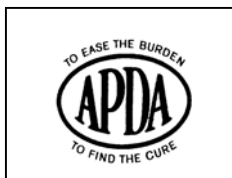


American Parkinson Disease Association, Inc
5368 Fredericksburg Rd, Suite 200
San Antonio, TX 78229-6108



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AAPSG Calendar, October 2003 – December 2003

All Support Group Meetings are for PD Patients,
their Caregivers, Family and Supportive Friends

-- **Alamo Area Parkinson's Support Group**

Second Monday every month, 1 PM

Sunset Ridge Church of Christ, 95 Brees Boulevard

Oct 13 - **NO MEETING COLUMBUS DAY**

Nov 10 - Novartis discusses new med Stalevo

Dec 8 - Christmas Party, Pot Luck Lunch, Each
person bring a gift to pass (\$5 or less)

-- **Young-Onset Parkinson's Support Group**

Second Saturday every month, 10 AM

Thornton Elementary School, 6450 Pembroke

Oct 11 – Novartis discusses new med Stalevo,
Brunch provided

Nov 8 - General Discussions

Dec 13 – Christmas Party, Each person bring a gift
to pass (\$5 or less)

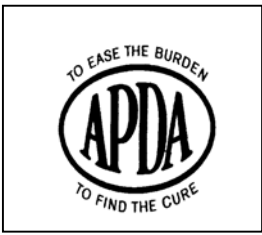
DBS Support Group “Live Wires”

Fourth Saturday every month, 10 AM. Location
varies; call Sandra Farris, 830-257-3811

sandyfar@omniglobal.net or Judy Hoopman 830-
997-7705 ralanh@ktc.com for current location.

**PLEASE NOTIFY US IF YOUR LOCAL
ADDRESS OR E-MAIL ADDRESS CHANGE**

Last date for submitting items for the next
newsletter is 2 Dec 2003. Send material to Doak
Walker, 7650 Hwy 90W #40, San Antonio, TX
78227-4059 or e-mail to shalom5@earthlink.net.



American Parkinson's Disease Association, Inc

Alamo Area Parkinson Support Groups

5368 Fredericksburg Rd, Suite 200, San Antonio, Texas 78229-6108
Phone 210-344-8828, www.aapsq.org

Quarterly Newsletter, October 2003

Editor: Dianne Johnson

Publishers: Carla & Doak Walker

Local News

Executive Board, 2002-2004

| | |
|----------------|----------------|
| President | Fred Dyas |
| Vice President | Cliff Hall |
| Secretary | Joan Duval |
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At-Large Members

| | |
|----------------|--------------------|
| Brad Sledge | Roger Johnson |
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| Rob Rodriguez | Isabel Fears |
| Johnny Jackson | Melinda Rodriguez |
| Doak Walker | Carla Walker |

You may leave a message for any AAPSG Officer or Board Member at 210-344-8828.

Fourth Annual Ray Ellison Gala

The Gala was held on the 19th of September at The Plaza Club and was a tremendous success. Music was provided by The Grapes of Wrath. Everyone had a great time while raising money for PD research. It is estimated that over \$24,000 was raised during the event.

Special thanks go to Ellison Management LLC, Bonnie Ellison, Dr & Mrs Arnold Vardiman, Neurology Associates of SA Dr Eric Pappert, Glaxo-SmithKline, Medtronic, Pfizer, GMAC, Pride PHC Services, Corner Copy & Print, A/Plus Family Care, Wells Fargo, Grapes of Wrath, The Plaza Club, Sherri Ortiz, Lynn Brchlemann, Kim Johnson, Jennifer & John Boyen, Ursula Pari KSAT (Mistress of Ceremony), Amy Duval, Shirley Knothe, Joan Duval, Rob & Melinda Rodriguez. Chairperson for the event was Dianne Johnson, RN, APDA I & R Center.

Our Web Site www.aapsq.org



developing creativity

The AAPSG web site development and hosting is donated by The James Company.

The James Company was founded with the desire to develop creative solutions for business needs. From beginning to end, The James Company combines a passion for technology with an eye for creativity to bring you innovative and customized solutions.

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This newsletter is provided for informational purposes only. The material should not be used for treatment purposes without discussing it with your Doctor. Products, businesses, services, or websites are not endorsed by APDA, or AAPSG.

Membership

Our thanks and appreciation goes out to all of you who support our efforts and desire to both assist you and provide funding for PD research. Membership in AAPSG is only \$2 a month, only \$24 a year for a family membership. We ask you, if you have never joined or have for some reason let your membership lapse, to please join us. Your membership date is after your name on the address label of this newsletter. If there is no date or it is not current we are not counting you as a current member. **We will continue sending you the newsletter and PD information even if you are not a current member, but we do need your help.** It helps if those of you who have computers let us e-mail everything to you. You can join by sending a \$24 check, made out to AAPSG, to Shirley Knothe, 107 Mountain View, Boerne, TX 78006-6228. Please include current address, phone number, and e-mail address.

Power Wheelchairs

The Senior Wheels USA Program is giving away free power wheelchairs to eligible seniors (65 & older) and the permanently disabled. They are provided to those who can't walk or utilize a self-propelled manual wheelchair. Those not eligible for the above program might qualify for the Senior Wheels USA donation program, made possible through donations given by people who no longer need their wheelchair. For info, call 1-800-246-6010. SA Express-News

Rasagiline Approval Expected This Year

Generic drug giant Teva Pharmaceuticals has announced the successful completion of two Phase III trials of Rasagiline in patients with advanced Parkinson's disease (PD). This MAO-B inhibitor—similar to the well-known Eldepryl, but stronger - has the added advantage that it doesn't metabolize into methamphetamine and thus shouldn't cause sleep problems. Each study, which compared single daily dosages of Rasagiline to a placebo as an added treatment to levodopa, demonstrated significant reductions in the duration of the "off" time in which patients are unable to function normally. Rasagiline is now expected to be submitted for regulatory

approval in North America and Europe in the second half of 2003.

Web Sites To Check

For young onset PD www.yopa.org and www.youngparkinsons.com
PD Pipeline – therapies in clinical trials www.pdpipeline.org
Pharmaceutical companies with the largest selling PD drugs. www.pfizer.com , www.gsk.com , www.medtronic.com , www.bristolmyerssquibb.com , www.novartis.com

New Books To Consider

A Family Caregiver's Guide to Planning and Decision Making for the Elderly by James Wilkinson. 260 pages \$16.95.

Quick Tips for Caregivers by Marion Karpinski 217 pages \$24.95.

The Caregiver Helpbook by Vicky Schmall, Marilyn Cleland, and Marilyn Sturdevant 309 pages \$20.

Handwriting a Problem?

You can get pens and pencils at any office supply that are thicker and spongy making them easier to grasp. Use a smooth flowing or felt-tip pen.

Try writing with the hand you don't normally use. Use finger paint, magic markers or chalk to practice writing bigger. Use a clipboard to keep the paper steady when you write.

Use a stick-on label or a rubber stamp when you have to fill out forms with your name and address.

Try printing backwards and upside down. If you are writing a P and are used to starting from top to bottom, try to create the letter from the bottom to the top, and the loop backwards from the middle of the straight stick to the top of it.

Lift Chair Warning

Be careful if you own a lift chair and have limited mobility. Never place the control pad where it could be triggered accidentally. If the chair is accidentally raised to its upper limit you could be dropped to the floor resulting in injury.

Local PD Study

Pharmacia is currently seeking males and females, 30 yrs and older, who have had PD for less than 7 yrs and who are not taking Levodopa, Requip, Mirapex, or Permax.

The purpose of this study is to evaluate the safety and effectiveness of an investigational medication, a dopamine agonist, for the symptoms of PD.

Participation involves at least 12 visits over approx 32 weeks. Qualified participants will receive study-related exams, lab tests, and study medication. Patients who complete the study will have the option of continuing in an open label study. During that time, study meds and study-related medical care for PD will be continued for up to three years or until the study drug is approved.

For more info and an initial phone screening call 210-568-0261. Neurology Clinic of SA, 4410 Medical Dr, Suite 380, San Antonio.

Important To Know

PD slows gastric mobility. Swallowing is prolonged, stomach emptying is delayed, and food traverses through the intestines more slowly than in someone who does not have PD. For this reason, nutrients are better absorbed when small amounts are eaten frequently rather than three large meals a day.

Most patients get more benefit from levodopa when taken on an empty stomach. A tablet, taken prior to eating (even 15 minutes is beneficial) with 4-5 oz non-dairy fluid, is "washed" from the stomach into the small intestine where absorption begins. Think of it as allowing levodopa a "head-start" on absorption vs. the food about to be eaten.

If levodopa causes nausea a small cracker or bite of fruit can be taken with any doses required between meals. Pretzels are excellent because they require no refrigeration. Crystallized ginger can also be nibbled to offset nausea, or in extreme cases of levodopa-induced nausea, Motilium (Domperidone) can be ordered from the UK or Canada. NPF, AsktheDr

Water

Just like the other sensory processes, the natural sense of thirst diminishes with age. Anti-PD drugs also dry out the body. It is important to drink water by the clock, not unlike one would schedule crucial medications. This enhances the absorption of both nutrients and medication, and reduces the risk of dehydration. NPF, AsktheDr

Natural Laxative Recipes:

POWER PUDDING

1/2 cup prune juice
1/2 cup applesauce
1/2 cup wheat bran flakes
1/2 cup whipped topping
1/2 cup prunes (canned, stewed) (Diabetics may use "no added sugar" applesauce and light whipped" topping.) Blend ingredients, cover, and refrigerate. Will keep as long as 1 week. Take 1/4 cup portions of recipe with breakfast. Regulate doses needed.

FRUIT SPREAD

2 lbs raisins
2 lbs currants
2 lbs prunes
2 lbs figs
2 lbs dates
Grind fruit. Mix with 2 -28 oz containers undiluted prune concentrate in large mixer (mixture will be very thick). Put in large-mouth plastic container. Refrigerate.

STANDARD RECIPE

1 cup bran
1 cup applesauce
1 cup prune juice. Mix and store in refrigerator. Take 1 oz per day. Increase or decrease doses as needed.

Recipes taken are from *Geriatric Nursing and Healthy Aging*, by Ebersol/Hess.

OTHER FOODS HIGH IN FIBER:

Prunes, rhubarb, apples, oranges, bananas, carrots, cabbage, greens, potatoes with the skin, oatmeal, whole grain cereals and seeds (sunflower and sesame) can be chopped, not pureed.

Persons with swallowing problems should have foods mashed, not pureed, with additional liquids added. Dried beans, such as pinto, split peas, red beans can be served in soups and casseroles and dips.

One teaspoon daily of unsweetened bran on cereal and other foods can be of help. Watch for cramping or bloating. Start slowly with bran sprinkled on food.

Bowel Care

Establish a daily routine - establish bowel elimination at the same time each day if possible. If necessary, insert glycerin suppository into rectum 30 minutes before scheduled bowel movement - after eating a meal, preferably after breakfast.

Eat regular scheduled meals.

Drink 4oz of prune juice at bedtime (same time each night).

Attempt to have bowel movement.

Bear down and contract abdominal muscles if possible. Do not strain excessively. You may apply pressure to abdomen with hands.

Urinary Incontinence

Establish scheduled toileting, every 2 hours if possible.

Establish good fluid intake, with 8-10 glasses of fluid a day.

Drink 4 ozs of cranberry juice daily. If juice isn't tolerated, take cranberry capsules per directions on bottle.

Crystal Light (plain or sugar free) or similar drinks are a good source of liquid if you do not like plain water.

Silbey Mui, MD. ©Peninsula Park Support Group Spring 2003.

Hints

-- To aid in sliding in and out of a car, put a large plastic leaf bag over the car seat

-- Having leg cramps? Vitamin E can often get rid of them.

When Caregivers Need Help

Caregivers face higher risks of depression, fatigue and physical illness. Be alert for signs that indicate you may need help. These include:

- Easily losing patience or getting angry with the person you're caring for
- Finding no joy in any aspect of life

- Finding it difficult to sleep
- Caring for your loved one 24 hours a day, seven days a week
- Feelings of despair, anguish, depression or having thoughts of suicide
- Experiencing appetite changes and reduced energy levels
- Drinking alcohol or using drugs
- Crying frequently

If you experience any of the above, seek help from your doctor.

Music

Music has been described as the universal language and is full of power to help you express your feelings and emotions. You may ask, how does music do this? Music is able to bring forward emotions and memories — the good and the bad of the past and the present. Music should eventually lead to relaxation and the enjoyment of being alive. Music also has the power to release “endorphins,” or a natural high from chemicals produced in the body. The release of endorphins leads to feeling good, happy and peaceful, thus reducing stress and leading to relaxation. For PD patients music also has the potential of helping our walking ability; and with the addition of breathing skills, relaxation techniques, visualization or time management it may further reduce or control stress. So, put on some great music, learn some relaxation techniques and enjoy!

Medicare Alert

Starting with services received on 1 September 2003, coverage by Medicare will be limited for outpatient physical therapy (PT), speech-language pathology (SLP), and occupational therapy (OT) services. For the period 1 September 2003 through 31 December 2003, the limits are \$1590 for PT and SLP combined and \$1500 for OT. Medicare pays up to 80% of the limits. These limits DO NOT APPLY to therapy you get at hospital outpatient departments, unless you are a resident of and occupy a Medicare-certified bed in a skilled nursing facility. If you have questions, call 1-800-Medicare.

Patient Comfort Assessment Guide

Name: _____ Date: _____

1. Where is your pain?

2. Circle the words that describe your pain.

| | | |
|-----------|------------|-------------|
| aching | sharp | penetrating |
| throbbing | tender | nagging |
| shooting | burning | numb |
| stabbing | exhausting | miserable |
| gnawing | tiring | unbearable |

Circle One: occasional continuous

What time of day is your pain the worst?

morning afternoon evening nighttime

3. Rate your pain by circling the number that best describes your pain at its worst in the last month. No

Pain 0 1 2 3 4 5 6 7 8 9 10 Pain as bad as you can imagine

4. Rate your pain by circling the number that best describes your pain at its least in the last month.

No Pain 0 1 2 3 4 5 6 7 8 9 10 Pain as bad as you can imagine

5. Rate your pain by circling the number that best describes your pain on average in the last month. No

Pain 0 1 2 3 4 5 6 7 8 9 10 Pain as bad as you can imagine

6. Rate your pain by circling the number that best describes your pain right now.

No Pain 0 1 2 3 4 5 6 7 8 9 10 Pain as bad as you can imagine

7. What makes your pain better? _____

8. What makes your pain worse? _____

9. What treatments or medicines are you receiving for your pain? Circle the number to describe the amount of relief the treatment or medicine provide(s) you.

| | | | | | | | | | | | | | |
|--------------------------------------|--------|---|---|---|---|---|---|---|---|---|---|----|----------|
| a) _____ | No | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Complete |
| Treatment or Medicine (include dose) | Relief | | | | | | | | | | | | Relief |

| | | | | | | | | | | | | | |
|--------------------------------------|--------|---|---|---|---|---|---|---|---|---|---|----|----------|
| b) _____ | No | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Complete |
| Treatment or Medicine (include dose) | Relief | | | | | | | | | | | | Relief |

| | | | | | | | | | | | | | |
|--------------------------------------|--------|---|---|---|---|---|---|---|---|---|---|----|----------|
| c) _____ | No | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Complete |
| Treatment or Medicine (include dose) | Relief | | | | | | | | | | | | Relief |

| | | | | | | | | | | | | | |
|--------------------------------------|--------|---|---|---|---|---|---|---|---|---|---|----|----------|
| d) _____ | No | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Complete |
| Treatment or Medicine (include dose) | Relief | | | | | | | | | | | | Relief |

10. What side effects or symptoms are you having? Circle the number that best describes your experience during the past week.

| | | | | | | | | | | | | | |
|------------------------|-------------------|---|---|---|---|---|---|---|---|---|---|----|--------------------------------|
| a. Nausea | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| b. Vomiting | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| c. Constipation | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| d. Lack of Appetite | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| e. Tired | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| f. Itching | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| g. Nightmares | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| h. Sweating | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| i. Difficulty Thinking | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |
| j. Insomnia | Barely Noticeable | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Severe Enough to Stop Medicine |

11. Circle the one number that describes how during the past week pain has interfered with you:

| | | | | | | | | | | | | | |
|--------------------------------|--------------------|---|---|---|---|---|---|---|---|---|---|----|-----------------------|
| a. General Activity | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |
| b. Mood | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |
| c. Normal Work | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |
| d. Sleep | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |
| e. Enjoyment of Life | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |
| f. Ability to Concentrate | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |
| g. Relations with Other People | Does Not Interfere | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Completely Interferes |

PURDUE Committed to
Managed Care

I don't know what God has in mind for me, but I believe God does, and I look forward to the day He shares His plans with me.

Margaret Houk

Fall-Prevention Strategies

What You Can Do For Yourself:

- Exercise
- Maintain healthy diet: calcium with vitamin D to strengthen bones
- Get enough rest
- Go to bathroom before it becomes urgent
- Use walker if suggested
- Wear rubber-soled shoes with no laces
- Break tasks down into simple steps.

What You Can Do At the Doctor's Office:

- Report any fall that takes place
- Bring in all medications, prescribed or over the counter for review at every visit
- Ask about gait assessment and training
- Have eye exam each year
- Address any foot problems

What You Can Do For Your Home:

- Good lighting, switches on both ends of hallway
- Grab bars along bed and bathroom walls
- Firm chairs with armrests
- Firm beds, with satin or high thread-count sheets
- Raise toilet seats
- Cabinet items stored within reach
- Remove loose cords/objects from the floor
- Carpeting, firmly secured, no rugs!

Peninsula Park Support Group Spring 2003

Guidance

I asked for health that I might do greater things;
I was given infirmity that I might do better things.

I asked God for strength that I might achieve;
I was made weak that I might learn to obey.

I asked for riches that I might be happy;
I was given poverty that I might be wise.

I asked for power and the praise of men;
I was given weakness to sense my need of God.

I asked for all things that I might enjoy life;
I was given life that I might enjoy all things.

I got nothing I asked for but everything I hoped for;
In spite of myself, my prayers were answered.
I am among all men most richly blessed.

Unknown

Get Moving

Exercise is the number one FREE thing you can do to reduce stiffness, build up the muscles around the joints and improve your overall health. You will need less medication to control pain and probably have less need to see the doctor. Any movement helps, but ideally includes a soft aerobic activity, stretching and some strength building exercises.

Arthritis Today

Supplements

Anything that eases the pain and stiffness of aching joints will help you reduce medication costs and perhaps the number of office visits. Some vitamins and minerals have been shown to help you get enough of what your body needs - - like a daily multivitamin and mineral supplement with bone - building calcium and vitamin D.

Arthritis Today

Fight Back with Food

Of all health behaviors, poor eating habits resulted in the largest increase in health care costs. One study showed a 41% difference in monthly health-care costs between those who ate poorly and those who ate well. Eating well helps prevent some diseases.

Arthritis Today

Ten Tips For Caregivers

1. Consciously slow your rate of speaking to ensure that the PWP is able to process everything you say, and give ample time for them to respond.
2. Avoid overloading memory processing, by asking closed questions that invite yes or no answers.
3. Organize daily activities to maintain an active mind, such as listening to music, reading, completing puzzles or making time for hobbies and games.
4. Utilize "to do" lists for daily tasks so that the patient can follow the list to accomplish a given task.
5. Place a large calendar in a frequented place with appointments or events written in for each day.

6. Provide clothing that pulls on or has Velcro closings, arranging them in the order in which they should be put on.
7. Make signs using pictures or objects rather than words and place them on the doors of the corresponding rooms.
8. Medical supplies may be kept locked up if there is danger of confusion.
9. Have an ID wrist bracelet or pendent imprinted with the patient's name/phone number and diagnosis.
10. Utilize night lights if confusion or hallucinations are present to make sure that the PWP doesn't have to walk into a dark room.

PDF News Spring 2003

Medical Bill Checkup

As many as 90% of medical bills contain errors that add up to an average of \$1300 in wrongful charges to the patient. Those errors add up to about 10 billion dollars annually.

Get an itemized hospital/doctor bill. The most common mistake is double billing – being charged for the same service twice. Before being discharged, insist you get a line-by-line breakdown of every service you receive. Also insist you get a list of the codes and what they mean from both the hospital/doctor and your insurance company. Watch your deductible. One of the most common billing errors is over billing for deductibles. Insurance companies have been known to mistakenly charge you long after you have met your deductible limit. File every bill you pay, and watch for charges above your deductible limit.

Arthritis Today

Sleeping Problems ?

The treatment of people with temporary or chronic insomnia is to seek the cause of the insomnia and provide treatment for it. If insomnia is caused by a primary sleep disorder initial treatment is to provide information about sleep and instruct people in such simple and effective measures as:

1. Going to bed only when you are sleepy.
2. If you are unable to fall asleep within 30 minutes, or if you wake-up and can't get back to sleep within 30 minutes, you should leave the bedroom and return only when you are sleepy. Do not get up and watch an exciting

- movie, read a great book, or eat a large snack. Try listening to soft music instead.
3. Wake-up at the same time every morning, including weekends. Do not lie in bed, get up.
4. Avoid taking daytime naps.

Certain relaxation techniques are useful in promoting sleep. Examples include neck muscle relaxation and diaphragmatic breathing. If insomnia is associated with disturbances in circadian rhythms, disturbances in adjusting sleep patterns to light and darkness, the use of timed exposure to bright light can be effective in shifting sleep from an inappropriate to an appropriate time.

Some people with insomnia (either temporary or chronic) try to compensate for sleep loss by engaging in activities that, without their knowing, exacerbate the problem. Examples of such activities include excessive use of stimulants such as coffee, caffeine containing soft-drinks, or drinking alcohol to promote sleep.

Another Batch of Good Ideas

Bathing and Grooming Aids

- Use a tub bench or shower chair to bathe safely.
- Place a non-slip rubber mat or adhesive anti-slip surface at the bottom of the tub or shower.
- Install grab bars.
- "Soap on a Rope" keeps soap safely and conveniently within reach while showering or taking a bath.
- A sponge attached to a long handle will reach the lower legs, feet and back facilitating balance by reducing the need to bend.
- Use a terry cloth wash mitt instead of a washcloth.
- Install a night light in a bathroom wall socket.

Dressing Aids

- Lower clothes rods in closets, so you don't have to reach too high for items.
- Choose clothing that closes in the front, with easy style and uncomplicated fastenings.
- Put on and take off clothes from your stiffer side first.
-

- Use button hook or Button Aid.
- Large, easily grasped zipper pulls make opening and closing trouser flies, jackets and coats less difficult.
- Secure shirt cuffs with firm elastic bands. This eliminates buttoning and the result is unnoticeable. (Be sure the bands are not tight enough to restrict circulation.)

Kitchen Aids

- Store food items and food preparation implements near dishwasher and sinks; pots near the stove, etc.
- Try preparing food while seated.
- Cook as much food as possible during “on” times and freeze it for times you don’t feel up to cooking.
- Use a cart with wheels to move items from one place to another and to offer support while walking.
- Use a rubber pad or a wet dishcloth under bowls and pans to stabilize them while preparing foods.
- Prevent diced vegetables and small food from falling off the board by using a cutting board with raised sides.
- Hammer a nail through the cutting board to act as a skewer to keep food from slipping while dicing or cutting.
- Attach an old boom handle or a long wooden dowel to the kitchen dustpan to collect floor sweepings without bending.

Mealtime Aids

- Attachable plate guards provide a rim on one side of the plate. Food, such as small vegetables, can be pushed against the guard, where it falls onto the fork, “scoop dishes” contoured with raised edges, plates with suction cups and the plate guards all help prevent spills.
- If eating is slow, use a plate with a hot water container attached to the underside to keep food hot.
- Silverware with built-in plastic handles is easy to grasp.
- Use a soup spoon instead of a fork for small pieces of food.
- Flexible plastic straws will reduce spills for patients with tremors.

- A lightweight mug with a large handle for easy grasping is useful when tremor is severe.

MEMORIALS

In Memorial of Waymon Young

David Kipp

In Memory of Leslie J Campbell

Bud & Dorothy Campbell

In Memory of Roy Bernthal

Patti Craun

In Memory of Bill Flowers

Walton Grinkle

In Memory of John Reeve

Wesley & Eloise Mabrito

In Memory of Morris Burns

Fern Hughes

In Memory of Mary Helen Anderson

Gene & Lois Thomas

In Memory of Alfred Hustede

Clayton & Macell Mangold

In Memory of Emory Roscheni

John, Beverly & Marguerite Hollje

In Memory of Bill Wilson

Loretta Ehrlund