



Dallas Area Parkinsonism Society

6370 LBJ Freeway

Suite 176

Dallas, Texas 75240

(972) 620-7600

www.daps.us

FEBRUARY 2012

The Parkinson's Diet and PD Medications

reprinted with permission from The Tulip Messenger

For at least the last fifteen years there has been an ongoing debate about the special dietary needs of a Parkinson's patient. [Fifteen years ago] the belief was that protein should be eliminated from the PD diet completely, if possible, or at least restricted to only eating protein at night after most medications had been taken for the day. The pendulum then swung completely the other direction, and for a few years patients were told that there was no connection between their diet and the effectiveness of their medications. Thanks to years of research, we seem to now have a better understanding of the connection between the diet and the medications, specifically Sinemet® or carbidopa/levodopa.

Additionally, there was concern for a while about Azilect® (rasagiline) and certain foods, specifically those containing the amino acid tyramine found in processed or aged meats, certain cheeses, red wine, beer, and soy products. These foods were restricted only by the FDA and they were never restricted in other cultures, which consume far more of the restricted

foods than Americans typically do. So what is a patient to do or believe?

First, all dietary restrictions have been lifted from those taking Azilect. There is no concern about taking that medication and eating anything!

The connection between the PD diet and medications is actually restricted to only one medication, Sinemet (carbidopa/levodopa). Really, it is the levodopa that poses the problem for the PD patient. Levodopa is a man-made amino acid that is capable of crossing the blood-brain barrier (a protective shield in the body that prevents harmful things from going to the brain and causing damage) and acts as a replacement for the dopamine that is missing in the brain of PD patients. The problem with the levodopa lies in the digestive tract. Once it arrives in the stomach, it competes for digestion with natural amino acids that are found in foods. The natural amino acids get preferential treatment when being broken down and absorbed by the body. This is primarily due to the

Diet continued on page 3

FEBRUARY general membership meeting

Join us for our monthly meeting!

speaker:

**Sheila Ricketts
Community Liaison
from
Pinnacle Home Health
"A Matter of Balance"**

**Monday, Feb. 13, 2012
1:00 p.m.**

Bring your questions and join us for refreshments after the presentation.

University Park
United Methodist Church
4024 Caruth Blvd
(at Preston)
Dallas, TX 75225

INSIDE

holiday luncheon **2**
pd & the eyes **2**
swallowing tips **4**

renewal form **5**
maintaining control **5**
greeting card fundraiser **5**

honors/memorials/donations **6**
therapy locations **7**
mark your calendar **8**



Dallas Area Parkinsonism Society

Dedicated to impacting and improving the quality of life for Parkinson's patients and their families

Executive Board

Jean Blomquist, President
Mike Nemazie, Vice President
Joyce Susman, Secretary
Don Shannon, Treasurer

Board of Directors

Sarah Atwood
Philip Burke
Larry Christensen
Rex Hand
Shirley Hand
Mike Hinegardner
George Kilpatrick
Charlene Noe
Sandi Pautler
Lewis Sheriff
Barbara Taylor
Cindy Weatherall

Consulting Board Member

Cindy Casey Brown, Attorney

Medical Advisory Board

Shilpa Chitnis, MD, Ph.D.
Richard B. Dewey, Jr., M.D.
Richard L. Fulbright, Ph.D.
Dwight C. German, Ph.D.
Ransdell Hunter, Ph.D.
Jorge A. Romero, M.D.
R. Malcolm Stewart, M.D.
Gary L. Tunell, M.D.

Newsletter

Ann Staton, Editor

The DAPS newsletter is published monthly as an information guide only, and does not serve as legal or medical advice. We welcome your feedback, contributions or requests. Please send to or contact:

Ann Staton
DAPS

6370 LBJ Suite 176
Dallas, TX 75240

Phone: 972-620-7600

Fax: 972-620-7612

Email: daps125@sbcglobal.net
www.daps.us

All submissions must be received by the first of the month preceding publication date and are subject to editing.

DAPS Holiday Luncheon

DAPS held their annual Holiday Luncheon on Monday, December 12, 2011 at 12:30 pm at the University Park United Methodist Church with over 100 members and guests present. The Luncheon was catered by Amore's Italian Restaurant in Snider Plaza and the food was excellent and enjoyed by all. The entertainment this year was a Musical Program presented by Doc Gibbs. He did some great impressions and he played the kind of music that was well liked for singing along and reminiscing. The tables were decorated festively for the season by Shirley Hand and her crew, who always do a fabulous job for each occasion. A fun, relaxing time was had by all.



How Parkinson's Affects the Eyes

by Dr. David G. Standaert (edited for space)

Dr. Standaert responding to a question about how Parkinson's disease affects the eyes said, "If it does, it can have several effects on a patient's eyes. The most common problem was dry eyes caused by reduced rate of blinking in PD. The normal rate of eye blinking is around 10 times per minute. People with PD blink much less, leading to drying of the cornea, itching, pain and redness. This is particularly common in hot and dry weather. This can often be treated with artificial-tear eye drops, but they must be used frequently for a week or more to correct the problem, and then continued as a preventative measure on patients who are prone to dry eyes."

A less common problem related to PD is double vision. This appears most often when looking quickly from one place to another. Double vision is a reason to see an ophthalmologist, to be certain that it is not due to a problem with the eyes or lenses, but it often turns out to be caused by the effects of PD on eye movements, so that one eye moves a bit slower than the other at times. It is often hard to find a solution to this problem, aside from covering one eye when it is troublesome, but the good news is that it is generally mild and does not progress much over time.

A third effect of PD on the eye is on color vision. This is usually not noticed by persons with PD, but can be detected by sensitive vision tests. It is of interest to scientists studying PD because the eye has dopamine neurons, and it is thought that changes in color vision may be a marker for other effects of PD on dopamine cells.

Reprinted with permission from Heart O' Texas Parkinson's and Caregivers Support (HOTPACS) June newsletter.

Diet continued from front page

fact that the levodopa is a larger molecule than the natural amino acids and so levodopa is not absorbed as readily. As a result, the medication does not get to the brain as needed. This is of particular concern for those who are suffering from "on/off" fluctuations.

Most experts today agree that timing is of most importance when taking carbidopa/levodopa. To make sure you get the greatest benefit from your medication, it is recommended that levodopa (Sinemet) be taken on an empty stomach, at least 30 to 60 minutes before eating a meal. This allows the medication to begin to be broken down and absorbed before other amino acids are introduced. The actual time allowed will depend on the individual. Since the entire GI tract is a series of muscles which are controlled by nerves, the GI tract often suffers the effects of bradykinesia (slowness of movement), just like other parts of the body do. This slowing of the GI tract not only makes PD patients more inclined to develop constipation, but it may also slow the digestion and absorption time of medications and food. If you suffer from serious constipation, then you may want to allow more time rather than less time between the medication and ingestion of food. A healthy diet should include four to six ounces of protein daily. This can come from complete proteins from animal products, or a combination of incomplete proteins from plants (like rice, beans, nuts, etc.).

If you become nauseated when taking your medication on an empty stomach, it is suggested that you try eating a couple of saltine crackers or drinking ginger ale or ginger tea with your medication. You should not take your carbidopa/levodopa with milk because milk also contains protein. By the same token, whole grains such as lentils, corn, soy products, beans and other legumes contain large amounts of natural amino acids, and they also should not be consumed at the same time as your medication.

A diet high in fat can also slow the absorption of your food and consequently your medications. This does not mean that a PD patient should go on a low fat diet, but it does mean that the amount of fat consumed should be considered, especially when taking PD medications.

As was previously mentioned, constipation is a problem for many people with PD. Constipation can cause headaches, back pain, fatigue, overall feeling

of sluggishness, and it can affect how well nutrients are absorbed. Patients experiencing constipation should make sure they are getting a diet that is high in fiber. Consuming whole grains, fruits and vegetables will provide natural fiber in the diet. Prune juice and prune butter are especially effective in helping with constipation. Regular exercise and plenty of fluids will also help eliminate constipation. Some patients may also have to add a natural fiber laxative and/or a stool softener to help. If constipation remains a problem, especially on a regular basis, please consult your doctor for other treatment options.

Two other dietary concerns are of particular interest. First, several studies have indicated a possible correlation between a lack of Vitamin D and the onset of Parkinson's. Other studies have indicated that PD patients have a higher than normal prevalence of bone loss which leads to osteoporosis. While there is not definitive evidence to prove that a lack of Vitamin D causes Parkinson's, the higher than normal incidence of osteoporosis among the PD community is of immediate concern. Osteoporosis makes patients more vulnerable to falls and fracture.

The absolute best way to obtain Vitamins D is sunlight. Oddly enough, the sun, the infamous substance cholesterol, and preformed hormone Vitamin D all work together to activate Vitamin D in the body. Ten to fifteen minutes of sun or unprotected skin daily is all that is needed to provide the body with adequate levels of Vitamin D. People with darker complexions require slightly more time in the sun. Some foods are also rich in Vitamin D. They include: fish, fish liver oils, egg yolks, and fortified dairy and grain products.

Taking a Vitamin D3 supplement may be necessary in some instances. As some people age, their kidneys lose their ability to convert preformed Vitamin D into its active form. Also, people with digestive diseases like celiac and Crohn's disease may not be able to absorb Vitamin D from food effectively. Make sure that D3, which is usually only available by prescription, is used as a supplement; no other forms of Vitamin D have been shown to be used effectively by the body.

The other dietary concern is a lack of Vitamin B12 in PD patients. Several studies have indicated that PD patients lack Vitamin B12, which may lead to numerous problems that may complicate Parkinson's. Vitamin B12 deficiencies may cause a lack of appetite

Diet continued on page 4

Precautions & Tips for Swallowing

- Sit upright or lean slightly forward when eating or drinking.
- Keep the chin level or slightly tucked down.
- Begin with something icy, like a slush, shake, sorbet or sherbet.
- Do not use a straw.
- Drinking cold thick liquids is safer than hot thin liquids.
- With liquids, especially hot thin liquids, swallow, then clear the throat, then swallow again before taking more liquid.
- Avoid thin liquids when you are tired; it could be dangerous. Consume thin liquids in the morning when you are more alert, and thick liquids at night.
- Place food on the strong side of your mouth.
- Moistened foods are easier to control than dry ones. You can use sauces, condiments, and dips to add moisture to food.
- Semi-solid, soft foods are easier than regular solids.
- Alternate between food and liquids when eating. Begin with the easiest first (like soft, moist foods), then switch to thick liquids.
- Take one small bite or sip at a time. Never take large or consecutive swallows.
- With solids, swallow at least 2 times per mouthful—the first to send the food down, followed by a dry swallow to catch any residual particles.
- Never wash food down with a liquid. Instead, add moisture to the food.
- If you feel yourself slowing down during a meal, switch to something icy.

Source: Swallowing safety. Presented at the Annual Meeting of the CMSC; September 1998; Cleveland, OH; by speech/language pathologist Pamela M. Sorensen.

Diet continued from page 3

and consequent weight loss, numbness or tingling in the hands and feet with may lead to complete neuropathy, weakness, depression, and a loss of mental acuity including dementia, all of which may complicate similar PD symptoms. Vitamin B12 deficiencies also are associated with high levels of homocysteine in the blood, which has been implicated in increasing the risk of heart disease.

There are several possible causes of Vitamin B12 deficiencies in PD patients. These include: pernicious anemia, malabsorption following surgery, a lack of animal protein in the diet, a lack of hydrochloric acid in the stomach from aging or taking antacids, a lack of good intestinal bacteria, and atrophic gastritis which is very common in anyone older than 50.

If B12 deficiencies are due to a lack of absorption, primarily due to a lack of stomach acid or atrophic gastritis, then taking B12 by injection or by consuming foods that have been fortified with a synthetic form of Vitamin B12 should be seriously considered. People over the age of 50 should probably be tested for B12 deficiencies periodically to determine blood levels of the vitamin. While Vitamin B12 is water soluble and toxicities are not known to exist, your neurologist should probably be consulted before large doses of Vitamin B12 supplements are consumed.

Other problems associated with PD may also play a role in how well the medication is absorbed.

The Tulip Messenger is a publication of the American Parkinson Disease Association Information & Referral Center, Lubbock, TX. (806) 725-0941.

Resources:

- Understanding Nutrition 12a. Whitney/Rolfes: Wadsworth-Cengage Learning.
- Marian L. Evatt, MD, MS; Mahlon R. DeLong, MD; et. al. "High Prevalence of Hypovitaminosis D Status in Patients With Early Parkinson Disease." *Archives of Neurology* 68, no. 3 (2011): 314-319.
- Rajabally, Yusuf A., and Jean Martey. "Neuropathy in Parkinson disease: Prevalence and determinants." *Neurology* 77 (2011): 1947-1950.
- *Movement Disorders* 25, no. 5 (2010): 659-664.



Dallas Area Parkinsonism Society

Newsletter Renewal Form

- Please continue my subscription
- Cancel my subscription

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

- Please send my newsletter by email.

Email address: _____

What topics would you like to see covered, or questions to be answered, in future newsletters?

Your contribution is tax deductible. Please make your check out to Dallas Area Parkinsonism Society, enclose with this form, and mail to 6370 LBJ Frwy, Ste 176, Dallas, TX 75240. Thank you!

Help Us Go Paperless

Help our Society save costs associated with printing and mailing our newsletter. If you have a computer and would like to receive the Newsletter by email, please return the form above, or send an email to daps125@sbcglobal.net.

Maintaining Control to the End

by Jeryn Laengrich, MS, CCC/SLP

Clinical Liaison, Presbyterian Communities and Services

As I look over the past few years of my family's life, I often describe it as "out of control". What does "maintaining control" really mean? The definition of "control" as a noun is: The power to influence or direct people's behavior or the course of event.

When I stop and take a moment and examine this definition, I realize that the decisions we make each and every day do directly influence behavior and direct courses of events. How can we apply this "control" to Parkinson's disease? Each and every day a person with Parkinson's and his or her family make decisions that "control" their lives.

Dr. Malcolm Stewart and I were talking one day about being out of control and what a person can do to maintain control especially as it applies to disease and illness. The idea was developed to put together a panel of "experts" to answer questions posed by you to help "maintain control to the end". Dr. Stewart will lead and moderate the panel at the March 12th, monthly DAPS meeting, through questions and answers on "maintaining control to the end". (At the time of publication, the panel has not been completely confirmed...however, you won't be disappointed!)

Our lives are full of times where we need "control", and making the decision to attend this informative meeting may "influence your behavior or course of events."

2011 Greeting Card Fundraiser

The Greeting Card Fundraiser was a HUGE success thanks to all of you who supported this cause. Total donations from card sales were over \$2100, after expenses. DAPS will use these donations to continue serving Parkinsonians and their families. If you have any suggestions for next year's greeting card fundraiser, please call or email the DAPS office.



THANK YOU for your support!

Memorials • Honors • Donations
December 2011

In memory of Loy Baird

From: Betty Baird

In memory of Izell Bankston

From: Betty Baird

John C. Berendzen
Betty & Daryl Cordell
Sherrie Kincaid
Kimberly Krause
Jack & Billye Nolan
Stella Novit
Carlotta C. Oliver
Jack & Gwen Patton
Bob & Ann Staton
Gail Thomas
Inez Trahan

In memory of Barbara Bennett

From: Don Bennett

Richard Bennett
Wendy Bennett

In memory of Patricia Jennings Bottger

From: Philip & Nanetta Chamberlain

Kay Joe Harrington
Addie M. Reddick

In memory of Roland Colmenero

From: Cheryl L. Boehme

Joel N. Crouch, PC
Dallas CPA Society
Terri Hornberger
Scott Schieffer
Sibley & Company, P.C. CPA's
Jeff Weyandt & Fox, Byrd & Company

In memory of Richard Francis

From: Melinda Lawrence

Mary Rodriquez

In memory of James E. Goss

From: Jan & Randy Haberer

Metrocrest Women's Club

In memory of Jack Harris

From: Scott MacPherson

Charles Schlinke

In memory of Virginia B. Knight

From: Kathleen M. Knight

In memory of Ross McLarty

From: Jean Jenner

In memory of Chester Maxey

From: Dee Maxey

In memory of Hugh L. Moody

From: Marjorie T. Walthall Perpetual
Charitable Trust

In memory of Jerry O'Connor

From: Dee Maxey

In honor of Rex Hand

From: Irene Hand

Gary & Angela Werner

In honor of Susie Hanneman

From: Kent Hanneman

In honor of Nicholas Nadolsky

From: Aylin Nadolsky

In honor of Bill Weissmann & Dave Huggins

From: North Texas Oldsmobile Club

In honor of Dr. Paul Wong

From: Nikki Massengill

**In honor of Rex & Shirley Hand's 50th
Anniversary**

From: Jean & Lionel Blomquist

Mr. & Mrs. Jerry Goodale

Donation of appreciation for DAPS

From: The Lakeside Group

Donation to DAPS

From: Kerstin Fredrickson

Jim Ann Grandstaff

Kiala Hanneman

Barb Mack

Plano PAGE

Preston Hollow PAGE

Prudential Matching Gifts Program

Danforth W. Starr

NO CHARGE speech therapy and group exercise

CARROLLTON:

St. Andrews Christian Church
3945 N. Josey Lane

Group Exercise:

Wednesday...9:45 a.m. to 10:45 a.m.

Speech Therapy:

Wednesday...10:45 a.m. to 11:30 a.m.

DALLAS:

Baylor Institute for Rehabilitation
909 N. Washington (214-820-8854)

Water Therapy

Wednesday...11:00 a.m. to 12:00 p.m.

Dallas Yoga Center

4525 Lemmon Ave., 3rd Floor

Yoga for Parkinson's:

Friday...11:00 a.m. to 12:00 p.m.

Finley Ewing Cardiovascular & Fitness Center, Studio 3

5721 Phoenix Drive (214-345-7074)

Dance for Movement Disorders:

Tuesday...2:00 p.m. to 3:15 p.m.

Thursday...2:00 p.m. to 3:15 p.m.

Juanita J. Craft Recreation Center

4500 Spring Ave.

Group Exercise:

Friday...10:00 a.m. to 11:00 a.m.

Lakeside Baptist Church

9150 Garland Rd.

Speech Therapy:

Wednesday...10:30 a.m. to 11:15 a.m.

Group Exercise:

Wednesday...9:30 a.m. to 10:30 a.m.

Partners-in-Care Group:

2nd Wed....10:30 a.m. to 11:30 a.m.

Preston Hollow United Methodist Ch.

6315 Walnut Hill Lane

Speech Therapy:

Tuesday...11:30 a.m. to 12:15 p.m.

Group Exercise:

Tuesday...10:30 a.m. to 11:30 a.m.

Thursday...10:30 a.m. to 11:30 a.m.

Partners-in-Care Group:

First Tuesday...11:30 a.m. to 12:30 p.m.

Skillman Church of Christ

3120 Skillman St., FLC 2nd floor
Mezzanine

Group Exercise:

Monday...10:00 a.m. to 11:00 a.m.

DUNCANVILLE:

Trinity United Methodist Church:
1302 S. Clark Rd.

Speech Therapy:

Thursday...1:00 p.m. to 1:45 p.m.

Group Exercise:

Monday...6:30 p.m. to 7:30 p.m.

Thursday...2:00 p.m. to 3:00 p.m.

Support Meeting:

Last Monday...6:30 p.m. to 8:00 p.m.

GARLAND:

South Garland Baptist Church
1330 E. Centerville Rd.

Speech Therapy:

Thursday...9:30 a.m. to 10:15 a.m.

Group Exercise:

Monday...10:30 a.m. to 11:30 a.m.

Thursday...10:30 a.m. to 11:30 a.m.

Discussion Group:

Monday...9:30 a.m. to 10:30 a.m.

Partners-in-Care Group:

Thursday...10:30 a.m. to 11:30 a.m.

PLANO:

Custer Road Methodist Church
6601 Custer Road

Speech Therapy:

Thursday...11:00 a.m. to 11:45 a.m.

Group Exercise:

Monday...9:45 a.m. to 10:45 a.m.

Thursday...9:45 a.m. to 10:45 a.m.

Partners-In-Care Group:

Monday...9:45 a.m. to 10:45 a.m.

RICHARDSON:

Arapaho United Methodist Church
1400 W. Arapaho at Coit

Group Exercise:

Tuesday...10:00 a.m. to 11:00 a.m.

Wednesday...10:00 a.m. to 11:00 a.m.

Friday...10:00 a.m. to 11:00 a.m.

Partners-In-Care Group:

1st Wednesday...10:00 a.m. to 11:00 a.m.

THPHD GROUPS & CLASSES

The Movement Disorders Education and Resource Center at Texas Health Presbyterian Hospital Dallas (8200 Walnut Hill Lane, Dallas, TX 75231) offers the following:

SUPPORT GROUPS

PD Support Group. 3rd Thursday of each month at 6pm in the Beasley Conference Rm, Main Bldg, 1st Floor.

Essential Tremor Support Group. 2nd Wednesday of each month at 1:00pm in the Beasley Conference Rm, Main Bldg, 1st Floor.

PSP Support Group. 3rd Saturday of each month at 6pm in the Southeast Conference Rm, Main Bldg, 1st Floor.

Caregiver Support Group. 4th Tuesday of each month at 2:00 pm in the classroom across the hall from Studio II at the CVC*.

FITNESS CLASSES

Dance for Movement Disorders.

Instructed by Misty Owens, MFA every Tuesday and Thursday, 2:00 – 3:15 pm in Studio 3 of the CVC*. This class is cosponsored by Texas Health Presbyterian Hospital Dallas and the **Dallas Area Parkinsonism Society (DAPS)** and is offered free to individuals with movement disorders.

Water Exercise for Movement

Disorders. In the pool at the CVC* every Monday, Wednesday, and Friday at 11:00 am. (A physician release form and the purchase of a CVC punch card are required. Please call for more information: 214-345-7074.)

Caregivers are welcome to attend any of our support groups and exercise classes. For more information or to **RSVP**, please contact us at **214-345-4224** or **DallasMovementDisorders@TexasHealth.org**.

*CVC = Finley Ewing Cardiovascular & Fitness Center, 5721 Phoenix Drive, across Greenville from Presbyterian Hospital, Dallas. 214-345-7074



Dallas Area Parkinsonism Society

6370 LBJ Freeway, Suite 176

Dallas, Texas 75240

(972) 620-7600

Non-Profit
Organization
U.S. POSTAGE
PAID
Fort Worth, TX
Permit No. 11

**RETURN SERVICE
REQUESTED**

MARK YOUR CALENDAR

general meeting

Monday, Feb. 13 - 1:00 p.m.

Speaker: Sheila Ricketts, Community Liaison
from Pinnacle Home Health
"A Matter of Balance "

University Park United Methodist Church
4024 Caruth at Preston

open board meeting

Monday, Feb. 27 - 1:00 p.m.

University Park United Methodist Church

next month

Monday, Mar. 12 - 1:00 p.m.

Panel discussion with Dr. Malcolm Stewart"
University Park United Methodist Church

disclaimer: The contents or opinions expressed in this Newsletter are those of the individual writers or presenters and do not constitute an endorsement or approval by DAPS staff. Please consult your personal physician regarding your individual medical problems.

Tom Thumb Reward Card

Link your Tom Thumb Rewards card to number **3071**, and a percentage of what you pay to Tom Thumb will be donated to DAPS!

Kroger Cares Card

Have the cashier scan the barcode before your Kroger Cares card is scanned. A percentage of what you pay will go to DAPS!

DALLAS AREA PARKINSONISM SOCIETY



For change of address or corrections, please indicate the changes on this page and mail or fax it to DAPS, or email: daps125@sbcglobal.net