The Obstacle in Our Path

In ancient times, a King had a boulder placed on a roadway. Then he hid himself and watched to see if anyone would remove the huge rock. Some of the King's wealthiest merchants and courtiers came by and simply walked around it. Many loudly blamed the King for not keeping the roads clear, but none did anything about getting the stone out of the way. Then a peasant came along carrying a load of vegetables. Upon approaching the boulder, the peasant laid down his burden and tried to move the stone to the side of the road. After much pushing and straining he finally succeeded. After the peasant picked up his load he noticed a purse lying in the road where the boulder had been. The purse contained many gold coins and a note from the King indicating that the gold was for the person who removed the boulder from the roadway. The peasant learned what many of us never understand. Every obstacle presents an opportunity to improve our condition.

Fifth Important Lesson — Giving When it Counts

Many years ago, when I worked as a volunteer at a hospital, I got to know a little girl named Liz who was suffering from a rare and serious disease. Her only chance of recovery appeared to be a blood transfusion from her 5-year-old brother, who had miraculously survived the same disease and had developed the antibodies needed to combat the illness. The doctor explained the situation to her little brother and asked the little boy if he would be willing to give his blood to his sister. I saw him hesitate for only a moment before taking a deep breath and saying, "Yes, I'll do it if it will save her." As the transfusion progressed, he lay in bed next to his sister and smiled, as we all did, seeing the color returning to her cheeks. Then his face grew pale and his smile faded. He looked up at the doctor and asked with a trembling voice, "Will I start to die right away?" Being young, the little boy had misunderstood the doctor; he thought he was going to have to give his sister all of his blood in order to save her. You see, understanding and attitude, after all, is everything.

LATE STAGE DISEASE - cont. from page 4

to as levodopa-induced dyskinesia. Of the people assessed, 45% reported such dyskinesia, though most were mild. In 7%, dyskinesia was moderate to severe.

Another motor problem associated with long-term levodopa treatment is early morning dystonia, or involuntarily muscle clenching. This was reported by 35% of those assessed.

Disability as a whole was most strongly associated with falls, posture problems, bradykinesia (slow movements), cognitive scores, and speech problems.

"These data suggest that current treatment of late stage parkinsonism in the community remains insufficiently effective to alleviate disabling symptoms in many patients," the researchers concluded.

Marisa Wexler ~ Marisa holds an MS in Cellular and Molecular Pathology from the University of Pittsburgh, where she studied novel genetic drivers of ovarian cancer. She specializes in cancer biology, immunology, and genetics. Marisa began working with BioNews in 2018 and has written about science and health for SelfHacked and the Genetics Society of America. She also writes/composes musicals and coaches the University of Pittsburgh fencing club.

Fact Checked By: Ana de Barros, PhD ~ Ana holds a PhD in Immunology from the University of Lisbon and worked as a postdoctoral researcher at Instituto de Medicina Molecular (iMM) in Lisbon, Portugal. She graduated with a BSc in Genetics from the University of Newcastle and received a Masters in Biomolecular Archaeology from the University of Manchester, England. After leaving the lab to pursue a career in Science Communication, she served as the Director of Science Communication at iMM. Infection of the bladder, ureters, or kidneys often results from urine that is held too long before it is passed out of the body.

To help make your diagnosis and treatment more affective, when you visit to your healthcare provider:

- \checkmark Know the reason for your visit and what you want to happen.
- ✓ Before your visit, write down questions you want answered.
- ✓ Bring someone with you to help you ask questions and remember what your provider tells you.
- ✓ Ask the Provider for permission to audio tape the visit, or;
- ✓ At the visit, write down the name of any new diagnosis, and any new medicines, treatments, or tests. Also write down any new instructions your provider gives you.
- ✓ Know why a new medicine or treatment is prescribed, and how it will help you. ESPECIALLY know what the side effects are.
- ✓ Ask if your condition can be treated in other ways.
- \checkmark Know why a test or procedure is recommended and what the results could mean.
- \checkmark Know what to expect if you do not take the medicine or have the test or procedure.
- ✓ If you have a follow-up appointment, write down the date, time, and purpose for that visit.
- ✓ Know how you can contact your provider if you have questions.
- ✓ A second opinion may also be helpful this is not your automobile, this is your body.

PRO CALENDAR / JULY 2020

Wed July 1 CANADA DAY

Sat July 4
INDEPENDENCE DAY

Mon July 6 VIRTUAL Caregiver Only 10:00 AM – 11:30 AM

Tue July 7 WORLD CHOCOLATE DAY

> Tue July 14 BASTILLE DAY

Wed July 15 VIRTUAL Village Meeting 4:00 PM – 6:00 PM

Mon July 20 VIRTUAL Caregiver Only 6:00 PM – 7:30 PM

Wed July 22 NATIONAL HOT DOG DAY

Thu July 23 NATIONAL VANILLA ICE CREAM DAY

Optimism is going after Moby Dick in a rowboat and taking the tartar sauce with you. July 2020 / Issue No. 332 / Published Monthly

Parkinson's Resource Organization

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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.