Hagerstown, MD and the Four-State Area

Monthly Newsletter

March 2017

Visit Our Website at: www.fareshare.net/Parkinsons/

Visit us on Facebook

March Meeting

Volume 7, Issue 3

Local Support Group Contacts

This Month's Meeting

There were **57** attendees at our February meeting, including **4** new people. This meeting featured two representatives of Fox Rehabilitation, In-Home Therapy.

MARY LEWIS M.S., OTR/L, CPAM, an Occupational Therapist who has been with FOX for a little over two years and splits her time between a local assisted living facility and homes here in Hagerstown making house calls.

HANNAH PARSONS OTR/L, an Occupational Therapist who started seeing a lot more patients with Parkinson's in Fall of 2015.

They both became LSVT BIG certified together in March 2016 to better serve their patients and have been using it with great success with their clients with Parkinson's Disease.

Joyce Garland won the \$10 gift certificate donated to the group by the owners of the Western Sizzlin' Restaurant. Thanks to Paul and his family for being so generous.

Thanks to **Ecile Shaw** for delivering the prayer before lunch.

NOTE: MEMORY CAFÉ'S NEW HOURS ARE FROM 11:30 am TO 1:00 pm. SEE PAGES 7 AND 8 FOR MORE DETAILS.

Dean Cook, Meeting Facilitator

Hagerstown Parkinson's Support Group 497 Hogan Drive Martinsburg, WV 25405

Phone: 304-268-1623 Email: home2wv@yahoo.com

MARK YOUR CALENDARS

Join us for our next
Parkinson Support Group Meeting
at the

Western Sizzlin Steakhouse 17567 York Road, Hagerstown, MD

Thursday, March 2, 2017, 11:45 AM

Jaclyn Garrish
Speech-Language Pathologist

Newsletter Highlights

Tips for Making Life Easier (Page 3)
Heads Up, Caregivers! (Page 4)
A New DBS System Approved (Page 5)
The Worse Drugs for PD (Page 6)
Detailed Event Listing (Pages 7 & 8)

Future Meetings

2017

Mar 2, Jaclyn Garrish, Speech-Language Path. Apr 6, Sandra Mertz, Neuro. Ortho. Hypotension May 4, Patients & Caregivers Breakout Sessions Jun 1, Colleen Brown, RN, BSN, Medtronic DBS Jul 6, Dory Kennedy, Right at Home Aug 3, TBD

Sep 7, Patients & Caregivers Breakout Sessions Oct 5, Dr. Stephen Ryan, Physical Therapist Nov 2, Dr. Kelly Mills, Movement Disorder Specialist, Johns' Hopkins University

Dec 7, Christmas Party & Gift Exchange

ATTEND A SUPPORT GROUP MEETING!



Local Support Group Information is on Page 7.

Dean's Corner

The speakers at our February meeting were Mary Lewis and Hannah Parsons who are Occupational Therapists with Fox Rehabilitation in Hagerstown.

Fox provides physical, occupational, and speech therapy in ten states and specializes in "in home care." Their presentation was made even timelier because they have an intimate knowledge of the challenges Parkinson's patients' face in the home that could lead to falls.

The Fox program emphasizes increased strength, improved cognition, and decreased fall risk while taking into consideration the patient's pharmacological status, thus maximizing the benefit of peak drug effectiveness.

I would like to thank all of you who helped me out at the February meeting.

Dean Cook Meeting Facilitator

The Hagerstown Parkinson's Support Group

Group Facilitator: Art Guyer 22215 Troy Lane Hagerstown, MD 21742 240-625-2722 4Parkinsons@gmail.com

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is supported in part by:
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The Hagerstown Parkinson's Support Group

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the Western Sizzlin for supporting our group.

Thanks to Paul Romsburg, his family, and staff of

17567 York Road Hagerstown, MD Stop by for lunch or dinner to support them! UNSUBSCRIBE: If you no longer wish to receive this newsletter, please contact the Group Facilitator, Art Guyer.

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Caregiver's Breakfast

Our Caregivers' Breakfasts are on the 3rd Monday of every month.

This month the breakfast is scheduled for Monday, February 20 at 8:30 AM at the Hagerstown Family Diner. This restaurant is located at 431 Dual Highway near the Best Western Grand Venice Hotel. Contact Art if you need information or directions.

You are encouraged to participate if possible. It gives caregivers the opportunity to seek advice in a safe environment and it allows feedback for future meetings and activities. If you need transportation, let us know and we will take care of it.

Need Transportation?



If you need transportation to our meetings or other events, please let us know.

If you no longer drive or have limited your driving and would be interested in getting a ride to one of our activities from another member, send me a note or call me and I will post a list. I am hoping there will be other members happy to help out and offer transportation.

Thanks to those good people who are already providing transportation to others on a regular basis now. You make this group special.

Ride Needed List:

Larry Pereschuk 3820 Trego Mountain Rd Keedysville, MD (301-432-2722)

Cancellation Due to Weather

Our weather cancellation policy is based on the Washington County School System. If the Washington County Schools announce they are closed for the entire day, then we will not have our regular monthly meeting. Also, I will send an email out by midmorning if it is to be cancelled; those without email should listen to the TV and Radio for the school announcements.

MAPS Ambassador

The Maryland Association for Parkinson Support (MAPS) has set up points of contact (Ambassadors) in each area to create visibility for MAPS in the community and to keep the Parkinson's Disease community abreast of any new activities or events planned. **Dean Cook** is our area's Ambassador.

We would like to enhance Dean's effort by getting members of our Support Group to contact businesses, offices, schools, churches, civic groups, HOAs, etc. So, we are looking for volunteers to help distribute materials.

Contact Dean for information or volunteer to help at 304-268-1623 or by email at home2wv@yahoo.com.

PFNCA 2017 Symposium

Registration for the 2017 *Parkinson Foundation of the National Capital Area* Symposium is now open. The program will be held March 25th in Falls Church, Virginia. Please register early; this program will sell out.

You can learn more and register by clicking <u>here</u> or by calling the PFNCA office at (301) 844-6510.

PD Group Bowling

We will not be bowling in February, but we are planning to try it again in March. We need to get some more bowlers involved to make it a worthwhile event. You do not have to be a good bowler to get in the game. In fact, newbies are welcome.

We bowl at Southside Bowl, 17325 Virginia Avenue, Hagerstown, MD. Again this year, the lanes will be charging only \$2 per line including shoes.

Birthdays in February

Happy Birthday to members who have birthdays this month. We announced your names and sang happy birthday to



you at our meeting; sorry if you missed it.

So we can celebrate <u>your</u> birthday at our meetings, contact Art who keeps a master schedule for the group. No years, just month and day!

In The Hospital?

If you or your spouse, or a member you know is not doing well and/or is in the hospital, please let us know. We like to visit our friends when possible. Barb Harrell is our Sunshine Committee of One and is responsible for sending out cards as appropriate.

Call Barb at 301-797-7845 or contact Art if you know someone in need.



We understand Frank and Vi

McConnell's Granddaughter suffered serious injuries in an autombile accident. Please keep the entire family in your thoughts and prayers.

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Parkinson's Disease: Tips for Making Life Easier

Based on the Book by Shelley Peterman Schwarz (2002)

Making Your Home Safe and Accessible: The Bedroom - Setting Up the Bedroom

Turning over in Bed. Use satin bed sheets because their slippery surface makes it easier to turn over in bed. Flannel sheets make it more difficult than standard cotton percale sheets. Consider installing a trapeze or harness that hangs over the bed so you can grab hold of it and lift and turn yourself. Another thing that might help is to place a long, sturdy cardboard box under the covers at the foot of the bed. Elevating the covers will keep pressure off your feet and legs, and allow you to turn without getting tangled up in the bedding.

Helping Hands. If you need to move or reposition someone with PD in bed, this technique works pretty well.

- 1. Create a draw sheet by placing a flat sheet folded to fit from the chest to the thighs on the bed over the fitted sheet. This is what you use for leverage underneath the person.
- 2. Grab the sheet with your palms up and move/pull the person and draw sheet toward you.
- 3. To do a two-person lift to reposition the person up or down in bed, count grab the sheet as above, count to three, and together slide the person as needed.

This and That Thoughts on my Mind by Art Guyer:

You all are on my mind. So many of our members have suffered falls and other mishaps this year, we need to work hard this year to promote fall avoidance and safety. Whether you have PD or not, it is a trauma that is difficult to overcome. And once again Doris and I want to thank all of you who have kept us in your prayers and good thoughts and for the many calls, messages, cards, etc. we have received.

Take care..... Art

PD Exercise Class and Support Group

A new Parkinson's Support Group will begin meeting in Chambersburg, PA on February10, 2017 at 4:00 pm. The location is at Physical Therapy Etc., right behind the new Sheetz building on 142 Franklin Farm Lane. At the first meeting the presentation will be on the LSVT BIG program and the positive impact of exercises on Parkinson's management. The contact persons are Kathy Smith at 717-737-8320, Kathy.smith@embarqmail.com and Jan Benedick, PT, at 717-263-5147 and by email at ibenedick@physicaltherapyetc.com. They are also going to implement a Parkinson's Disease Exercise Class.



Caregiver Support Group: The Commission on Aging has a Caregiver Support Group that meets quarterly at the Commission on Aging. It is free to attend. This newly formed group is meant to serve as a means of support for those who give of themselves as caregivers. It will give caregivers an opportunity to learn about community resources available and will give them the opportunity to connect with others who understand the caregiving journey.

Save the Date for the next meeting scheduled for April 11 @ 10:00 a.m. (Call 301-790-0275 ext. 221) Topic: Dynamics of Family Caregiving and the roles that Family Member takes on.

Speaker: Chis Fisher, Delegating RN at Right at Home In-Home Care and Assistance.

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Heads Up, Caregivers: Caregiver's Role in PD Treatment and Care

By Dennis Thompson, Jr. EverydayHealth.com

PD is a highly individualized disorder, in which no two people have the exact same symptoms. As a caregiver, you are witness to what your loved one is going through — that puts you in the perfect spot to communicate those symptoms effectively to the patient's neurologist or primary care doctor. By doing so, you can make a tremendous contribution to your loved one's PD treatment. It goes the other way, too. You also can help execute the doctor's PD treatment plan by making sure the patient takes medication on time and completes all necessary exercises.

Monitoring Parkinson's Medication

PD is a chronic neurological disorder with no known cure. Medical experts have come up with PD treatments that effectively alleviate symptoms, but the patient you're caring for may need your help keeping up with them.

Parkinson's medication works on the biochemistry of the brain — very precise dosages must be delivered at precise times. Taking Parkinson's medication even a few minutes late can result in debilitating symptoms like muscle rigidity and tremors.

On top of that, Parkinson's patients might take other drugs to deal with issues like depression and sleeplessness. The patient faces the prospect of taking many different drugs at varying times, and even a minor slip in dosing could cause symptoms to re-emerge. You can do your loved one a huge service by crafting a schedule for all the medications taken, and making sure the plan is followed.

Monitoring Exercise and Physical Therapy

New research has found that exercise might be very valuable to people with PD — perhaps even as beneficial as medication. Exercise helps keep the muscles and joints limber and appears to promote neurological health in Parkinson's patients. In addition, physical therapy can help your loved one maintain independence for as long as possible. You can help by assisting with the home-exercise program or transportation to physical therapy on a regular basis.

What to Watch For

Caregivers serve an invaluable role as the doctor's day-to-day eyes and ears. As a caregiver, you should watch out for the following:

<u>Any increase in symptoms</u>. If your loved one is taking medication properly but the number or severity of symptoms is increasing, you need to report it to the doctor. Parkinson's medication or dosage may need to be adjusted. Specific symptoms you should watch for include tremors (uncontrollable shaking) and rigidity (trouble moving the limbs). You also should tell the doctor if your loved one is having problems walking, talking, swallowing, or remembering information.

<u>Changes in mood</u>. Depression is a problem for at least half of all Parkinson's patients — it's so prevalent that doctors suspect depression might be a true symptom of the disease. Patients also are known to suffer from periods of denial, anxiety, and stress. You should pay attention to these moods and talk about them with your loved one and the doctor. The patient might benefit from antidepressant medication or from counseling.

<u>Sleep problems</u>. Parkinson's patients tend to have a troubled relationship with sleep. The disease and their Parkinson's medication can make them incredibly drowsy during the day and then keep them up all night. Fatigue can worsen symptoms and prevent the person from focusing on their own well-being. If you notice your loved one isn't sleeping well, talk about it with the patient and the doctor. The doctor might prescribe a sleep aid or adjust the Parkinson's medication. You also can help by keeping the patient active during the day and by establishing a regular bedtime routine that promotes quality sleep.

And remember, your role as caregiver is vital to the well-being of your loved one. Your observations can help the doctor evaluate PD treatments and decide whether they should be changed, which will undoubtedly help your loved one's situation.

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St. Jude Medical Infinity™ DBS IPG Neuromodulation: Deep Brain Stimulation

Inspired by Patients, Engineered with Physicians: Provide patients with streamlined, personalized deep brain stimulation (DBS) therapy with the St. Jude Medical Infinity™ DBS system. It delivers proven therapy for the management of symptoms associated with Parkinson's disease and essential tremor. The Infinity DBS system combines innovative directional lead technology and a wireless platform with enhanced patient comfort — including the smallest bilateral primary cell generator on the market — for one of the most advanced DBS platforms available.

Directional lead technology: The St. Jude Medical Infinity DBS system includes segmented, directional lead technology designed to allow precise steering of current towards desired structural areas to optimize patient outcomes and reduce side effects.

Only wireless iOS software mobile platform: The Infinity DBS system also features the first and only DBS iOS software wireless platform in the world, designed to streamline therapy management for a discreet, personalized experience for patients. It is also the only system on the market to use an iOS‡ software platform and Apple‡ mobile digital devices as programming platforms and offers the broadest programming range in the market.

Enhanced comfort: The St. Jude Medical Infinity DBS system's sleek, durable design helps improve patient comfort. There have been zero reported fractures in the global market with eXtend™ lead extensions technology and it is the smallest bi-lateral conventional cell IPG on the market with the St. Jude Medical Infinity™ 5 series IPG measuring 25% smaller than competition.

Dean Cook read this poem at the February meeting and several of you asked to have a copy. Here it is:

I Will Win

by Kenneth Nye Relating to Parkinson's Disease Diagnosis.

It begins as nothing more than a feeling that something is wrong.

(Wonderful, how the body talks to you.) At first, there are things I can't identify.

Then, reaching for a napkin, I see it---a hitch, a ratcheting of my unfolding arm as I extend it across the table.

Sitting on his examination stool, the doctor wheels over to look me in the eye. "Mr. Nye, you have Parkinson's disease."

It doesn't register. "Parkinson's is a chronic, progressive disease...." Is he talking about me?

A chronic disease. It has no cure.

A progressive disease. It will get worse.

It doesn't register.....at first. When it does, there is no future. Nothing is fun. What's the point?

But in time I learn that feeling sorry for myself doesn't make me feel any better;

there is absolutely nothing I can do to make it go away.

So I learn to live with it, live around it, ignore it,

occasionally tell it to go do something obscene,

show it off and then put it to shame.

It's like living with a roommate I can't stand.

And I learn that the only way to win

is to treat it with disdain, to concede lost ground but to shrug it off,

to use it as a lesson in biology and anatomy, and as evidence of the miracle of the human body.

And I also learn that my world, even with Parkinson's, is gloriously full

of family and friends, love and devotion, beauty wherever I look,

joy, and, always and everywhere, nature's wonders.

This is not a battle of the flesh. This is a battle of the spirit. So, as the years move along and my chronic, progressive companion continues to wheedle his way into my life,

I will adjust with a shrug. And I will win.

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Parkinson Treatment Tips A Critical Reappraisal of the Worst Drugs in Parkinson's Disease

By Michael Okun (2011)

What are the worst drugs for Parkinson's disease patients? Couldn't a simple list be assembled and disseminated to the Parkinson community? Recently Ed Steinmetz, an experienced neurologist in Ft. Meyers, FL pointed out to me, a list approach published in the Public Citizen Newsletter (www.worstpills.org). The approach was to list every drug associated with a single confirmed or unconfirmed symptom of Parkinson's disease or parkinsonism. Parkinson's disease is defined as a neurodegenerative syndrome (common symptoms include tremor, stiffness, slowness, posture and gait issues), whereas parkinsonism encompasses a wider net of drug induced and other potential causes. In parkinsonism symptoms are similar to Parkinson's disease, but patients do not have Parkinson's disease. Patients and family members confronted with a simple "drug list" approach may falsely conclude that most medicines are bad for Parkinson's disease, and that any medicine may cause parkinsonism. This concept is in general, incorrect. Although the approach is well-meaning, it is in need of a major revision, as Parkinson's disease and parkinsonism are too complex to summarize by simple lists. In

this month's column I will try to summarize the key information that patients and family members need to know about the "worst pills," for Parkinson's disease and parkinsonism.

It is well known that drugs that block dopamine worsen Parkinson's disease and also worsen parkinsonism, whereas dopamine replacement therapy (Carbidopa/Levodopa, Sinemet) may improve symptoms. One of the big issues facing many Parkinson's disease patients is psychosis (hallucinations, illusions, and behavioral changes such as paranoia). How does one concomitantly administer dopamine replacement therapy, which may in some cases induce psychosis, and at the same time administer dopamine blocker drugs aimed at alleviating psychosis? Will the drugs cancel each other out? There are two dopamine blockers that will not cancel out dopamine replacement, and therefore not appreciably worsen Parkinson's disease. One is Quetiapine (Seroquel), and the other is Clozapine (Clozaril). Clozapine is the more powerful of the two drugs, but it requires weekly blood monitoring. Other classical dopamine blocking drugs, also referred to as neuroleptics (e.g. Haldol), worsen Parkinson's disease and parkinsonism.



Patients may not be aware that some common drugs used for conditions such as headache or gastrointestinal dysmotility may also block dopamine, and concomitantly worsen Parkinson's disease, or alternatively result in parkinsonism. These drugs include Prochlorperazine (Compazine), Promethazine (Phenergan), and Metoclopramide (Reglan). They should be avoided. Also, drugs that deplete dopamine such as reserpine and tetrabenazine may worsen Parkinson's disease and parkinsonism and should be avoided in most cases. Substitute drugs that do not result in worsening of parkinsonism can be utilized, and these include Ondansetron (Zofran) for nausea, and erythromycin for gastrointestinal motility.

Antidepressants, anxiolytics, mood stabilizers, thyroid replacement drugs, and antihypertensives are in general safe, and do not worsen Parkinson's disease and parkinsonism. They appear commonly on lists such as that provided by the Public Citizen, but these lists are misleading. There may be rare reactions that lead to worsening of Parkinson's disease or parkinsonism with these drugs, but these are very rare occurrences. The bigger issue is drug-drug interactions. The most commonly encountered in Parkinson's disease is mixing a MAO-B Inhibitor (Selegline, Rasagiline, Azilect, Zelapar, Selegiline Hydrochloride Dissolvable) with a pain medicine such as Meperidine (Demerol). Also, MAO-A Inhibitors (e.g. Pirlindole) should not be taken with antidepressants. And finally it should be kept in mind that in rare instances mixing an antidepressant with another class of drugs can in select cases result in a serotonin syndrome. Finally, remember, there are very common "other" side effects of antidepressants, anxiolytic drugs, mood stabilizers, thyroid replacement drugs, and antihypertensives.

In summary, the list approach to the worst pills in Parkinson's disease and parkinsonism needs a critical reappraisal. A more refined approach would take into consideration the complexities of Parkinson's disease and parkinsonism, and would appreciate that with physician guidance, and few exceptions, most drugs can be safely and effectively administered in Parkinson's disease and parkinsonism.

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Reminders of upcoming events as of Sunday, February 05, 2017

REGULAR EVENTS:

Event	Date, Time, Location	Contact for Information
Hagerstown Parkinson's Support Group Meeting	1 st Thursday @ 11:45 AM Western Sizzlin Restaurant, Hagerstown , MD	Art Guyer, 240-625-2722 4Parkinsons@gmail.com
Cumberland PD Support Group Meeting	1 st Friday @ 4:00 PM Grace Memorial Church, Cumberland , MD	Toby Feddis, 301-729-5569, lansgranny2007@yahoo.com Pam Dolly, 304-738-2196, pameladolly89@gmail.com
Winchester PD Support Group Monthly Meeting	2 nd Tuesday @ 11:00 AM Winchester Church of God, Winchester, VA	Cheryl Reames, 540-662-4632 winchesterparkinsons@gmail.com
Central PA PD Support Group Meeting	2 nd Wednesday @ 1:30 PM Health South Rehab Hospital, Mechanicsburg, PA	Dan Yother, 304-676-2053 oldred714@verizon.net
Hagerstown Parkinson's Support Group Caregivers' Breakfast	3 rd Monday @ 8:30 AM Hagerstown Family Diner, Hagerstown, MD	Art Guyer, 240-625-2722 4Parkinsons@gmail.com
Frederick PD Support Group Monthly Meeting	3 rd Wednesday @ 1:00 PM Mount Pleasant Ruritan Club, Walkersville , MD	Janet Silvious, 301-831-5609 janet@fifpdsg.org
Gettysburg PD Support Group Meeting	3 rd Wednesday @ 1:00 PM WellSpan Adams Health Center, Gettysburg, PA	Paula Chaplin, 717-337-4407 pchaplin@wellspan.org
Frederick County Parkinson's Early Onset or Newly Diagnosed Community Support Group	3 rd Saturday Time and Location Varies	Deb Bergstrom, 301-712-5381 bergstromdf@gmail.com
Cross Keys Parkinson's Support Group	3 rd Thursday @ 2:15 PM Cross Keys Village, New Oxford, PA	Daune Wynn, 717-495-5671 wynn574@crosskeysvillage.net
Chambersburg Parkinson's Support Group	Meets every TBD Meets at Physical Therapy Etc. 142 Franklin Farm Lane, Chambersburg, PA	Kathy Smith, 717-737-8320, Kathy.smith@embarqmail.com Jan Benedict, 717-263-5147

OTHER EVENTS:

- Monday, February 20, 2017, 8:30 10:00 AM, Caregivers' Breakfast: Hagerstown Family Diner, Hagerstown, MD. Contact Art Guyer for information at 4Parkinsons@gmail.com or 240-625-2722.
- Thursday, February 23, 2017, 11:30 AM 1:00 PM Memory Café: Free lunch, crafts and meeting at the Otterbein Church on East Franklin Street in Hagerstown. Contact David Kukor for information at 301-639-3166 or dkukor@ahcglobal.com.
- Thursday, March 2, 2017, 11:45 AM, Hagerstown Parkinson's Support Group Meeting: Jaclyn Garrish, Speech-Language Pathologist, Total Rehab. Contact Art Guyer for information at <u>4Parkinsons@gmail.com</u> or 240-625-2722.
- Monday, March 20, 2017, 8:30 10:00 AM, Caregivers' Breakfast: Hagerstown Family Diner, Hagerstown, MD. Contact Art Guyer for information at 4Parkinsons@gmail.com or 240-625-2722.
- Thursday, March 23, 2017, 11:30 AM 1:00 PM Memory Café: Free lunch, crafts and meeting at the Otterbein Church on East Franklin Street in Hagerstown. Contact David Kukor for information at 301-639-3166 or dkukor@ahcglobal.com.
- Saturday, March 25, 2017, 10:00 AM 4:15 PM, Parkinson Foundation of the National Capital Area Symposium, Falls Church, VA. To register for this event, call 703-734-1017 extension 1 or 301-844-6510 extension 1, Monday Friday during the hours

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of 9:00 am and 5:00 pm.

- Thursday, April 6, 2017, 11:45 AM, Hagerstown Parkinson's Support Group Meeting: Sandra Mertz, Lunbeck, Neurogenic Orthostatic Hypotension. Contact Art Guyer for information at 4Parkinsons@gmail.com or 240-625-2722.
- Tuesday, April 11, 2017, 10:00 AM, WCCA Caregiver Support Group meeting. Topic: Dynamics of Family Caregiving and the roles that Family Member takes on. Speaker: Chis Fisher, Delegating RN at Right at Home In-Home Care and Assistance. Call 301-790-0275 ext. 221 for information.
- Monday, April 17, 2017, 8:30 10:00 AM, Caregivers' Breakfast: Hagerstown Family Diner, Hagerstown, MD. Contact Art Guyer for information at <u>4Parkinsons@gmail.com</u> or 240-625-2722.
- Thursday, April 27, 2017, 11:30 AM 1:00 PM Memory Café: Free lunch, crafts and meeting at the Otterbein Church on East Franklin Street in Hagerstown. Contact David Kukor for information at 301-639-3166 or dkukor@ahcglobal.com.
- Thursday, May 4 2017, 11:45 AM, Hagerstown Parkinson's Support Group Meeting: Breakout Sessions, Patients and Caregivers. Contact Art Guyer for information at 4Parkinsons@gmail.com or 240-625-2722.

------Cut Out and Save------

Hagerstown Parkinson's Support Group 2017 Speaker Schedule

Date	Speaker	
January 5	Patients & Caregivers Breakout Sessions	
February 2	Daniel Quirk, DPT, Regional Director, FOX Rehabilitation	
March 2	Jaclyn Garrish, MS, CCC/SLP, Speech-Language Pathologist, Total Rehab	
April 6	Sandra Mertz, Lunbeck, Neurogenic Orthostatic Hypotension	
May 4	Patients & Caregivers Breakout Sessions	
June 1	Colleen Brown, RN, BSN, Clinical Specialist for Medtronic DBS	
July 6	Dory Kennedy, Right at Home, Post Discharge Safety in the Home	
August 3	TBD	
September 7	Patients & Caregivers Breakout Sessions	
October 5	Dr. Stephen Ryan, Physical Therapist	
November 2	Dr. Kelly Mills, Movement Disorder Specialist, Johns Hopkins	
December 7	Christmas Party No Speaker	

MAKE TAX-DEDUCTIBLE DONATIONS TO THE HAGERSTOWN PARKINSON'S SUPPORT GROUP

You can make tax-deductible donations to our support group through the Maryland Association for Parkinson's Support, Inc. (MAPS), a non-profit organization that can receive charitable contributions for Parkinson's support groups, issue tax-deductible receipts to donors, and administer the funds to the designated group.

To contribute, make your check payable to MAPS. On the <u>memo line write Hagerstown PD Support</u>. You <u>must write that</u> to assure the money goes into the account that MAPS has set up for our support group.

Mail donations to: MAPS Treasurer, Box 450, Brooklandville, MD 21022