

PEP NEWS

Newsletter of the Parkinson Education Program of Greater Cleveland

March 2011

Marilyn Brandt, Editor

MARCH MEETING

ELLEN WALTER, CNP

Clinical Nurse Specialist

Movement Disorders Center, University Hospitals Case Medical Center

“Taking Control of Parkinson’s Disease”

Wednesday, March 2, 2011 – 2:00-3:30 pm

Cleveland Heights Recreation Center

One Monticello Boulevard, Cleveland Heights, OH

In case of inclement weather, call 216-691-7377 for info

Last names A through M please bring light refreshments.

Bio – Ellen Walter

Ellen Walter received her Masters of Science in Nursing from Case Western Reserve University in Cleveland. She has worked for the past 12 years in neuroscience nursing in neurology and neurosurgery practices including caring for individuals who have had deep brain stimulation surgery for the treatment of their movement disorder. She currently is a nurse practitioner working with a team of specialists in the Movement Disorders Center at University Hospitals Case Medical Center. Her position there, in addition to caring for those who have had deep brain stimulation, involves a comprehensive approach caring for persons with Parkinson’s disease, dystonia, essential tremor, and other movement disorders. She is also involved in research and has presented at both regional and national meetings on various topics including the care of individuals with movement disorders.

The following phone numbers have been requested:

National Parkinson Foundation – 1-800-327-4545
American Parkinson Disease Fndn – 1-800-223-2732
Parkinson Disease Foundation – 1-800-457-6676
The Parkinson Institute – 1-800-655-2273
Parkinson’s Action Network – 1-800-850-4726

PARKINSON’S ACTION NETWORK RESEARCH & PUBLIC POLICY FORUM

Live Webcast
February 28, 2011 – 1:00-4:00 pm ET
Register for the Forum Webcast
For more info – www.thepanforum.org

Michael J. Fox Foundation Applauds FDA Approval of DaTscan, Heralds Benefits for Parkinson's Disease Drug Development and Patient Care

Today's FDA approval of DaTscan, an imaging technique that captures detailed images of the living brain, including areas affected by Parkinson's disease, stands to benefit both drug development and patient care for Parkinson's. DaTscan is the first FDA-approved diagnostic imaging agent to aid in the assessment of degenerative movement disorders such as Parkinson's disease in keeping with The Michael J. Fox Foundation's commitment to mobilize new technologies quickly in its urgent pursuit of a cure. DaTscan is already in use at 14 U.S. medical centers as part of the Parkinson's Progression Markers Initiative (PPMI), the Foundation's landmark clinical study seeking biomarkers of Parkinson's disease.

"For the first time, an objective test can help confirm a clinical diagnosis of Parkinson's disease," said Katie Hood, CEO of The Michael J. Fox Foundation for Parkinson's Research. "DaTscan represents a major step forward in enabling timely initiation of appropriate treatment and improved disease management which contribute to greater quality of life and better long-term outcomes."

Parkinson's disease is diagnosed through clinical examinations, but especially early in the disease this may be inconclusive and can result in misdiagnosis. DaTscan offers an objective tool to help with early and accurate detection of PD.

"Until now, it has been impossible to confirm that patients enrolling in clinical studies of PD actually had the disease," said Todd Sherer, PhD, Chief Program Officer, The Michael J. Fox Foundation. "Having more homogeneous patient populations in clinical trials will contribute to clearer trial outcomes and help speed progress toward improved treatments and a cure."

"Like many PD clinical studies, PPMI requires the participation of PD patients at the earliest stages of symptoms when diagnosis may still be uncertain," said Ken Marek, MD, principal investigator of PPMI. "DaTscan is critical to ensuring the accuracy of diagnosis of both Parkinson's patients and control participants entering PPMI and is therefore crucial to the study's success."

GE Healthcare, manufacturer of the imaging agent used in DaTscan is one of seven industry partners supporting PPMI. GE is providing the DaTscan imaging agent at no cost to PPMI clinical sites in the United States and Europe.

COMING MEETING
April 6, 2011
Dr. Andre Machado
*"Approach to Parkinson's
Care"*

*** TRIBUTES ***

We need your donations to continue bringing you the PEP News and for other expenses. A special thanks to those who contribute at the monthly meetings.

To send a donation, please make your checks payable to Parkinson Education Program and mail to:

22171 Harms Road
Euclid, OH 44143

In memory of James Duffy
Mary Anne Duffy

In memory of Irma Kennedy
Bonnie Egan

DISCLAIMER: The material contained in this newsletter is intended to inform. PEP makes no recommendations or endorsements in the care and treatment of Parkinson's disease. Always consult your own physician before making any changes.

How to reach us - Phone: 216-556-0607 – or

www.ohparkinson.org/ne/education

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Parkinson's Disease Power Switch Located

Harvard study says existing drugs may offer future treatment

(by Joseph Hall)

In a transformative new study, U.S. researchers have uncovered both the very cause and a promising treatment for Parkinson's disease (PD).

The degenerative movement disorder occurs when the tiny power plants that fuel afflicted brain cells are turned off, the Harvard University-led study has found. This power outage may well be reversed by medications that throw a master switch gene controlling the energy-producing cell structures back on, the paper suggests.

"It's all very exciting . . . because I think it is potentially a breakthrough in PD," says Dr. Anthony Phillips, head of neurosciences with the Canadian Institutes of Health Research. "It's really coming together nicely. I think it is very, very promising and I think it will get a lot of interest."

Dr. Clemens Scherzer says there are already approved drugs available that are turning the same genetic master switch on in other diseases like diabetes.

If these drugs can hit the switch in brain cells, as Phillips says is likely, it could provide a treatment that would ward off or reverse the ailment's crippling onslaught in its earliest stages.

Scherzer says that all the genes that control the energy-producing machinery of a cell – churning structures known as mitochondria – are turned off in PD. These mitochondria are divided into five power cells, each of which is genetically inactivated in the disease. But all five centers can be reactivated by targeting the master PGC-1alpha gene, Scherzer says.

"You can think of it like a power switch that, if you turn on this master regulator, you can turn the activity of this energy-producing machinery back on," he says.

Dr. Timothy Greenamyre, vice chair of neurology at the University of Pittsburgh, calls the identification of a mitochondrial cause a "sea change" in the understanding of the ailment. "This study was really a tour-de-force and Scherzer brought together a lot of groups and their data sets to do this," says Greenamyre, a movement disorder expert. "I think he really has to be complimented. This is a very, very solid study."

Parkinson's, which affects more than 6 million globally, is an attack on dopamine cells in the brain stem, which control motor movements.

In the study, Scherzer's team actually turned tissue samples of these dopamine cells back on by inducing high levels of the master gene into a cultured mix. "But (the gene) is a very exciting target for

medicines because pharmaceutical companies have realized its importance before in diseases that are much more common than PD, such as diabetes," he says.

Indeed, there are approved diabetes drugs, and several promising medications now being screened, that appear able to throw the PGC-1alpha switch. "Pharmaceutical companies can now go back and see whether these drugs or tested compounds can cross into the brain of Parkinson's patients," Scherzer says.

Phillips says the likelihood that some of these drugs would cross into the brain is high.

Adds Greenamyre: "I agree there's that potential and it's very exciting."

The study appears in the first anniversary issue of the journal *Science Translational Medicine*, which features research making the jump from the laboratory to practical usage.

Scherzer thinks a combination of environmental chemicals, like pesticides and manganese, plus a variety of genetic risk factors for the disease combine to cause the ailment.

Yet the afflicted, dopamine-producing cells appear to be able to ward these risk factors off when their mitochondria are robust.

Greenamyre's only caution is that the paper does not definitively show that PGC-1alpha has itself gone off in Parkinson's disease. "They show that everything that's controlled by (it) is down, but they don't show there's anything wrong with the breaker switch." He says.

He says it could be imagined the electrical wiring coming out of the man switch is bad, but that the switch itself is working.

Wii Fit Helped A Woman Do More Than Exercise

KOTAKU.COM – Several months ago, a woman was diagnosed with PD. She had difficulty walking. And then, she started playing Wii Fit. For 45 minutes a day, the woman played Wii Fit boxing, did step aerobics and the hula hoop mini-game. She says she saw a "massive improvement."

"I can now do a lot of things again which I couldn't before," she continues. "I've become far more nimble and can walk much further."

The console was originally a Christmas gift to the woman's two daughters, but she now recommends it to anyone suffering from the degenerative disorder.

This comes as a Belfast University receives a grant to study the positive effects of Wii Fit after "overwhelming feedback" from sufferers. We wish this woman continued success with her Wii Fit treatment.

CYCLING ABILITY A CLUE TO TYPE OF PARKINSON'S DISEASE

(road.cc – excerpts)

“It’s like riding a bike” is the phrase often used when referring to a skill that once mastered is never lost or forgotten.

But the ability to ride a bike can be lost and now medical researchers in Holland have come to understand that where Parkinson’s disease is concerned, an inability to ride can indicate whether a sufferer has the typical or atypical form of the disease.

“Simply asking about cycling abilities could be added to the list of red flags that can assist clinicians in their early differential diagnosis of Parkinsonism,” Bastiaan Bloem, PhD, of Nijmegen Medical Centre in the Netherlands told medical journal *The Lancet*.

Patients who have lost the ability to ride are highly likely to have the atypical form of the disease and can expect to suffer symptoms not normally seen in the standard form. This has implications in terms of advising patients on what to expect in the future as well as for recruitment in clinical trials of Parkinson’s disease.

Former boxer Muhammad Ali and actor Michael J. Fox are both sufferers of the disease.

**You can’t read this and stay
in a bad mood!**

How do you get holy water?
You boil the hell out of it.

What do fish say when they
hit a concrete wall? *Dam!*

What do you call cheese that
isn’t yours? *Nacho cheese.*

What do you call Santa’s
helpers? *Subordinate Clauses.*

What do you get from a
pampered cow? *Spoiled milk.*

What is the difference
between a Harley and a Hoover?
The location of the dirt bag.

Why did Pilgrims’ pants
always fall down? *Because they
wore their belt buckle on their
hat.*

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Parkinson Education Program
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