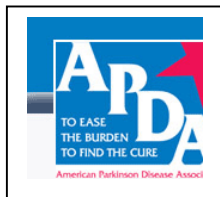


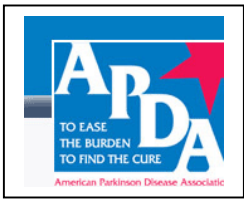
American Parkinson Disease Association, Inc
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See last page for support group information.



American Parkinson's Disease Association, Inc
 Alamo Area Parkinson Support Groups
 2929 Mossrock, Suite 200, San Antonio, Texas 78230-5137
 Phone 210-349-0096, www.aapsg.org
 APDA I & R Center Phone 210-567-6688

Quarterly Newsletter, July 2008

Editor: Dianne Johnson

Local News

Executive Board, 2005-2008

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You may leave a message for any AAPSG Officer or Board Member at 210-567-6688.

In Memory of Fred Dyas

On Friday June 13th Fred Dyas, President of AAPSG, took his final journey home. Fred died suddenly of a heart attack. He had tirelessly volunteered for many years with AAPSG and he will be deeply missed by all who knew him.

Walk-A-Thon

We would like to thank every one who came out for the Walk for their support. We would also like to particularly thank our Walk sponsors: TEVA Neuroscience, Valero, Neurology of San Antonio, SAS Shoemaker, Access Quality Therapy, Caring Senior Service, Mercury Mambo, Valeant Pharmaceutical, Ben E Keith, HeartBLOCC-75, Medtronic, Starbucks Coffee

Symposium 2008

The 16th annual PD symposium will be held Saturday July 12, 2008, 8:30 AM – 2:45 PM at the San Antonio Marriott Northwest, 3233 NW Loop 410. Cost is \$10 per person and includes lunch. Teva Neuroscience and Valeant Pharmaceutical are sponsoring the event.

Topics include:

- How to approach Motor & Non-motor Symptoms for PD Patients & Caregivers.
- Music Therapy and How It Can Help the PD Patient.
- Handicapped Accessible Exercises: a yoga based program.
- Treatment in Early and Moderate-to-Advanced PD.

For more information contact Dianne Johnson at 210-567-6688

PLEASE NOTIFY US OF ADDRESS/E-MAIL CHANGES. POC: Doak Walker 210-674-3013 shalom6@peoplepc.com 7650 Hwy 90W #40, SA, TX 78227-4059.

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Our Web Site www.aapsg.org



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NEW DEVELOPMENTS

Nina Brown

Look at a few of the new developments that are being seen in Parkinson's. The "cure" is dependent on finding the "cause" and great strides have been made in that area. Much research is being done that gives reason to hope.

Gene Mutations Linked to PD

- New research suggests that Ashkenazi Jews (from an Eastern European background) appear more likely to run the risk of developing Parkinson's before the age of 50 due to a gene mutation. An estimated 90 percent of American Jews are Ashkenazi. The study found mutations were present in 17 percent of those with Jewish ancestry and 8 percent of those without such ancestry.

- Researchers from Columbia University in NY have revealed that people with a mutation in their glucocerebrosidase (GBA) gene are also more likely to develop PD before they turn 50. The GBA gene creates an enzyme that breaks down toxic substances, digests bacteria that invade our bodies and recycles worn-out cell components.

The latest study, among 278 people, revealed that 14% of people with PD carried mutations in the GBA gene compared to only 5% of people without the disease. The gene abnormality was found in 22% of people who were diagnosed with Parkinson's before age 50 compared to 10% of people with disease onset after age 50.

- The Feinstein Institute for Medical Research used a gene that makes an inhibitory chemical called GABA that turns down the activity in a key part of the pathway that controls movement. People began to show signs of improvement one month after starting therapy, and by six months movement had improved by an average of 30%. The improvement was confirmed by a brain-imaging scan, which ruled out the placebo effect.

- Another new study shows that a variant of the ApoE gene is also associated with an increased risk of getting PD.

The apolipoprotein E (ApoE) gene, which is involved in cholesterol transport, exists in three variant forms called 2, 3 and 4. ApoE 4 has been linked with an increased risk of Alzheimer's disease. Now researchers at the Univ of North Carolina have shown that ApoE 2 is associated with an increased risk of PD.

- A study by the Mayo Clinic indicates there is a greater potential for immediate relatives (brother, sister, mother, father, son or daughter) of Parkinsonians to develop depression and anxiety disorders. This may suggest a genetic relationship between those disorders and PD. The risk is particularly increased in families of patients who develop PD before age 75.

Gene Delivery

Scientists at Oxford Biomedica, a biotech firm in France, are going into human trials after more than 10 years of gene therapy research with a product called ProSavin. ProSavin is based on a virus that delivers three genes required for synthesis of dopamine.

Once injected into striatum, the cells targeted to receive the genes should begin restoring the level of dopamine. A single treatment has shown almost complete recovery of movement and other symptoms in initial tests in animals and has been effective for at least two years.

Engineered Cells

For the first time, scientists at the Univ of Virginia Health System have engineered cells that produce the pathological hallmark found in the brain cells of all patients with PD - Lewy bodies, tiny balls of damaged protein, found only in the brain and discovered more than ninety years ago.

Having the ability to research Lewy bodies means that scientists now have a model of the pathological changes found in PD "in a dish" and can use this cellular model for experiments that may show promise in treating or reversing the effects of Parkinson's.

Key to PD?

Scientists may have uncovered the key to Parkinson's. In the process that leads to PD, dopamine is converted into a highly toxic

chemical called DOPAL. Using test-tube, cell-culture and animal models, the researchers at UT Southwestern Medical Center in Dallas found that it is DOPAL that causes alpha-synuclein protein in the brain to clump together, which in turn triggers the death of dopamine-producing cells and leads to Parkinson's.

This new research could lead the way to neuroprotective therapies - those that actually prevent the nerve cells from dying off in the first place.

Blood Test for Parkinson's

Houston-based Power3 Medical Products reports that it has pioneered simple, low-cost blood tests for Parkinson's, as well as breast cancer and Alzheimer's disease.

Over-the-Counter Painkillers Could Reduce Parkinson's Risk

Taking as little as two doses a week of over-the-counter painkillers, like ibuprofen, could drastically reduce the risk of developing PD.

Those who took non-steroidal anti-inflammatory drugs, except aspirin, on a regular basis had a 60% lower chance of developing Parkinson's. In addition, women who took aspirin alone reduced the likelihood of contracting the disorder by 40% -- an effect that was not seen in men. *(Editorial note: taking too much ibuprofen can be detrimental to your health and should be taken with a doctor's knowledge.)*

Ritalin Boosts Effects of Levodopa

A small study of 14 Parkinsonians, with fluctuating responses to levodopa, participated in a study using methylphenidate, known commercially as Ritalin. Scientists at the OHSU Parkinson Center of Oregon found that Ritalin not only bolsters the effects of levodopa, but didn't create dyskinesias or involuntary movements as well. In addition, Ritalin decreased another levodopa side effect — hypotension, or low blood pressure — and enhanced improvements that levodopa made in mood and decreased fatigue. The drug had no effect when given without levodopa and there were minimal adverse effects.

The study's findings confirm the importance of the dopamine transporter, the system through which dopamine is reabsorbed into nerve cells, and shows that the transporter may be a target for other levodopa-boosting drugs.

Stem Cell Research

Researchers in Oregon have created patient-specific human embryonic stem cells in the rhesus macaque monkey using Somatic Cell Nuclear Transfer (SCNT), which holds great promise, both for understanding disease development and progression, and for organ and tissue replacement.

Concurrently, Dr. James Thomson of the University of Wisconsin and Dr. Shinya Yamanaka of Kyoto University announced that, because of what they learned from the study of embryonic stem cells, they have been able to turn human skin cells into embryo-like stem cells. Although both breakthroughs may show promise in the future, each has its own set of drawbacks and hurdles that must be overcome. The more likely benefits will result from being able to study the causes of Parkinson's, develop more accurate models to improve our understanding of the disease, and, ultimately, halt the unrelenting neurological degeneration and loss of quality of life for those living with Parkinson's.

Nina Brown, HAPS HAPPENINGS, January 2008

Loss of Smell Can Signal Parkinson's

Sense of smell is something we take for granted. But new research shows that losing your ability to smell could be a sign of a serious illness. The research suggests that losing your sense of smell could signal an increased risk for PD. Researchers from Hawaii studied more than 2,200 men who'd been given an odor identification test. In the test, participants had to smell different scents such as lemon, natural gas, and soap and be able to properly identify them. Results showed that people who performed worst on the test were 5 times more likely to develop PD than those who had the best scores. PDtrials Bulletin, March 2008, www.PDtrials.org

Pray for a Cure

Manufacturer of the Parkinson's Patch Announces Recall of US Batches

UCB Inc., the company that manufactures rotigotine (Neupro(R)), the transdermal patch treatment that is used to ease the symptoms of PD in its early stages, has announced a recall of all Neupro batches in the United States and some areas of Europe. The company has assured the public that the recall has been made not because of concern about contamination or toxicity, but because of a deviation from approved product standards that has apparently reduced the effectiveness of the treatment.

PDtrials Bulletin, March 2008, www.PDtrials.org

It currently takes about 10 years and nearly \$900 million to develop a new drug.

Tufts Center for the Study of Drug Development, Boston

Solvay's Duodopa Intestinal Gel Gets FDA Fast Track Status for Parkinson's

Solvay said the Food and Drug Administration has granted fast track designation for Duodopa, the levodopa/carbidopa intestinal gel it is developing for the long-term treatment of motor fluctuations associated with advanced PD. Fast track is a process designed to facilitate the development and expedite the review of drugs that treat serious diseases and fill an unmet medical need. The drug is currently in a Phase III worldwide study and Solvay will enroll patients in pivotal studies in the US and Germany this summer, it said.

PDtrials Bulletin, March 2008, www.PDtrials.org

Eye Cell Implants Improve Parkinson's Symptoms

By implanting specialized cells found in the human eye into areas of the brain damaged by PD, researchers were able to reduce symptoms and improve quality of life in people with moderate to severe Parkinson's.

The new treatment, dubbed Spheramine, reduced symptoms experienced when people were off their Parkinson's medications by 44 percent for as long as four years of follow-up. Quality-of-life measurements were up about 23 percent.

"This is a promising study on a form of therapy that is different from anything out there" said the study's lead author, Dr. Roy Bakay, a professor

of neurological surgery and the A. Watson and Sarah Armour Presidential Chair at Rush University Medical Center in Chicago.

"This therapy may be beneficial in itself, or it may be used as additional therapy," added Bakay, who was at Emory University in Atlanta at the time of the study.

Spheramine is made from cells called human retinal pigment epithelial cells (hRPE) that are found naturally in the human eye. By combining these cells with microscopic gelatin beads called microcarrier support matrix (MSM), the Emory researchers were able to produce Spheramine, a targeted therapy for Parkinson's. Spheramine can be implanted in the brain, where the eye cells naturally begin to produce levodopa. The researchers believe the levodopa is then turned into dopamine, a neurotransmitter lacking in people with Parkinson's.

"Spheramine is not stem cells. There's no requirement for immunosuppression, and these cells are easily harvested from eye banks and are readily available," Bakay said.

The new study included six patients with moderate to severe PD.

There are few effective treatments for PD, and those that do work often have unpleasant side effects and may stop working over time.

Patients selected for the study were chosen based on their responsiveness to levodopa and the severity of their symptoms when they were off their medication. Using MRI-guided stereotactic surgery, the researchers implanted Spheramine into areas of the volunteers' brains that appeared to be most affected by Parkinson's.

After 12 months, there was a 48 percent improvement in symptoms. At 48 months, that number had dropped to 44 percent, but Bakay said the researchers were pleased that the treatment maintained effectiveness for that long. The only significant side effect seen in this small study was a transient headache, he said.

Dr. Bruce Silverman, a neurologist at Providence Hospital and Medical Center in Southfield, Mich., said the new study 'showed that there was clinical improvement over a sustained period of time. The study was based on small numbers, but it shows some promise.'

He added that the study needs to be replicated with a larger group of patients.

Bakay said the researchers have recently completed a larger, double-blind study, and results of that trial should be available by the end of this year or early 2009.

Personal Care Related Emergency Assistance For Seniors

The city of San Antonio through the Department of Community Initiatives, Senior Services Division is offering personal care related emergency assistance to eligible elderly persons.

Types of Emergency Assistance

Prescription assistance, Medical equipment, Personal care equipment.

Recipients of Medicaid, food stamps, SSI (Supplemental Security Income) may be eligible.

In order to be eligible you must

1. Be 60 years of age or older.
2. Reside within the City of San Antonio incorporated limits
3. Physical disabilities may be temporary or permanent
4. Meet income guidelines

Don't assume you are not eligible.

Call 207-5083 or 207 5026 for more information.

Web Site

This website is for PWP and caregivers. It is from Mrs. Ali and supported by Valeant Pharmaceuticals. Whoever logs on and writes their story Valeant will donate \$10 for research. It is www.fightformore.com

Requip XL Approved

GlaxoSmithKline has announced the FDA approval of Requip® XL™ (ropinirole extended-release tablets) for the treatment of the signs and symptoms of idiopathic PD. It's the first and only oral once-daily non-ergot dopamine agonist indicated for PD. It should be available in pharmacies by mid-July 2008.

PD patients may experience "off" time when their

medication wears off and their symptoms return. Symptoms such as slowness of movement, tremor, and rigidity can be problematic, causing simple activities and movement to become difficult. Results from a pivotal efficacy and safety trial showed that adding extended-release ropinirole to patients' existing levodopa (l-dopa) therapy reduced the amount of "off" time experienced by patients by 2.1 hours per day on average, compared to baseline. Specifically, comparing the experience of the group treated with extended-release ropinirole versus the placebo group, the adjusted mean difference in the reduction of "off" time was -1.7 hours, which was statistically significant.

"Many patients require multiple doses of one or more medications to control their PD symptoms, which makes taking their medicines correctly and at the right times challenging. In addition, patients with PD may have trouble completing routine activities of daily living and self-care," said clinical investigator Rajesh Pahwa, M.D., professor of Neurology and director of the PD and Movement Disorder Center at the Univ of Kansas Medical Center. "Requip XL provides continuous delivery of ropinirole over 24 hours to provide smoother blood levels without the peaks and troughs that multiple daily doses typically deliver. It is an important once-daily treatment option for PD patients."

Requip XL is an extended-release, once-daily tablet formulation that allows for continuous delivery of ropinirole over 24 hours to provide smooth blood levels. Extended-release ropinirole offers physicians and patients a simple titration regimen; it also offers a convenient, once-daily dosing schedule compared to other oral dopamine agonists, which are dosed multiple times a day.

**Rather than complain
About the thorns on roses,
Be thankful for roses among the thorns**

Tips for an Exceptional, Superb & Powerful Life!

1. Take a 10-30 minute walk every day. And while you walk, smile. It is the ultimate antidepressant.
2. Sit in silence for at least 10 minutes each day. Listen for and talk to God. Buy a lock if you have to.
3. Get more sleep.
4. When you wake up in the morning ask yourself, >"What do I really, really, really want today?"
5. Live with the 3 E's - Energy, Enthusiasm, and Empathy.
6. Watch more movies, play more games and read more books than you did last year.
7. Always pray and make time to exercise.
8. Spend more time with people under the age of six.
9. Dream more while you are awake.
10. Eat more foods that grow on trees and plants and eat fewer foods that are manufactured in plants. But, ever so often slip in some pie or ice cream. They won't kill you right away.
11. Drink green tea and plenty of water. Eat blueberries, wild Alaskan salmon, broccoli, almonds & walnuts.
12. Try to make at least three people smile each day.
13. Clear your clutter from your house, your car, your desk and let new and flowing energy into your life.
14. Don't waste your precious energy on gossip, energy vampires, issues of the past, negative thoughts or things you cannot control. Instead, invest your energy in the positive present moment.
15. Realize that life is a school and you are here to learn. Problems are simply part of the curriculum that appear and fade away like algebra class ...but the lessons you learn will last a lifetime.
16. Eat breakfast like a king, lunch like a prince and dinner like a college kid with a maxed out charge card.
17. Smile and laugh more. It will keep the energy vampires away.
18. Life isn't fair, but it's still good.
19. Life is too short to waste time hating anyone.
20. Don't take yourself so seriously. No one else does.
21. You don't have to win every argument. Agree to disagree.
22. Make peace with your past so it won't screw up the present.
23. Don't compare your life to others'. You have no idea what their journey is all about.
24. Ladies - Go on and burn those 'special' scented candles, use the 600 thread count sheets, the good china and wear our fancy lingerie now. Stop waiting for a special occasion. Everyday is special.
25. No one is in charge of your happiness except you.
26. Frame every so-called disaster with these words: 'In five years, will this matter?'
27. Forgive everyone for everything.
28. What other people think of you is none of your business.
29. Time heals almost everything. Give time, time!
30. However good or bad a situation is. It will change.
31. Your job won't take care of you when you are sick. Your friends will. Stay in touch with them.
32. Get rid of anything that isn't useful, beautiful or joyful.
33. Envy is a waste of time. You already have all you need. God provides remember?!
34. The best is yet to come.
35. No matter how you feel, get up, dress up and show up.
36. Do the right thing!
37. Call your friends/family often.
38. Each night before you go to bed complete the following statement: 'I am thankful for _____.'
39. Remember that you are too blessed to be stressed.
40. Enjoy the ride. Remember that this is not Disney World and you certainly don't want a fast pass. You only have one ride through life so make the most of it and enjoy the ride.

**LIVE, LOVE, LAUGH. LIFE'S A GIFT ...
UNWRAP IT! Have a Blessed day.**

Unknown

AAPSG SUPPORT GROUPS

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

Alamo Area PD Support Group San Antonio

Second Monday every month except Oct, 1 PM. Sunset Ridge Church of Christ, 95 Brees Blvd.

Young-Onset PD Support Group San Antonio

Second Saturday every month, 10 AM. Newforest Estates, a Senior Lifestyle Community, Auditorium, 5034 New Forest Dr.

DBS Support Group "Live Wires"

Fourth Saturday every month, 10 AM. Location varies; call Sandra Farris, 830-257-3811 sandraf@windstream.net or Judy Hoopman 830-997-7705 ralanh@beecreek.net for current location

Caregivers Only Support Group, San Antonio

Second Tuesday every month, 10 AM. Bob Ross Senior Ctr, 2219 Babcock Rd. POC: Dianne Johnson, 210-567-6688, 651-9835, diannejohnsonrn@aol.com .

Austin (Parsons House) PD Support Group

Third Friday every month, 10 AM. 1130 Camino La Costa, Austin, POC: Jaime Eyer 512-454-0524

Bastrop Argent Court Assisted Living Support Group

Fourth Thursday every month, 2 PM. 508 Old Austin Hwy, Bastrop. POC: Shasta Martini 321-9500 #252, Jenny Bankston 252-1512

Burnet PD Support Group

Second Tuesday every month, 1 PM. Burnet PC Tng Ctr, Highlander Inn, 401 W Buchanan Dr (Hwy 29), Burnet. POC: Mark Vidas, 512-756-4949, info@burnetPC.com

Cedar Park (Ranch Retirement Living) Support Group

Last Friday every month, 1 PM. 1301 Whitestone Bl, Cedar Park. POC 996-0700 Ms Bryson 238-6000

Comal County Support Group

Fourth Saturday every month, 10 AM. 801 W San Antonio St, New Braunfels (McKenna Event Ctr Children's Museum). POC: Tommy Dubuque tommydubuque@yahoo.com or call 830-227-5303

Fredericksburg PD Support Group

First Monday every month, 10 AM. Fredericksburg United Methodist Church in a room off the Fellowship Hall, 1800 North Llano Hwy. Coffee, juice and snacks are served. POC Judy Hoopman 830-997-7705 or ralanh@beecreek.net

Georgetown PD Support Group

Last Thursday every month, 2PM. Scott & White Meeting Rm, 4945 Williams Dr Georgetown, POC: Beverly Edwards 512-863-8443 edwards107@verizon.net

Lower Rio Grande Valley PD Support Group

Call for information on meetings. POC: Cheri Horkmann, (phone 956 554 6028)