

DECEMBER 2024 **Barbara Marquardt, Editor, M.Ed., MCHES, WCP, RYT**

DECEMBER MEETING / Wednesday, December 4, 2024 2:15 p.m.

We are pleased to have **Kathy Wendorff, Cherry Monahan, and Richard Huckabee** talk about **Planning for Your (Unplanned) Hospital Visit**. Join us for this very informative session with the speakers providing real recent experiences and how to avoid potential complications.

Cleveland Heights Senior Activity Center/One Monticello Blvd., Cleveland Heights, OH 44118

JANUARY MEETING / No Meeting / Happy New Year!

From David Brandt

In the spirit of Thanksgiving and the holiday season, this is a reminder of my time to give thanks to various individuals and organizations. Many thanks to:

- ◆ Barbara Marquardt, the Editor of *PEP* News, and Katherine Kaminski, who puts it together every month, for all their hard work and a job well done.
- ◆ The Ohio Parkinson Foundation Northeast Ohio Region (OPFNE), for all of the good things they do for the Parkinson community and local support groups, and also for their generous monetary support to make the *PEP* News sent to you every month.
- ◆ The fact that we have two large hospital organizations in our area (Cleveland Clinic and University Hospitals) that provide exceptional PD care, research, and guidance.
- ◆ To those who have donated to *PEP* this year and help us to continue to support and educate you.
- ◆ Bob and Barbara Eckardt who have year in and year out provided the hospitality at our meetings including all of the coffee and refreshments. I remain deeply appreciative.
- ◆ The Michael J Fox Foundation, Parkinson's Foundation, Davis Phinney Foundation, PMD Alliance, and all of the other foundations that are related to Parkinson's Disease and who provide so much

information and research dollars that are changing the landscape for the better.

- ◆ To all of the advances in research in PD that are bettering the lives of those with PD with even more progress with improved care and treatments.
- ◆ Healthcare workers that support those with PD, i.e. doctors, nurses, physical therapists, psychologists, and more.
- ◆ InMotion for having the nation's best facility for all things that can help people with PD.
- ◆ My fellow *PEP* Board Members; Shalom Plotkin, Mazie Adams, Kathy Wendorff, Pat Murphy, Darlene Reid, and Cherry Monahan for their time and guidance.
- ◆ To all the speakers that volunteer their time to present at our monthly meetings. We thank you for passing on your knowledge.
- ◆ My mom, Marilyn Brandt, who has donated so many years to *PEP* and was one of the best caregivers.
- ◆ And finally, all of the caregivers who provide the daily assistance and love to those with PD and keep them moving forward with a rewarding life.

I wish all of you a very Happy Holiday Season!!

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Cleveland

PD Question Corner

Email: barbaramarquardt@outlook.com

Question: What is the PK Protocol?

Answer: The PK Protocol focuses on repairing damaged cells and eliminating built-up toxins to improve overall health. By strengthening cell membranes, enhancing detoxification processes, and boosting energy production, it helps your body function more efficiently and reduces persistent symptoms.

Phosphatidylcholine (PC) is a major component of cell membranes and plays a critical role in maintaining cell structure and function. Phospholipid exchange therapy involves the administration of PC to replenish and repair damaged cell membranes. This process can help restore membrane fluidity, improve cellular signaling, and enhance overall cell function.

Benefits of the PK Protocol Include:

Cell Membrane Repair: PC integrates into cell membranes, repairing and restoring their structural integrity. This is particularly beneficial in conditions where membrane damage is prevalent, such as in liver disease and neurodegenerative disorders like PD.

Detoxification: PC supports the detoxification processes by facilitating the removal of toxins from cells and tissues. This is crucial for individuals exposed to environmental toxins and those undergoing detoxification protocols.

Neuroprotection: Phospholipid exchange with PC has been shown to support cognitive function and protect against neurodegeneration. This is due to PC's role in maintaining neuronal cell membrane integrity and supporting neurotransmitter function.

Liver Health: PC is essential for liver function, particularly in the synthesis and secretion of lipoproteins. Supplementation with PC can improve liver health and function, making it a valuable component of treatments for liver diseases such as non-alcoholic fatty liver disease (NAFLD) and hepatitis. Here's examples of different disorders and conditions that the PK Protocol can address:

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 2785 Edgehill Rd., Cleveland Heights, OH 44106

Alzheimer's	Metabolic Disorders/
Anti-Aging, Longevity	Lyme/Neuro Lyme
Autism/Dev. Delays	Multiple Sclerosis
Cardiac Disease	Neurotoxicity
Cancer	Parkinson's
Chronic Fatigue Syndrome	PANDAS
Epilepsy	Pesticide/Chemical Poisoning
Heavy Metal Detoxification	Post-Cerebral Vascular Accident
Hepatitis C	Mold Exposure/Illness
Huntington's Disease	

To learn more about the PK Protocol, please visit and Ref: <https://drhyman.com/blogs/content/how-i-fixed-my-brain-fog-and-fatigue>

New Study Reveals Unexpected Cognitive Risks in PD Treatment

(Excerpt from scitechdaily.com)

Discovery may reduce possible side effects in Parkinson's disease treatment.

A recent study by researchers at the University of Iowa has identified a specific brain region associated with the ability of humans to shift thoughts and focus when distracted. This discovery is significant as it provides valuable insights into the cognitive and behavioral side effects of a technique currently used to treat Parkinson's disease patients.

The subthalamic nucleus is a pea-sized brain region involved in the motor-control system, meaning our movements. In people with Parkinson's disease, those movements have been compromised: Researchers believe the subthalamic nucleus, which normally acts as a brake on sudden movement, is exerting too much influence. That overactive brake, researchers think, is what contributes to the tremors and other motor deficiencies associated with the disease.

In recent years, clinicians have treated Parkinson's patients with deep-brain stimulation, an electrode implanted in the subthalamic nucleus that rhythmically generates electrical signals, causing the brain region to loosen its braking, freeing up movement. The deep brain stimulation system is like a pacemaker for the heart; once implanted, it runs continuously.

Deep Brain Stimulation: Benefits and Challenges

"The technique is truly miraculous, frankly," says Jan Wessel, associate professor in the departments of

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New Study Reveals Unexpected Cognitive Risks in PD Treatment

(Excerpt from *scitechdaily.com*)
(Cont'd from previous page)

Psychological and Brain Sciences and Neurology at Iowa. “People come in with Parkinson’s, surgeons turn the electrode on, and their tremor goes away. Suddenly they can hold their hands steady and go play golf. It’s one of those blockbuster treatments where, when you see it in action, it really makes you believe in what the neuroscience community is doing.”

Yet some patients treated with deep brain stimulation have been beset by an inability to focus attention and impulsive thoughts, sometimes leading to risky behaviors such as gambling and substance use. Researchers began to wonder: Did the subthalamic nucleus’ role in movement also mean this same brain region may deal with thoughts and impulse control?

Wessel decided to find out. His team designed an experiment gauging the focus of attention of more than a dozen Parkinson’s patients when the deep brain stimulation treatment was either activated or idle. The participants, outfitted with a skull cap to track their brain waves, were instructed to fix their attention on a computer screen while the brain waves in their visual cortex were being monitored. About one in five times, in a random order, the participants heard a chirping sound, meant to divert their visual attention from the screen to the newly introduced auidal distraction.

In a 2021 study, Wessel’s group established that brain waves in participants’ visual cortex dropped when they heard a chirp, meaning their attention had been diverted by the sound. By interchanging instances when there was a chirp or no sound, the researchers could see when attention had been diverted, and when the focus of visual attention had been maintained.

The team turned their attention to the Parkinson’s groups for this study. When the deep brain stimulation was idle and the chirp was sounded, the Parkinson’s patients diverted their attention from the visual to the auditory systems—just as the control group had done in the previous study.

But when the chirp was introduced to the PD participants with deep brain stimulation activated, those

participants did not divert their visual attention. “We found they no longer can break or suppress their focus of attention in the same way,” says Wessel, the study’s corresponding author. “The unexpected sound happens and they’re still full-on attending to their visual system. They haven’t diverted their attention from the visual.”

The Role of the Subthalamic Nucleus

The distinction confirmed the subthalamic nucleus’ role in how the brain and body communicate not only with movement—as previously known—but also with thoughts and attention.

“Until now, it was very unclear why those with Parkinson’s disease had issues with thoughts, such as why they performed worse on attention tests,” Wessel says. “Our study explains why: While removing the inhibitory influence of the subthalamic nucleus on the motor system is helpful in treating Parkinson’s, removing its inhibitory influence from nonmotor systems (such as thoughts or attention) can have adverse effects.”

Wessel firmly believes deep brain stimulation should continue to be used for Parkinson’s patients, citing its clear benefits to aiding motor-control functions. “There may be different areas of the subthalamic nucleus that stop the motor system and that stops the attentional system,” he says. “That’s why we’re doing the basic research, to find out how do we fine-tune it to get the full benefit to the motor system without accruing any potential side effects.”

TRIBUTES

Chris Trotta

Jim Heney, Vantage Financial

Pegg Spring

Laughter is Medicine

WHY IS SANTA GOOD AT KARATE?

He has a black belt.

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PEP NEWS

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Some Diabetes Drugs Tied to Lower Risk of Dementia, Parkinson's Disease

(Excerpt from www.sciencedaily.com)

PART 2 OF A 2-PART SERIES

For Alzheimer's disease, the incidence rate for people taking SGLT2 inhibitors was 39.7 cases per 10,000 person-years, compared to 63.7 cases for those taking other diabetes drugs. Person-years represent both the number of people in the study and the amount of time each person spends in the study.

For vascular dementia, which is dementia caused by vascular disease, the incidence rate for people taking the SGLT2 drugs was 10.6 cases per 10,000, compared to 18.7 for those taking the other drugs.

For PD, the incidence rate for those taking the SGLT2 drugs was 9.3 cases per 10,000, compared to 13.7 for those taking the other drugs.

After researchers adjusted for other factors that could affect the risk of dementia or PD, such as complications from diabetes and medications, they found that SGLT2 inhibitor use was associated with a

20% reduced risk of Alzheimer's disease and a 20% reduced risk of PD. Those taking the drugs had a 30% reduced risk of developing vascular dementia.

"The results are generally consistent even after adjusting for factors like blood pressure, glucose, cholesterol and kidney function," Lee said. "More research is needed to validate the long-term validity of these findings."

Lee said that since participants were followed for less than five years at the most, it's possible that some participants would later develop dementia or PD. The study was supported by the Korea Health Technology R&D Project through the Korea Health Industry Development Institute, funded by the Ministry of Health & Welfare of Korea; Severance Hospital; and Yonsei University College of Medicine.

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