

Parkinson PULSE

Connecting people living with Parkinson disease in Alberta





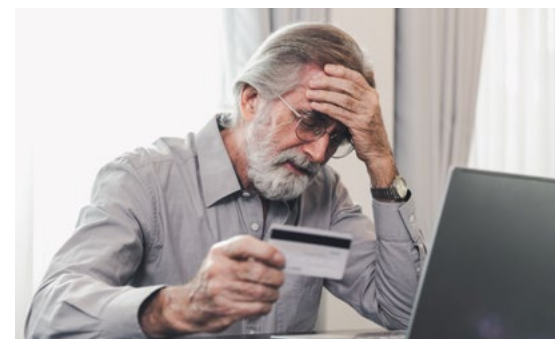
WINTER SOCIALS

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|  <p>TUESDAY, NOVEMBER 21</p> <ul style="list-style-type: none"> • St. Albert • Fort Saskatchewan • Leduc |  <p>TUESDAY, DECEMBER 5</p> <ul style="list-style-type: none"> • Sherwood Park |
|  <p>WEDNESDAY, NOVEMBER 22</p> <ul style="list-style-type: none"> • Rocky Mountain House • Lacombe |  <p>WEDNESDAY, DECEMBER 6</p> <ul style="list-style-type: none"> • Medicine Hat • Red Deer |
|  <p>THURSDAY, NOVEMBER 23</p> <ul style="list-style-type: none"> • High River / Okotoks • Parkland |  <p>THURSDAY, DECEMBER 7</p> <ul style="list-style-type: none"> • Strathmore • Lethbridge |
|  <p>TUESDAY, NOVEMBER 28</p> <ul style="list-style-type: none"> • Bonnyville |  <p>FRIDAY, DECEMBER 8</p> <ul style="list-style-type: none"> • Calgary |
|  <p>WEDNESDAY, NOVEMBER 29</p> <ul style="list-style-type: none"> • Camrose |  <p>WEDNESDAY, DECEMBER 13</p> <ul style="list-style-type: none"> • Airdrie • Grande Prairie • Olds |
|  <p>THURSDAY, NOVEMBER 30</p> <ul style="list-style-type: none"> • Vermilion • Lloydminster |  <p>THURSDAY, DECEMBER 14</p> <ul style="list-style-type: none"> • Cochrane • Canmore |
|  <p>FRIDAY, DECEMBER 1</p> <ul style="list-style-type: none"> • Edmonton | |

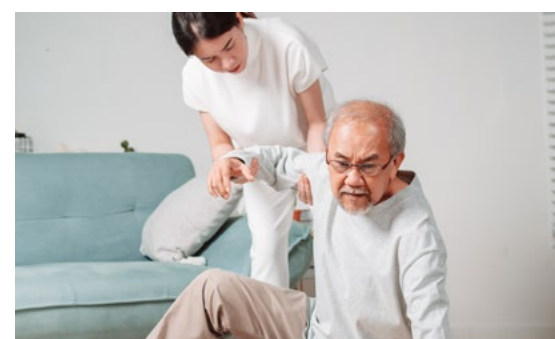
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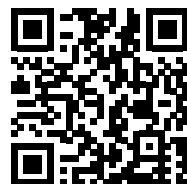
Parkinson Association of Alberta is the source for support, education and inspiration for people impacted by Parkinson disease and Parkinson's Plus Syndromes, and engagement in important quality of life research with an emphasis on Alberta.

CONTACT US

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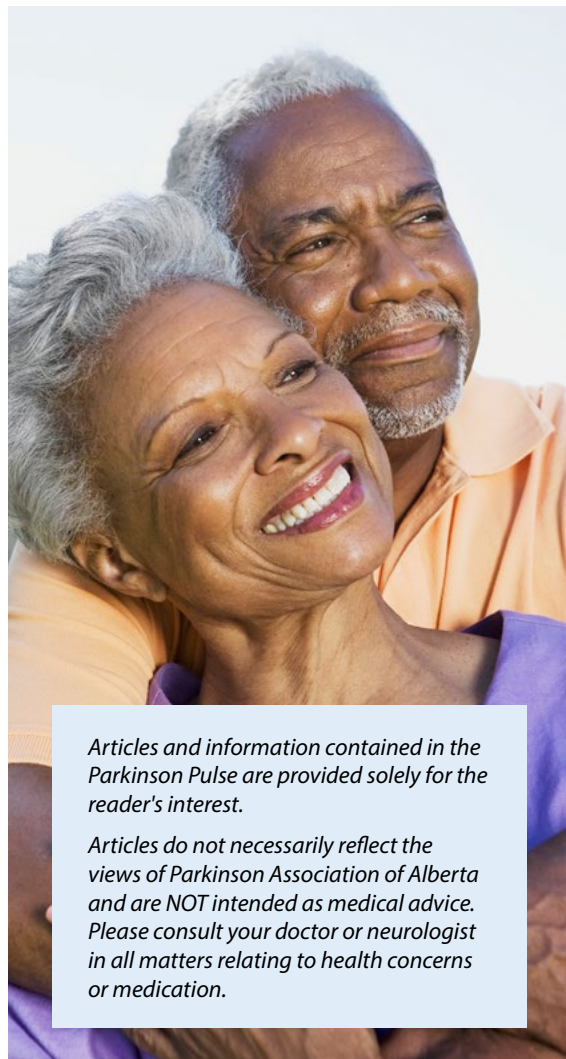
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Articles do not necessarily reflect the views of Parkinson Association of Alberta and are NOT intended as medical advice. Please consult your doctor or neurologist in all matters relating to health concerns or medication.



Message from our Executive Director

Dear friends,

As we reflect on summer 2023, our team at PAA is grateful for the support and engagement of our great community. Social events culminating in our September Step 'N Stride Walk for Parkinson's kept us all connected while we planned for a new season of programming this fall. We look forward to November's Hope Conference and new opportunities to provide meaningful education as we welcome record numbers of new friends to our organization.

This edition of Pulse focuses on safety. This very broad topic can relate to physical, emotional and mental health. The need to consider adjustments to our daily lives can come upon us really gradually and sometimes we don't even realize there are risk factors present. It can take the input of those around us to recognize that changes might be necessary. And sometimes, it's hard to admit we need help. In the following pages, you will find some ideas around how to keep yourself safe as either a person with Parkinson disease or a care partner, as well as why it's so important. As always, should you find yourself with questions or if you need help getting started, please reach out to our team.

All the best for a safe and peaceful season ahead.

Lana

We're here for you

A safe and caring community of support

1-800-561-1911



SAFETY FIRST



Written By: Brandi La Bonte

Independence and safety; many a discussion happens around family dinner tables, over coffee, and right here at Parkinson Association of Alberta, focusing on these very topics. Often independence and safety are approached as an either/or scenario – if I (or your loved one) want to remain independent, it isn't going to be safe. Or, if I (or your loved one) want to remain safe, then I have to give up my independence. Quite black and white views on two topics that are full of grey -- at once separate yet intimately intertwined. It is improbable to have independence without safety, especially as you age.



Older adults, especially those who live alone and/or have Parkinson disease or a Parkinson's Plus Syndrome, must contend with a variety of safety challenges: falls which can bring about serious injury, cognitive issues that can lend themselves to safety concerns, vulnerability to fraud and scams, and difficulties in sustaining a lifestyle and/or activities to which they've become accustomed to as aging progresses. These challenges are real and should not be taken lightly; that said, they do not negate the desire to remain independent.



Independence in seniors is vital. Autonomy is a valuable aspect of character, earned from the time we have spent on this earth. Our mood, identity, and self-esteem are intrinsically tied to our ability to make our own choices throughout the day.

There is a delicate balance between independence and safety. As we age and/or our Parkinson's progresses, changes to physical and mental health can have an impact on the independence we once enjoyed. And at the same time losing independence can have a negative ripple affect (physical health issues and compromised emotional well-being). Finding the balance in this tricky situation can come from a few places: awareness, preparation, and a slight adjustment in the language we use regarding the two.

"I want to stay at home."

According to a Statistics Canada poll 85% of Canadians said they'd do "everything they can" to age at home. This is an understandable, even relatable statement however it is missing some important context. Might we suggest **"I want to stay at home as long as it is safe to do so."**

In this issue we focus on "Safety First," to not only identify and address safety concerns; but also help you establish the framework necessary to remain independent, safely for as long as possible.

Navigating Hallucinations and Delusions



Written by: Brienne Leclaire

Living with Parkinson's disease presents a unique set of challenges among them, hallucinations and delusions can significantly impact the quality of life for both people with Parkinson's and their loved ones. These non-motor symptoms, although distressing, can be managed and distress reduced with the right strategies and support. We will explore practical ways for people with Parkinson's and their loved ones to cope with hallucinations and delusions.

Hallucinations are sensory experiences that seem real but are not based on external stimuli, these can be seeing, hearing, feeling, or smelling something that is not there. Delusions involve holding strong beliefs that are not grounded in reality. These can be thoughts or ideas such as the belief someone is in the house, or someone has taken an action but did not. These symptoms can occur as a side effect of Parkinson's medications, particularly dopamine agonists or due to changes in the brain due to Parkinson's progression.

Communication and Education:

Open Dialogue: Encourage open and honest communication between those involved. This helps create a safe and supportive environment where all concerns and experiences can be shared without judgment. This dialogue can help in managing the distress caused and aid in getting effective help and support to manage hallucinations and delusions or pinpoint the causes.

Educate Yourself: Learn about Parkinson's disease, its progression, and the associated non-motor symptoms such as hallucinations and delusions. Understanding the underlying causes and common triggers will help

you respond empathetically and effectively to yourself or someone else experiencing these.

Seek Professional Guidance: Consult with healthcare professionals experienced in Parkinson's disease, such as neurologists or movement disorder specialists. They can provide tailored advice, medication adjustments, and recommend therapeutic interventions to address these symptoms. You may also wish to seek out support from a counsellor to help manage any distress or anxiety hallucinations and delusions are causing.

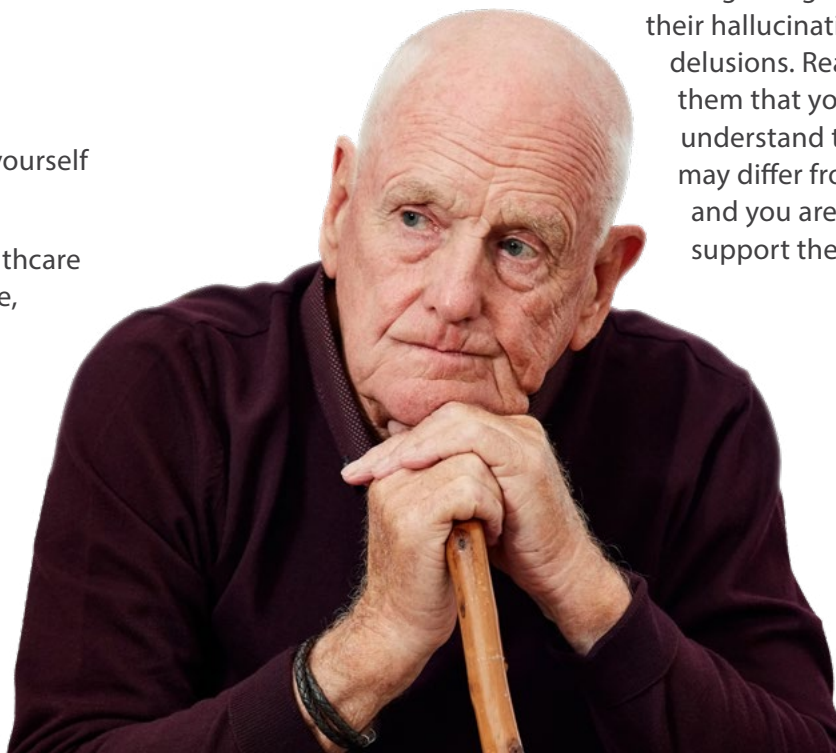
Practical Strategies:

Maintain a Structured Routine: Setting up a consistent daily routine can help reduce anxiety and confusion, providing a sense of stability to reduce the frequency or severity of hallucinations and delusions. Stick to regular mealtimes, medication schedules, and engage in activities that promote mental and physical well-being. Schedule important appointments or activities around the hallucination or delusion pattern/triggers. For example, if evenings are difficult arrange to have lunch with friend's vs supper.

Understand Triggers: Each individual's hallucinations and delusions may be triggered by different events, stimuli, or timing. Recognizing the individual triggers can help manage these symptoms and reduce the stress caused by them. Some common triggers are low lighting, fatigue, medications, and stress. These symptoms may also become worse in the evening or during nighttime.

Create a Calm Environment: Reduce or limit where interactions with triggers. Such as dim lights/shadows or excessive noise. Maintain a well-lit and clutter-free living space that promotes relaxation and safety. This creates a more calming environment and reduces stress.

Validate Experiences: Acknowledge the experiences and emotions you are having around hallucinations and delusions. If it is your loved one experiencing these validate the experience and emotions without dismissing or arguing against their hallucinations or delusions. Reassure them that you understand their reality may differ from yours, and you are there to support them.



Engage in Reality-Oriented Activities: Encourage participation in activities that ground the individual in reality. Reading, puzzles, and engaging in conversations about current events can redirect attention and reinforce their connection to the present.

Ensure Optimal Medication Management: Work closely with the healthcare team to find the right balance of medications that can minimize hallucinations and delusions without compromising the management of other symptoms. Regularly review medications to assess their effectiveness and potential side effects. Make notes between appointments about possible triggers, changes in symptoms and how the medication is working. This can help prepare you for appointments and help you communicate to your health team.

Supportive Therapies: Cognitive-behavioral therapy (CBT) and counseling can provide individuals with coping strategies and help them manage the emotional impact of hallucinations and delusions. Consider seeking counselling to develop personalized techniques to navigate these symptoms.

Safety Measures: Take precautions to ensure the safety of all individuals involved. If you or your loved one becomes upset or disorientated during these times remove potential hazards, such as sharp objects or tripping hazards, and consider assistive devices or home modifications as needed.

Hallucinations and delusions can be challenging for individuals with Parkinson's disease and their families to manage. By fostering understanding, maintaining open communication, and implementing practical strategies, it is possible to navigate these symptoms effectively. Remember, seeking professional advice and support is essential in developing a comprehensive management plan tailored to an individual's unique needs. Together people with Parkinson's and their loved ones can work towards improving their quality of life and promoting overall well-being.

Safety at Home

Aging in Place with Parkinson's



Written By: Connie Luu, Occupational Therapist

As Parkinson's progresses along with normal aging, it is common to start wondering how long you can stay safely and independently in your current home. While there is the option to downsize or look at moving into a supported living facility, there are many reasons why one may wish to stay in their home. These include familiarity with the community, proximity to supports (family, medical care, amenities), financial reasons and more. In this article, we will discuss some ways to make your home safer, allowing you to age in place.

General recommendations

- » **Ensure walking paths are clear and clutter free.**
 - Remove throw rugs or secure with double-sided rug tape.
 - Make sure cords and cables are well managed.
- » **Check for adequate lighting throughout the home.**
 - Pay special attention to high-risk areas - e.g., stairs, pathway from bedroom to bathroom, entrances and exits.
 - Use rocker instead of toggle switches, or better yet, motion activated.
- » **Wear supportive shoes with a non-slip sole and flat or low heel.**
- » **Increase colour contrast.**
 - Put coloured tape/paint on steps and stairs to help with depth perception.
 - Use bright colours to highlight light switches, grab bars, door handles.
- » **Choose uniform flooring with high slip resistance.**
 - Changes in surface can increase incidence of freezing - if unable to change floor, try placing a strip of tape on either side to act as visual cue
- » **Change knobs (doors, faucets, drawers) to lever handles or any other style of handle that is large and easy to grip.**

Timing

Another common question regarding home modifications is "when?" That will depend on your Parkinson's progression, type of home you live in, financial resources, and many other factors. Often, there is hesitation to make changes to the home when you are young or have not progressed to a certain stage yet, but it is always better to be proactive than reactive. In other words, make changes in your home today to prevent falls in the future, rather than after a fall and all the detrimental consequences that follow has already occurred. Many of these recommendations are not Parkinson's specific and can benefit others living in as well as visitors to your home.

Common problem areas

Do you have trouble...	Possible solutions
Getting in and out of bed	<ul style="list-style-type: none"> » Adjust bed height by replacing mattress/box spring or using furniture raisers. » Use satin bed sheets (e.g., Comfort Linen) or wear satin pajamas to reduce friction. » Install bed rail, transfer pole or overhead trapeze.
Going up and down the stairs	<ul style="list-style-type: none"> » Put anti-slip treads on each step. » Install handrails on both sides. » Install stair lift or alternative stair assistants (e.g., AssiStep). » Move bedroom and bathroom to main floor to reduce need to go upstairs.
Using the toilet	<ul style="list-style-type: none"> » Raise toilet seat height - either by replacing toilet, or adding a raised toilet seat » Toilet safety frame. » Use a bidet or toilet wiping aid to help with wiping. » If getting up to use the bathroom frequently during the night is an issue, consider a bedside commode.
Getting in and out of the shower	<ul style="list-style-type: none"> » Install grab bars - wall mounted or tub clamp-on are preferred over suction. <i>Shower rods or towel racks are not designed to support human weight!</i> » Put non-slip mat or anti-slip treads inside tub. » Sit to shower on a shower chair, or for those with more significant balance issues a transfer tub bench. » Lower bathtub threshold by using a bathtub cut-out conversion kit. » Replace bathtub with a walk-in shower.



Funding

Making these changes to your home can be quite costly. Here are some funding programs through the government that you may be eligible for:

- » **Alberta Aids to Daily Living (AADL)**
<https://www.alberta.ca/alberta-aids-to-daily-living.aspx>
- » **Home Accessibility Tax Credit**
<https://www.canada.ca/en/revenue-agency/services/tax/individuals/topics/about-your-tax-return/tax-return/completing-a-tax-return/deductions-credits-expenses/line-31285-home-accessibility-expenses.html>
- » **Residential Access Modification Program (RAMP)**
<https://www.alberta.ca/residential-access-modification-program.aspx>
- » **Seniors Home Adaptation and Repair Program (SHARP)**
<https://www.alberta.ca/seniors-home-adaptation-repair-program.aspx>

For help applying for funding or determining what modifications or equipment are best suited for you in your home, contact Alberta Health Services - Continuing Care Access or your Client Service Coordinator to get connected with an Occupational Therapist.



Our 11th Annual Step 'n Stride was another huge success, as we joined together with over 1,300 people from our Parkinson's community. Together, we shared stories, created new friendships, supported journeys and celebrated our strong Parkinson community!

Step 'n Stride is your day, and a chance to celebrate with you all of your victories and successes, and we sincerely hope you all enjoyed your day with us as much as we enjoyed spending it with you!

We had tasty food and beverages, amazing entertainment, fun activities, on-site massages and plenty of sunshine, but most of all, we were together, and walked together, to support everyone living with or loving someone with PD or PD+.

We are once again extremely humbled by the generosity of our participants, donors, volunteers and sponsors, and cannot thank everyone enough.

We look forward to seeing you again next year!

Thank You

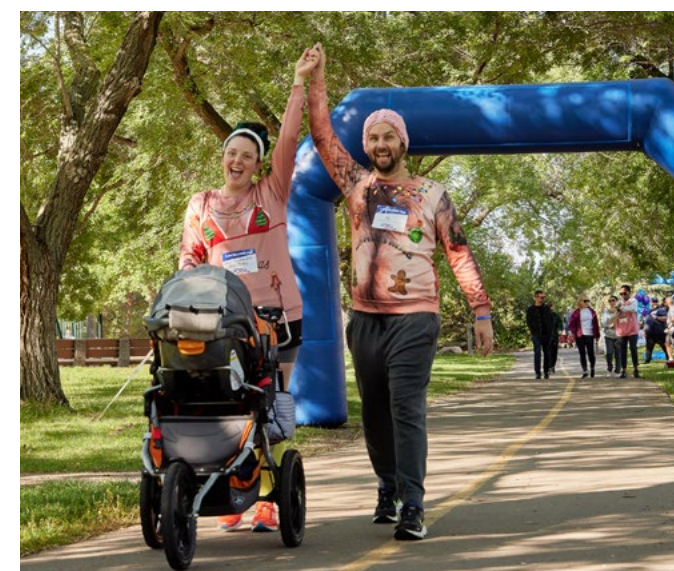


Our many sponsors, partners and volunteers deserve a round of applause for their dedication to providing their time and efforts to our community.

Thank you to every person who helped make our event a success!

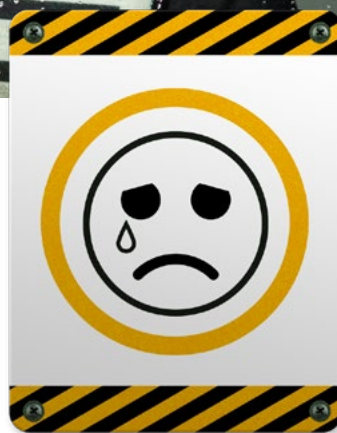
It is because of your ongoing support that we are able to continue to impact the lives of people living with PD & PD+.

Across Alberta, over \$350,000 was raised to further support our Parkinson's community!



Elder Abuse

Keeping Yourself and Your Loved Ones Safe



Written By: Brandi La Bonte

Abuse can happen to anyone, no matter one's age, sex, race, or ethnicity. In this article we address elder abuse. The abuse of older individuals, also known as elder abuse, is an intentional act (or failure to act), by a person in a position of trust/power (family member, friend, caregivers, health care provider, etc) that causes harm to an adult 60 years and older. A 2022 World Health Organization report states that globally 1 in 6 people aged 60 and older experience some form of abuse in the community every year: with rates in institutions (nursing homes, senior living, and long-term care facilities) even higher.

Abuse can happen anywhere, including in the older person's home, a family member's home, an assisted living or long-term care facility.

There are six common types of elder abuse:

- » **Physical abuse** happens when someone causes bodily harm; for example, by hitting, pushing, slapping, kicking, or restraining an older adult against their will, such as by locking them in a room or tying them to furniture. Physical abuse can also include the misuse of an older person's medications/prescriptions such as withholding medication, over-medicating, or not complying with prescription refills.
- » **Emotional/Psychological abuse** can include a person saying hurtful words, yelling, threatening, humiliating, or repeatedly ignoring the older adult. Isolating the person from close friends, relatives, or activities is another form of emotional abuse.
- » **Neglect** occurs when a person does not try to respond to the older adult's needs. Neglect may include ignoring physical, emotional, and social needs, or withholding/delaying food, medications, or access to health care.
- » **Abandonment** is leaving an older adult who needs help alone without planning for their care. ****Both neglect and abandonment can be intentional or unintentional, based on factors such as ignorance or denial that a senior needs as much care as he or she does.**
- » **Sexual abuse** involves any sexual contact without consent. This can include forcing an older adult to watch or be part of sexual acts, or undress without consent.
- » **Financial abuse** happens when money or belongings are misused or stolen from an older adult. It can include forging checks, taking someone else's retirement or seniors' benefits, withholding access to money or financial information, or using a person's credit cards and bank accounts without their permission. It also includes changing names on a will, bank account, life insurance policy, or title to a house without permission.

If an older person is isolated or unable to advocate for themselves, it may be difficult or impossible for them to seek out help. Those in regular contact with an older person are often more aware of the individuals' "normal" wellbeing and routines and are better equipped to identify changes that might suggest abuse.

There are many signs that may indicate elder abuse, watch for a pattern that might suggest a problem and seek help if you are concerned. Signs of abuse can include (but are not limited to):

- » Physical injuries/changes, such as unexplained bruises, burns, cuts, scrapes, scars, dislocations, broken bones, or weight loss. Unexplained anal/vaginal bleeding, venereal diseases, or vaginal infections.
- » Unexplained or uncharacteristic changes in behavior such as becoming withdrawn, unreasonably fearful/suspicious, agitated, or violent.
- » Display signs of trauma such as rocking back and forth, seems fearful around certain people.
- » Lack personal health care items such as glasses, a walker, dentures, or hearing aids.
- » Personal hygiene issues such as being left dirty/unbathed, lack of clean/appropriate clothes (ie: a sweater if it is cold), or poor dental hygiene.
- » Untreated bedsores.
- » Have hazardous, unsafe, or unclean living conditions.
- » Signs of insufficient care or unpaid bills despite having adequate financial resources.
- » Large withdrawals from bank accounts, suspicious changes to wills, power of attorney, etc, or other unusual activity.

If you feel YOU are being abused, seek help. If you feel you cannot leave safely confide in someone you trust – a friend, family member, Parkinson Association Client Services' Coordinator, healthcare professional, church member, etc. If you are in immediate danger, call 9-1-1.

If you suspect a loved one/older person is being abused there are a variety of ways to get help and support.

First, if safe and possible document what is happening to your loved one (notes, photos, etc.), if the danger is immediate call 9-1-1. Second, speak to someone about your concerns. Parkinson Association of Alberta Client Services Coordinators can help as can the 24-hr Family Violence Info Line (310-1818). Alternatively, many cities and communities in Alberta have Elder/Senior Abuse helplines and resources – find the one nearest you here <https://www.albertaelderabuse.ca/getting-help>.

If you suspect abuse is happening to an adult receiving care or support services from publicly funded service providers such as hospitals, seniors' lodges, nursing homes, mental health facilities, shelters, group homes, addictions treatment centres and other supportive living settings call the **Protection for Persons in Care Reporting Line at 1-888-357-9339**.

Elder abuse is a serious issue, and one we often don't talk about openly. By talking about it, recognizing the signs, and reaching out for help, together we can keep all older people safe.



Old Dogs, New Tricks

Staying Safe in the Digital World



Written By: Brett Leclaire

Scams and fraud have been around forever – the dishonest merchant placing his thumb on the scale when weighing out goods, get rich quick schemes, vendors selling magic cure-alls, or the guy who wants to “sell” you the Brooklyn Bridge. There will always be

con artists, snake oil salesmen, swindlers, hustlers – these folks aren’t new; they’ve just learned new methods for the same old tricks.

Technology (think computers, cell phones, iPads, etc) plays a big role in our daily lives from catching up with friends, to online shopping and banking. And while there are a lot of great things about technology, there can be a shadier side. Scams. Most of us have encountered scammers through spam calls or odd emails; and with advancing technology new ways to scam people will continue to evolve. When we share social media profiles, take quizzes online that seem fun, or throw away papers with personal information on it, we are exposing ourselves to potential harm. Scams have become more sophisticated and widespread, making it easier for scammers to gather our personal information and play on our emotions. It is essential for us to stay vigilant and informed about the latest tactics to protect ourselves from falling victim.

So, where to begin? It is most important to note that while the methods and technology may have evolved over the years, the underlying principles of scams remain similar: enticing victims with false promises like offering deals or promotions on items, exploiting trust by asking more invasive questions throughout a conversation, and attempting to deceive for financial gains through asking for payment for items or services.

Staying safe from scams begins with staying informed about the latest scam tactics and understanding how scammers operate. Keep yourself updated on the latest scams and fraud schemes through a reliable source such as the Canadian Anti-Fraud Centre (<https://www.antifraudcentre-centreantifraude.ca/index-eng.htm>). This Government of Canada website not only has a comprehensive listing of scams, but also provides a place to report any fraud or scam activity you might have experienced.

Here are some tips:

- » **Be cautious with personal information and never share sensitive data with unsolicited callers or emails.** If you receive a call from someone claiming to be from your bank or a government agency asking for personal information, hang up immediately. Look up the official contact number for the organization, call them directly, and inquire about the purpose of the call. Banks, government departments, and other legitimate companies respect your right to safety so explaining to them your intentions will always be understandable.
- » **Be aware of any unexpected offers or requests, especially if they involve financial transactions.** Be equally cautious when receiving emails with urgent requests to update your account information, change your password, or verify personal details. It’s best not to click on any links from unfamiliar sources; however, sometimes the emails LOOK official. A good trick for this is to first check the actual email address (not just the name of the sender) to be sure it is familiar. Next hover/hold (but don’t click) your mouse over any links to check the actual name of the site and make sure it matches the official website.



- » **Use strong passwords for online accounts and keep your devices updated with security software.** Create unique passwords for each online account that have a combination of letters, numbers, and symbols like question marks and exclamation marks. Avoid using easily guessable information, such as your name or birthdate. Consider using a note pad to keep track of websites and corresponding passwords. Install reputable antivirus software on your computer and keep it up to date.

It can be a rollercoaster of emotions for people who have found themselves victims of a scam. Feelings of frustration, anger, regret, or shame can come from being taken advantage of. These feelings are valid, but it is important to find the right avenue to receive help as soon as possible. Talking to family members and loved ones about what happened is the first step. They can help navigate next steps to mitigate loss and damage and help identify solutions to protect yourself moving forward.

Second, be sure to report scams and fraudulent activity to the Canadian Anti-Fraud Centre (listed previously). Be sure to document the way you were contacted, what they knew about you, and any communications you still have access too. Lastly, contact your financial institutions and secure any information that may have been compromised by the scam (ie: change/update passwords). Doing so can stop any further funds from being taken from your account.



By adopting these practices and seeking advice from trusted sources, such as family members or friends who are knowledgeable about online security, you can shield yourself from scams and enjoy the digital world with confidence and peace of mind. Remember that vigilance and knowledge are your strongest allies in staying safe from fraudulent activities. This is their job so they will work hard to get what they want so we need to be careful. If it seems too good to be true, then most likely it is.



Common Scams

Watch out for these **red flags!**



- » “Government” officials threatening fines or arrest.
- » Utility companies claiming unpaid bills.
- » “Banks” claiming overdrafts on accounts that need to be settled.
- » A company claiming you have a delivery notice or unpaid invoice that you did not order/purchase
- » Tech support companies claiming they need to fix an urgent issue on your computer
- » A person claiming to be a relative reaching out through new numbers or email addresses asking for money.
- » What looks like either your bank or the CRA requesting you to share login/any information.
- » What looks like your friend/family member asking for money/wire transfer or for you to check out a link
- » A random stranger or company saying you won a prize/money or an inheritance or offering an unsolicited home service or repair
- » A new/newer relationship (romantic or otherwise) where the person has an “emergency” and needs your financial help
- » An email claiming to have embarrassing personal/private videos/photos/information about you that they are threatening to release
- » A website selling a too-good to be true or cure-all product

PROGRAM NEWS & UPDATES

Movin' & Groovin' – A Dance Program for Parkinson's (Edmonton)

This six-session program aims to improve gait and balance, stimulate cognitive function, and help with feelings of depression and isolation. All while having fun, learning some dances moves and get you moving so you feel great! While not a couple's dance program, spouses, family and friends are welcome to register and participate!

Winter Socials

Our winter socials are a fun and relaxing opportunity to meet others that Parkinson's has impacted, chat with new and familiar faces, and meet some of our volunteers! Join us to wrap up this amazing year we have had and celebrate the upcoming holiday season. Call or email to register.

Hope Conference

Our annual Hope Conference for Parkinson's will take place on Saturday, November 4, 2023, 9AM-3PM. This educational event aims to provide hope, education, and practical tips to the Parkinson's Community. The event features four speakers presenting on various aspects of Parkinson's. Join virtually for free (visit <https://parkinsonassociation.ca/> to register) or join one of our in-person viewing parties for \$10/person (call 1-800-561-1911 to register).

WHAT'S NEW?

Important Dates to Remember

All PAA Offices will be closed on the following dates:

October 2
Truth & Reconciliation Day

October 9
Thanksgiving

November 13
Remembrance Day

November 17
Staff Planning Meeting

December 25 – January 2
Winter Break

February 19
Family Day


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FALL Prevention Know Your Risks

By: Jacquie Townsend, BMR PT with Action Potential Physiotherapy

Falling and a fear of falling are common realities for many people living with Parkinson disease (PD). Knowing what steps to take to prevent falls and how to get up after a fall are important components of managing PD. Between 45 and 60% of individuals living with PD have a fall each year. Falls in adults aged 65 years and older account for 85% of all injuries resulting in hospitalization¹⁻³. A fall can have catastrophic consequences, including injury, reduced quality of life, fear of fallings, and withdrawal from normal daily activities with dependence on caregivers or care providers. In fact, incidences of hip fractures due to falling for an individual with PD is 4 times higher than age-matched individuals living without PD⁴. Any of these consequences can lead to further decline in health and function, which subsequently increased risk for falls.

PD is but one of the many potential risk factors, including general health, age-related system changes, gender, social support, environmental, education, and economic status.

Some risk factors for falls are not modifiable. For example, we are not able to change our age or the fact that we have a health condition such as Parkinson's. Modifiable risk factors can include exercise, diet, medical treatments, and use of assistive devices.

Everyone will have their own combination of risk factors which can lead to a fall, therefore there is no single approach to fall prevention. Understanding our risk factors for falls is the first step towards management.



Are you at risk of falling?



Circle YES or NO for each statement, then tally your score below.

Steps to lower your risk of falling

Have you fallen in the last 6 months?	YES	2	NO	0	Learn more about how to lower your fall risk to prevent yourself from falling again.
Do you use, or have you been advised to use, a cane or walker to get around safely?	YES	2	NO	0	Talk with a physiotherapist to get the best walking aid for your needs.
Do you sometimes feel unsteady when you are walking?	YES	1	NO	0	Exercise to improve your strength and balance.
Do you have to steady yourself by holding onto furniture when walking at home?	YES	1	NO	0	Talk with a physiotherapist for exercises to improve your balance.
Do you worry about falling?	YES	1	NO	0	Talk to your healthcare provider if you are worried about falling, especially if it stops you from being active.
Do you need to push yourself up with your hands to stand up from a chair?	YES	1	NO	0	Do 30 minutes of physical activity 5 days a week. Strengthening your muscles can reduce your risk of falling.
Do you have trouble stepping up onto a curb?	YES	1	NO	0	Keep active to improve strength and balance.
Do you often have to rush to the toilet?	YES	1	NO	0	Talk with your doctor or health care provider about managing the need to rush to the toilet.
Have you lost any feeling in your feet?	YES	1	NO	0	Talk with your podiatrist or doctor because numbness in your feet can cause a fall.
Do you take medication to help you sleep or improve your mood?	YES	1	NO	0	Review your medications, vitamins, and supplements with your pharmacist or doctor yearly or if your prescription changes.
Do you take medication that sometimes makes you feel lightheaded or more tired than usual?	YES	1	NO	0	Talk to your doctor or pharmacist about medication side effects or causes of light-headedness.
Do you often feel sad or depressed?	YES	1	NO	0	Talk to your healthcare provider or doctor about how you are feeling.
Do you have difficulty avoiding hazards in your path because you don't see well?	YES	1	NO	0	Visit an eye doctor yearly to check your eye health.

Add up the number of points for each YES answer. If you scored 4 points or more, you may be at risk of falling.

TOTAL SCORE: _____

Talk to your healthcare provider or doctor for more information.

Parkinson disease presents several risk factors for falling, such as Freezing of Gait (FoG), slowed walking speed, postural instability, dizziness, leg weakness, and cognitive impairments. Fall risks are significantly higher in individuals with the postural instability and gait difficulty subtype of PD, as opposed to those presenting with tremor dominant PD. This is often related to FoG and imbalance, leading to falls being more likely to occur in the home⁵.

Freezing of Gait is one of the largest causes of falls in PD. FoG is a brief and episodic absence of forward progression of the feet despite intention to walk. It may present as feet being "stuck to the floor", or small quick steps in place, or quick shuffled steps.⁶

Slowed walking speed and variable quality steps is another common risk factor for falls in PD. This can be related to short and smaller steps and muscle weakness. When our walking speed slows too much, we can begin to wobble more, leading to an increased risk of a fall.

Postural instability (imbalance) is common in PD and can be caused by many factors, such as changing positions, stiffness, slow response times, and difficulty

coordinating important balance signals.⁷

Dizziness can have many causes. In PD, it is commonly due to orthostatic hypotension, which describes a drop in blood pressure when moving from a laying or seated position into an upright position. For example, getting up too quickly can cause significant dizziness and lead to a fall.

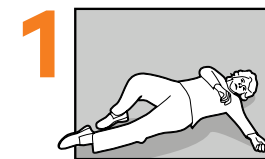
Managing these risks can be challenging. The right help can lead to better mobility with less falls. Your neurologist or physician will help you with medications and medical treatment options to manage symptoms. A Physiotherapist will help by providing exercises to strengthen muscles, manage dizziness, and improve flexibility, coordination, gait, and balance.⁸ In addition to physiotherapy, an Occupational Therapist can provide a home assessment to help understand environmental risks, recommend helpful equipment or assistive devices, and provide cognitive strategies to help maintain attention during mobility.

To find exercises and rehabilitation services for your needs, contact the Alberta wide Rehabilitation Advice Line at 1-833-379-0563. The free service offers advice and can link you to rehabilitation services, such as

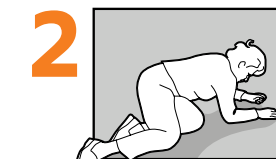
HOW TO GET UP FROM THE FLOOR BY YOURSELF AFTER A FALL

Stay Independent. Prevent Falls.

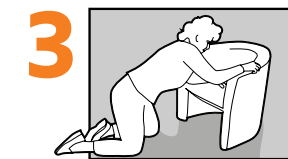
- Calm down.
- Check your body.
- If you are injured, call for help. Stay warm.
- If you are not injured, look for a sturdy piece of furniture.



1 Roll onto your side.



2 Crawl over to a chair or sturdy piece of furniture.



3 From a kneeling position, put your arms up onto the seat of the chair.



4 Bring one knee forward. Place that foot on the floor.



5 Push up with your arms and legs. Pivot your bottom around.



6 Sit down. Rest before trying to move.

findingbalancealberta.ca

"Steady on Your Feet" classes hosted by the Alberta Healthy Living Program. For more information or support on accessing rehabilitation services, you can also contact a Client Services Coordinator with Parkinson Association of Alberta at 1-800-561-1911.

Should a fall occur, it is important to know how to get up. When it is safe to do so, stop moving after a fall to regain your energy and calm down. When necessary,

crawl to supportive furniture or have an able caregiver bring you a step stool or chair to push up on a sit. It is important to report your fall to your physician and health care team to ensure you receive appropriate care.

To learn more about risk factors and fall prevention, speak with your physiotherapist, and check out findingbalancealberta.ca for online tools and resources.

Resources

¹ Paul S.S, Sherrington C, Canning C.G, Fung V.S, Close J.C, & Lord S.R. The relative contribution of physical and cognitive fall risk factors in people with Parkinson's disease: a large prospective cohort study. *Neurorehabil Neural Repair*. 2014 Mar-Apr;28(3):282-90. doi: 10.1177/1545968313508470. Epub 2013 Nov 15. PMID: 24243915.

² Scott, V., Wagar, L., & Elliod, S. (2011). *Falls & related injuries among older Canadians: Fall-related hospitalizations & prevention initiative*. Prepared on behalf of the Public Health Agency of Canada, Division of Aging and Seniors. Victoria, BC: Victoria Scott Consulting.

³ Fasano A, Canning C.G, Hausdorff J.M, Lord S, & Rochester L. Falls in Parkinson's disease: A complex and evolving picture. *Mov Disord*. 2017 Nov;32(11):1524-1536. doi: 10.1002/mds.27195. Epub 2017 Oct 25. PMID: 29067726.

⁴ Walker, R.W., Chaplin, A., Hancock, R.L., Rutherford, R., & Gray, W.K. (2013). Hip fractures in people with idiopathic Parkinson's disease: Incidence and outcomes. *Mov Disord*, 28: 334340. <https://doi.org/10.1002/mds.25297>

⁵ Pelicioni P.H.S, Menant J.C, Lad M.D, & Lord S.R. Falls in Parkinson's Disease Subtypes: Risk Factors, Locations and Circumstances. *Int J Environ Res Public Health*. 2019 Jun 23;16(12):2216. doi: 10.3390/ijerph16122216. PMID: 31234571; PMCID: PMC6616496.

⁶ Cosentino, C., Baccini, M., Putzolu, M., Ristori, D., Avanzino, L. & Pelosin, E. (2020). Effectiveness of Physiotherapy on Freezing of Gait in Parkinson's Disease: A Systematic Review and Meta-Analyses. *Mov Disord*, 35: 523-536. <https://doi.org/10.1002/mds.27936>

⁷ Palakurthi B, & Burugupally S.P. Postural Instability in Parkinson's Disease: A Review. *Brain Sci*. 2019 Sep 18;9(9):239. doi: 10.3390/brainsci9090239. PMID: 31540441; PMCID: PMC6770017.

⁸ Sparrow D, DeAngelis T.R, Hendron K, Thomas C.A, Saint-Hilaire M, & Ellis T. Highly Challenging Balance Program Reduces Fall Rate in Parkinson Disease. *J Neurol Phys Ther*. 2016 Jan;40(1):24-30. doi: 10.1097/NPT.0000000000000111. PMID: 26655100; PMCID: PMC4681297.

**2023
RESEARCH
AWARD
RECIPIENTS**

Each year, Parkinson Association of Alberta raises funds to directly support Alberta's Parkinson's research community. Our sincere thanks goes to the numerous contributors to this fund in 2022, raising nearly \$200,000 for 2023 awards.

We are pleased to announce the following successful applicants.



Raissa De Andrade

**Cummings School of Medicine, Department of Radiology
Graduate Studentship Award (\$20,000/year 2 years)**

Terra Fairbanks

**Cummings School of Medicine, Department of Clinical Neurosciences
Graduate Studentship Award (\$20,000/year 2 years)**

Vibujithan Vigneshwaran

**Cummings School of Medicine, Department of Radiology
Post-Doctoral Fellowship Award (\$50,000 one time payment)**



Research funding competitions are held in April of each year (subject to change) and applications are reviewed and graded by highly qualified individuals outside the province of Alberta. Final selections are made by the Parkinson Association of Alberta Research Committee and Board of Directors.

Congratulations to this year's successful applicants and we look forward to learning about your research projects over the coming year.


Hope
CONFERENCE

Navigating the Journey – Hot Topics

**SATURDAY
NOVEMBER 4**

9am - 3pm

Join us virtually or LIVE at one of our 5 viewing events



**Edmonton
Red Deer
Calgary
Lethbridge
Vermilion**

Our Guest Presenters:



DR. VERONICA BRUNO
MD, MPH
Advanced Treatments



DR. ARIANA FARRAND
PHD
Bio Markers



DR. OKEANIS VAOU
MD, FAAN
*Sleep Issues & Symptom
Management*



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