

PARKINSON'S RESOURCE ORGANIZATION

Working so no one is isolated because of Parkinson's

MESSAGE

Hoping the ghosts and goblins didn't get the best of you, we're off to managing the 11th month of 2016 with grace, dignity, hope, education and emotional support as we cruise through life.

WE'RE GETTING THINGS DONE.

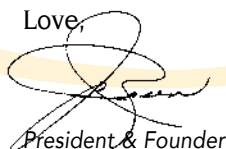
The **ROAD TO THE CURE** on this page continues with the **DRUG DEVELOPMENT AND THE ROAD TO THE US FDA** covering Clinical Trials and important information at the end of this series.

November also brings other PROvocate and informative news such as: **HEALTH BENEFITS OF GINGER** on page 2; **THE BENEFITS OF SPECIALIZED MASSAGE THERAPY FOR PARKINSON'S** by Louise Evans, the Founder of Mot'us Floatation & Wellness Center, on page 3; our **INSPIRATIONAL MIRACLE OF A BROTHER'S SONG: A True Story** is on page 4; **DIET AND EXERCISE CAN CURB EFFECTS OF PARKINSON'S DISEASE, AND PROMOTE OVERALL IMMUNE SYSTEM HEALTH** is on page 5; and our **INVITATION** to join us for our November 9th event in the Desert is on page 6. Can't join? **PURCHASE GRAND PRIZE TICKETS** for a TRULY "GRAND" PRIZE, also on page 6.

We know we are providing valuable information and support in the Parkinson's community, and we continue to appreciate your monthly or general donations through our safe PayPal donation page at ParkinsonsResource.org/contribute-2/ or by mail to our office in Palm Desert, California.

Until next month, REMEMBER Turn BACK your clocks on the 6th, VOTE by or on the 8th, honor our VETERANS on the 11th, give thanks and celebrate your gratitude on THANKSGIVING DAY on the 24th and Give on #GIVINGTUESDAY on the 29th; we'll be sending out promotionals and asking for your support. The flower is the Chrysanthemum and the Birthstones are Topaz and Citrine. ALWAYS remember to CELEBRATE YOU and PRAY FOR OUR TROOPS!

Love,



President & Founder

UPDATE ON PARKINSON'S "ROAD TO THE CURE" PROJECT

DRUG DEVELOPMENT AND THE ROAD TO THE US FDA

Ram Bhatt, CSO ICBI, Inc.

ICBI SMART Molecules (SMs) technology is poised to translate our most promising scientific breakthroughs into meaningful disease altering treatments capable of tackling the most complex and vexing medical challenges related to the diseases of the central nervous system (CNS). In spite of the rapid pace of our initial scientific advances, the recent budgetary constraints have slowed down the progress: manufacturing and the market penetration of our potential diagnostic and disease altering drugs for Parkinson's and Alzheimer's diseases.

The process of drug development is complex filled with scientific, technical, financial, and regulatory challenges. The average cost (capitalized) to successfully develop a drug from start to finish (FDA Approval) in the US was estimated to be \$2.6 Billion in 2014 (reference: Tufts Center for the Drug Development, November, 2014). If one takes into account the time and resources wasted on failed drugs during the same time by the same group of scientists who successfully launched their drug in the market, the cost exceeds \$4 Billion.

Last month we covered drug development through **Filing for an Investigational New Drug (IND)** Application with the FDA; this month we start with **Clinical Trials**:

6. Phase 1 Clinical Trial: INITIAL SAFETY TESTING IN A SMALL GROUP OF HEALTHY VOLUNTEERS

In Phase I trials the candidate drug is tested in people for the first time. These studies are usually conducted with a small number of healthy volunteers, generally 100 or less. The main goal of a Phase I trial is to assess the safety of the medicine when used in humans. Researchers look at the pharmacokinetics of a drug: How is it absorbed? How is it metabolized and eliminated from the body? They also study the drug's pharmacodynamics: Does it cause side effects? These closely monitored trials are designed to help researchers determine what the safe dosing range is and if the candidate medicine should move on to the next stage of development.

<i>Average Time for Phase 1 Clinical Trials</i>	<i>9 years</i>
<i>Average Pharma Cost up to this point</i>	<i>\$810M</i>

7. Phase II Clinical Trial: ASSESS SAFETY AND EFFICACY IN A SMALL GROUP OF PATIENTS

In Phase II trials we evaluate the candidate drug's effectiveness in 100 to 500 patient volunteers with the disease or condition under study. Many Phase II trials study patients receiving the drug compared with patients receiving a different treatment, either an inactive substance (placebo), or a different drug that is usually considered the standard of care for the disease. Researchers also analyze optimal dose strength and schedules for using the drug and examine the possible short-term side effects (adverse events) and risks associated with the drug. If



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HEALTH BENEFITS OF GINGER

Arabic, Indian, and Asian healers, for thousands of years, prized ginger as food and medicine. This tropical plant was effectively used to relieve nausea and vomiting caused by illness and seasickness. Ginger is found in the same family as turmeric and cardamom.

These healers used to say: "*Ginger does good for a bad stomach.*" Two or three cups full for breakfast will relieve indigestion.

Ginger is a multi-faceted remedy with six to ten healing effects above combating nausea and vomiting: It reduces pain and inflammation, making it valuable in managing arthritis and headaches.

1. It stimulates circulation and has a warming effect.
2. Good for this time of year, it inhibits rhinovirus, which can cause the common cold
3. It inhibits such bacteria as Salmonella and Trichomonas.
4. It reduces gas and painful spasms in the intestinal tract.
5. It may prevent stomach ulcers caused by nonsteroidal anti-inflammatory drugs, such as aspirin and ibuprofen.

You can take ginger in whatever form appeals to you. Ginger is available in six forms: fresh, dried, pickled, preserved, crystallized (*or candied*), and powdered or ground. Its flavor is peppery and slightly sweet, with a pungent and spicy aroma.

Ayurvedic medicine has praised ginger's ability to boost the immune system long before recorded history. It believes that because ginger is so effective at warming the body, it can help break down the accumulation of toxins in your organs. It's also known to cleanse the lymphatic system, our body's sewage system.

THE BENEFITS OF SPECIALIZED MASSAGE THERAPY FOR PARKINSON'S

Louise Evans, Founder
Mot'us Floatation & Wellness Center

The benefits of massage therapy have long been recognized by people with Parkinson's disease and Parkinsonisms. Because the diseases' typically cause muscle stiffness and rigidity, bodywork's ability to alleviate joint and muscle stiffness makes it a logical choice for management and symptom reduction.

A new concept when designing a treatment protocol for the somatic symptoms of Parkinson's disease is the rationale that relentlessly increasing stiffness and tremors lead to muscle exhaustion, similar to that found in athletic endeavors. The available oxygen is insufficient for the amount of work the trembling and permanently contracting muscles need in order to stay in good repair.

The stresses put on the Parkinson patient's body are similar to stresses endured as the result of sporting activities. The big difference, however, is that exhausting sporting events are typically followed by long periods of rest and relaxation, whereas the poor musculature of the Parkinson's patient never has any rest period, and hence suffers structural changes which make it palpably different. Specific massage with its manifold effects on the body is, of course, the perfect medium to keep muscles soft and pliable (i.e., in five minutes, the long strokes of Swedish massage carry 10 times the amount of blood to the massaged muscle as arrives naturally during a 15-minute rest). The effect is most noticeable where there is a lot of cleansing and nourishing going on, as is in the case of the Parkinson's patient who is in the clutches of a nervous system gone haywire.

The effect on the release of neurotransmitters by massage is likewise enormous and may be responsible for the production of endorphins with their calming influence. This can help with feelings of anxiety, depression and hopelessness.

From extensive experience amongst therapists, massage also seems to enhance the utilization of various L-dopa combinations that are being used with good success. If this is born out through careful research, then massage could really become an important factor in the treatment protocol, as it could conceivably prolong the overall effectiveness of medications for years beyond their present usefulness. Just imagine adding years of useful life to people who now feel doomed by their diagnosis and their failing bodies.

According to a 2002 study conducted by the Touch Research Institute at the University of Miami, along with staff from the university's neurology department and Duke University's pharmacology department, Parkinson's disease symptoms are reduced by massage therapy. In this study, the group of adults with Parkinson's disease who received two massages a week for five weeks experienced improved daily functioning, increased quality of sleep and decreased stress-hormone levels. The study's authors reported, "These findings suggest that massage therapy enhances functioning in progressive or degenerative central nervous system disorders or conditions." All modalities report improvement in function, from the reduction of rigidity and improvement of sleep, to the reduction of tremor and increase of daily activity stamina.

Physical manipulation of the musculoskeletal system an ideal Parkinsonism management component.

Louise Evans is the Founder of Mot'us, a Primary Health and Wellbeing Consultant, and an Exercise and Bodywork Rehabilitation Specialist. Mot'us Floatation and Wellness Center has just joined the PRO WELLNESS VILLAGE. Please check out their bio, video and contact information under the category of Massage at:

ParkinsonsResource.org/featured-posts/motus-massage-body-work/

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MIRACLE OF A BROTHER'S SONG

A true story

Author Unknown

Like any good mother, when Karen found out that another baby was on the way, she did what she could to help her 3-year-old son, Michael, prepare for a new sibling. They found out that the new baby was going to be a girl, and day after day, night after night, Michael sang to his sister in Mommy's tummy. He was building a bond of love with his little sister before he even met her.

The pregnancy progressed normally for Karen, an active member of the Creek United Methodist Church in Morristown, Tennessee. In time, the labor pains came. Soon it was every five minutes, every three, every minute. But serious complications arose during delivery and Karen found herself in hours of labor. Would a C-section be required?

Finally, after a long struggle, Michael's little sister was born. But she was in very serious condition. With a siren howling in the night, the ambulance rushed the infant to the neonatal intensive care unit at St. Mary's Hospital, Knoxville, Tennessee.

The days inched by. The little girl got worse. The pediatrician had to tell the parents there was very little hope. Be prepared for the worst. Karen and her husband contacted a local cemetery about a burial plot. After they had fixed up a special room in their house for their new baby, they now found themselves having to plan for a funeral. Michael, however, kept begging his parents to let him see his sister.

"I want to sing to her," he kept saying. Week two in Intensive Care looked as if a funeral would come before the week was over. Michael kept nagging about singing to his sister, but kids are never allowed in Intensive Care. Karen decided to take Michael whether they liked it or not. If he didn't see his sister right then, he may never see her alive. She dressed him in an oversized scrub suit and marched him into ICU. He looked like a walking laundry basket. The head nurse recognized him as a child and bellowed, "Get that kid out of here now. No children are allowed."

The mother rose up strong in Karen, and the usually mild-mannered lady glared steel-eyed right into the head nurse's face, her lips a firm line. "He is not leaving until he sings to his sister" she stated.

Then Karen towed Michael to his sister's bedside. He gazed at the tiny infant losing the battle to live. After a moment, he began tossing. In the pure-hearted voice of a 3-year-old, Michael sang: "You are my sunshine, my only sunshine, you make me happy when skies are gray." Instantly the baby girl seemed to respond. The pulse rate began to calm down and become steady.

"Keep on singing, Michael," encouraged Karen with tears in her eyes. "You never know, dear, how much I love you, please don't take my sunshine away." As Michael sang to his sister, the baby's ragged, strained breathing became as smooth as a kitten's purr. "Keep on singing, sweetheart."

"The other night, dear, as I lay sleeping, I dreamed I held you in my arms." Michael's little sister began to relax as rest, healing rest, seemed to sweep over her. "Keep singing, Michael." Tears had now conquered the face of the bossy head nurse. Karen glowed. "You are my sunshine, my only sunshine. Please don't take my sunshine away..."

The next day... the very next day... the little girl was well enough to go home. Woman's Day Magazine called it "The Miracle of a Brother's Song". The medical staff just called it a miracle. Karen called it a miracle of God's love.

NEVER GIVE UP ON THE PEOPLE YOU LOVE.

LOVE IS SO INCREDIBLY POWERFUL.

DIET AND EXERCISE CAN CURB EFFECTS OF PARKINSON'S DISEASE, AND PROMOTE OVERALL IMMUNE SYSTEM HEALTH

Ketogenic Diet Offers Hope for Parkinson's excerpted from Peak Fitness, presented by Mercola.com and The Seventy Percent Solution, Terry L. Wahls, MD

Neuromuscular and neurodegenerative illnesses are devastating for obvious reasons: loss of independence, reduced quality of life, financial strain, emotional effects (such as depression), and the toll these conditions take on loved ones, particularly if one or more of them assume a caregiving role. Conditions such as multiple sclerosis, ALS, and Alzheimer's disease are even more difficult to navigate because there are essentially *no effective pharmaceutical interventions*. There may be drugs to reduce or relieve symptoms in the short term, but these do nothing to address the root cause(s) of the conditions, nor to stop or prevent future decline.

Fortunately, there is a growing awareness that what many neurodegenerative conditions have in common is some degree of mitochondrial dysfunction. Although how these conditions ultimately manifest in the body may differ, a common—and nearly universal—characteristic is impaired mitochondrial energy generation. This being the case, there are therapeutic strategies ripe for exploration and research which may hold promise and potential for many conditions that are otherwise intractable and extremely difficult to treat.

The ketogenic diet is one such strategy that may be beneficial for Parkinson's disease. It has already shown great promise for other neurodegenerative issues. Animal studies and preliminary studies in humans indicate that ketogenic diets—especially when combined with a rich intake of ketone-boosting medium-chain triglycerides—may improve quality of life in ALS patients. This approach has also proven quite promising for Alzheimer's disease, and Terry Wahls, MD, skyrocketed to fame in the functional medicine community after her TED Talk, in which she shared her account of reversing her progressive multiple sclerosis via diet and lifestyle interventions, which included raising serum ketone levels.

While there is some degree of genetic susceptibility behind some of these conditions, Dr. Wahls noted, “70 to 90% of the risk for diabetes, heart disease, cancer, and autoimmunity is due to environmental factors. The genes do not drive most chronic diseases. It is the environment. It is time we stop blaming our genes and focus on the 70% under the individual's control. That is the real solution to the health care crisis.” If this is true for diabetes, heart disease, cancer, and autoimmunity, then there's reason to suspect environmental factors have a powerful influence over whether some of these genetic tendencies for neurological issues manifest as chronic illness.

For Parkinson's disease (PD), specifically, symptoms stem primarily from the death of dopamine-secreting neurons. While there are drugs that are effective—at least in the short term—their efficacy wanes over time. Moreover, some Parkinson's medications—specifically, the dopamine receptor agonists—come with truly disturbing potential side-effects. Not totally surprisingly, these include behavioral and personality changes that may be associated with the role of dopamine in the “reward” pathways: compulsive gambling, shopping and eating, and hypersexuality. (*Researchers believe these issues are under-reported by patients and caregivers, and are under-recognized by the treating physicians.*)

Besides intermittent fasting, yet another dietary intervention that may be of particular importance for those with Parkinson's is the so-called ketogenic diet. One 2006 study^{14,15} suggests that a diet high in fat (*upwards of 90 percent*) and nearly devoid of protein and carbohydrates has neuroprotective effects in both Parkinson's and Alzheimer's sufferers.

cont. on page 7

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WE INTEND IT TO SERVE AS
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ROAD TO THE CURE – cont. from page 1

the drug continues to show promise, they prepare for the much larger Phase III trials.

Average Time for Phase 1 Clinical Trials **10 years**
Average Pharma Cost up to this point **\$1.2Billion**

8. Phase 3 Clinical Trial: DEMONSTRATE SAFETY AND EFFICACY IN A LARGE GROUP OF PATIENTS

Phase III trials generate statistically significant data about the safety, efficacy and the overall benefit-risk relationship of the investigational medicine. Phase III trials may enroll 1,000 to 5,000 patients or more across numerous clinical trials sites around the world. This phase of research is essential in determining whether the drug is safe and effective. It also provides the basis for labeling instructions to help ensure proper use of the drug (e.g., information on potential interactions with other medicines, specific dosing instructions, etc.)

Phase III trials are both the costliest and longest trials, often encompassing hundreds of study sites at hospitals and centers both across the U.S. and around the world. Coordinating all the sites and the data coming from the clinical trial sites is a monumental task. Companies must coordinate closely with staff at each trial site, as well as with the IRB/EC that is monitoring the study and the FDA. Often, a clinical research organization (CRO) will work with a company to aid in recruitment and day-to-day operations of the trial. In addition, the company's manufacturing scientists are working to ensure high quality production of the medicine for use in the trials, as well as planning for the full-scale production of the medicine after approval. Meanwhile, the company is working to assemble and prepare the complex application required for FDA approval.

Average Time for Phase 3 Clinical Trials **12.5 years**
Average Pharma Cost up to this point **\$2.56 Billion**

9. FDA Review and Approval of Marketing Application: EVALUATION OF COMPLETE DATA SETS AND PROPOSED LABELING AND MANUFACTURING PLANS

After determining that the results of the clinical trials indicate the drug is both safe and effective, ICBI will submit a new biologics license application (BLA) to the FDA requesting approval to market the drug. This application will contain the results and data analysis from the entire clinical development program, as well as the earlier preclinical testing and proposals for manufacturing and labeling of the new medicine—which can run 100,000 pages or more. In order to accelerate the availability of medicines to patients with serious diseases or where there is an unmet medical need, the FDA implements expedited approaches to accelerate the development and review of new medicines, such as: Fast Track: expedites the review of drugs that treat serious conditions and fill an unmet medical need; Breakthrough Therapy: expedites the development and review of drugs that may demonstrate substantial improvement over available therapy; Accelerated Approval: accelerates approval for drugs that address a serious condition or fill an unmet medical need, based on a surrogate or an intermediate clinical endpoint; Priority Review: accelerates FDA evaluation of drugs that, if approved, would be significant improvements in the safety or effectiveness of the treatment, diagnosis, or prevention of serious conditions. Scientists, physicians and

statisticians at the FDA review the data from all of the studies on the compound and, after weighing the benefits and risks of the potential medicine, decide whether to grant approval. Occasionally the FDA will ask for additional research before granting approval or convene an independent expert advisory panel to consider data presented by the FDA and the company.

Note from Jo Rosen: I invite you to contact me if you want more information about supporting The Parkinson's ROAD TO THE CURE. I would be proud to make the important introduction of you to the scientists at ICBI, and we continue to salute these scientists as they forge ahead!

Join Us in The Desert**Mitch's Pitches PRO**

hosting a Cocktail Reception and a
 Special 3 Course Dinner with wine pairing
Wednesday, November 9, 2016
 Beginning Promptly at 5:30 pm

Benefiting

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Working so no one is isolated because of Parkinson's

Limited to 75 People

A special Dinner held in a unique location
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DIET AND EXERCISE – cont. from page 5

While this was an admittedly extreme form of ketogenic diet, when used on patients with Parkinson's disease, it resulted in improvements in balance, tremors, and mood. There are various theories as to how it helps, including shifting your brain's metabolism from blood sugar to ketone bodies, a secondary energy source derived from fat metabolism.

Your heart, as well as other muscles, operates quite efficiently when fueled by ketones. Your muscles can store more glucose (as glycogen) than your brain because they have an enzyme that helps them maintain their glycogen stores. But your brain actually lacks this enzyme, so it prefers to be fueled by glucose. When your blood glucose levels are falling, your ketone levels are typically rising, and vice versa. You might be wondering, then, how your brain is able to function when you're in a state of ketosis.

It turns out that your body has a mechanism for providing your brain with a fuel source it CAN use when glucose is in short supply. When your glucose is low, your brain tells your liver to produce a ketone-like compound called beta-hydroxybutyrate (or beta-hydroxybutyric acid). This compound is able to fuel your brain very efficiently, especially with "practice." The more efficient your body is at burning fats, the more easily it can move seamlessly between its fat-burning and carbohydrate-burning engines, and the more stable your blood sugar will be.

Strategies that can add years to your life, and help prevent Parkinson's disease, too

A key factor for living a long healthy life is optimizing your insulin and leptin sensitivity, and there's cause to believe that this is important for neurological disorders like Parkinson's as well. Exercise, intermittent fasting, and eating a diet high in healthy fat, along with low amounts of non-vegetable carbs and moderate amounts of protein can likely go a long way toward preventing and treating Parkinson's and many other health concerns. Additional lifestyle factors to take into consideration include the following:

- ***Eating an organic, whole food diet.*** For a complete guide about which foods to eat and which to avoid, see my comprehensive nutrition plan. Generally speaking, you should focus your diet on whole, ideally organic, unprocessed foods that come from healthy, sustainable and preferably local sources. For the highest nutritional benefit, eat a good portion of your food raw. This type of diet will naturally optimize your insulin signaling. Refined sugar and processed fructose in particular can act as a toxin when consumed in excess, driving multiple disease processes in your body – including insulin resistance, diabetes, cardiovascular disease, and systemic inflammation.

- ***Enjoy a comprehensive exercise program.*** Even if you're eating the best diet in the world, you still need to exercise—and exercise effectively—if you wish to optimize your health. You should include core-strengthening exercises, strength training, and the right kind of stretching, as well as high-intensity "burst-type" activities. Consider combining this with intermittent fasting to supercharge your metabolism. Also remember that chronic sitting is an independent risk factor for an early demise, so strive to reduce sitting as much as possible. I also recommend walking 7,000-10,000 steps each day, over and above your regular fitness regimen.

- ***Optimize your vitamin D.*** Researchers report that there is a correlation between insufficient levels of vitamin D and the development of early Parkinson's disease. The important factor when it comes to vitamin D is your serum level, which should ideally be between 50-70 ng/ml year-round, and the only way to determine this is with a blood test. Sun exposure or a tanning bed is the preferred method, but a vitamin D3 supplement can be used when necessary. If you take supplemental vitamin D, make sure you're getting enough vitamin K2 and magnesium as well.

- ***Get plenty of animal-based omega-3.*** Omega-3 fats, such as that found in krill oil, serve an important role in protecting your brain cells. It works in part by preventing the misfolding of a protein resulting from a gene mutation in neurodegenerative diseases like Parkinson's.

- ***Avoid as many chemicals and toxins as possible.*** This includes tossing out your toxic household cleaners, soaps, personal hygiene products, air fresheners, bug sprays, pesticides, and insecticides, just to name a few, and replacing them with non-toxic alternatives. An organic diet is the best way to limit exposure to pesticides associated with Parkinson's disease. Also avoid prescription drugs in favor of more natural approaches, whenever possible.

Get FREE access to Dr. Mercola's Top Health and Fitness Tips, call toll free: 877-985-2695 and go to ***TerryWahls.com*** for more incredible information about her and her reversing her progressive multiple sclerosis.

PRO CALENDAR FOR NOVEMBER 2016

The current support group meeting locations are listed below.
For any information regarding any of these meetings, please contact the PRO Office at 877-775-4111.

		1	2	3	4	5
6	7 PALM DESERT Caregivers Only 10:00 am PRO Office 74090 El Paseo	9 PALM DESERT Mitch's Pitches PRO Reception & Dinner 5:30 pm 73951 El Paseo	9 GLENDDORA Emotional & Educational Support Caregivers Only 6:30 pm Kindred Rehabilitation at Foothill 401 W Ada Ave	10 NEWPORT BEACH Emotional & Educational Support Caregivers Only 6:30 pm Oasis Senior Center 801 Narcissus Corona Del Mar	11	12
13	14 PALM DESERT Emotional & Educational Support Round Table 8:30 pm Atria Hacienda 44-600 Monterey Ave	15	16 ENCINO Caregivers Only 7:00 pm Providence Tarzana Outpatient Therapy Cntr 5359 Balboa Blvd	17 WEST LA Emotional & Educational Speakers Meeting 6:30 pm OPICA Adult Day Care Center 11759 Missouri Ave	18	19
20	21 PALM DESERT Caregivers Only 10:00 am Portola Community Center 45480 Portola	22	23	24	25	26
27	28 PALM DESERT Educational Speaker 6:30 pm Atria Hacienda 44600 Monterey Ave	29 MANHATTAN BEACH Emotional & Educational Support Round Table 6:30 pm Parish House 659 15th Street	30			

CAREGIVER MEETING: (For caregivers only) Come share the ups and downs of living with someone with Parkinson's. Together there are ways of finding solutions that, when alone, might never be considered. No need to continue with your frustrations because you are not alone. Give yourself a break.

EDUCATIONAL MEETING: We invite the community, especially the Person with Parkinson's and their family or friends, to attend. Educational meetings usually feature guest speakers who are professionals servicing the Parkinson's Community. Educational meetings are packed with a wealth of amazing information so bring your pencil and notepad!

"ROSEN ROUND TABLE" MEETING: Join a loving circle of like-minded individuals including local professionals. Learn what works for others, share what works for you. Find out what doesn't work for certain individuals. Share emotional trials and tribulations. Realize that you are not alone and that others can relate to and learn from your story.

"Although the world is full of suffering,
it's full also of the overcoming it."

— Helen Keller

NEWSWORTHY NOTES

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PARKINSON'S RESOURCE ORGANIZATION

Working so no one is isolated because of Parkinson's

74-478 Highway 111, No 102 • Palm Desert, CA 92260-4112

760/773-5628 • 310/476-7030 • 877/775-4111 • 760/773-9803

eMail: info@ParkinsonsResource.org • web: ParkinsonsResource.org

501(C)(3)#95-4304276

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