



# movement

News Journal of  
Parkinson's Disease and Movement Disorder Society (PDMDS)

Issue 06 | April 2007

## PDMDS Runs The Mumbai Marathon

We are proud to announce that the Parkinson's Disease and Movement Disorder Society (PDMDS) registered and participated in the Mumbai Marathon held on 14th January 2007. Charity has always been at the heart of Asia's largest marathon - the Standard Chartered Mumbai Marathon which has emerged as the single largest charity - generating event in our country across all fields. This year 6778 runners participated and 6212 people raised pledges for various causes.

Mr Pierre D'souza (brother of Dr Maria Barretto) was our dream runner who ran the dream run to raise awareness and funds for the



Our PDMDS Dream runner  
Mr. Pierre D'souza.

society. We profusely thank him for not only participating in this mega charity event, but also for his personal contribution and the amount he raised through pledges from his friends and associates. We also thank all those who have graciously contributed towards this event. The full list of donors appears on page 8. Your contribution will surely help the PDMDS to achieve its objective of improving the quality of life of people living with Parkinson's.

Next year we look forward to greater involvement in the Marathon and an increase in the number of pledges raised to help the PDMDS achieve its objectives.

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The contents of *movement* aim to provide the maximum possible facts /information but since some information involves areas of personal judgement, their publication does not mean that the PDMDS necessarily endorses them. All contributions are welcome. Essays should be restricted to 750 words, and letters to 200. Your questions too are welcome. Contributions must include your name, address, phone no. and occupation. All materials submitted become the property of PDMDS.

### *movement*

The Editor (G. S. Kohli),  
Flat D-510, Milton Apts.,  
Juhu Azad Rd., Juhu Koliwada,  
Santacruz (W), Mumbai- 400 049.  
Phone : 65761242

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## From the editor's desk



Its settled: Yoga significantly helps PD patients. Over the last 3 years, a large number of PD patients & caregivers have probed its usefulness in relation to each ones own sense of 'Wellness', and an increasing number of voices can be heard saying, 'I am more mobile, I take more initiative, I feel optimistic ...and I'm no longer depressed'. Similar sounds, though in a different dialect, can be heard from the 'Exercise' initiative taken by some Support Groups under the PDMDS for their zeal & zest. Hurray!

You perhaps have noticed that the role of the patient & the caregiver is going through a rapid positive transition. Shedding the proverbial veil of inhibition, an ever increasing number can now be seen struggling their way to gatherings & meetings organized by the PDMDS or various Support Groups. Till some time ago, they had to be carted to & fro their residences.

Returning to this news update, Mrs. Shail Pandey has volunteered to share

some notable moments in her life. Our dream runner Mr. Pierre D'souza, who participated in the Mumbai Marathon on behalf of the PDMDS may have appeared to the naked eye, to have run alone, but thousands ran behind the torch-bearer with the same courage, only in a slightly slower lane! Indeed, 'Team PDMDS' needs no prodding.



Today's Parkinsonian doesn't take it lying down. He has more questions about its etiology, prognosis and therapeutic options than the medical fraternity has answers to. For instance, let us take 'The Hidden Face of Parkinson's Disease'- depression which occurs in a very large number of PD patients, yet is not so readily recognized. Even though it is treatable, for some reason, till a while ago patients were uncomfortable talking about it. I recall writing about

*Contd. on next page*

it a couple of years ago, but refrained to show it the light of day. Ms. Preeti Sunderaraman, Clinical Psychologist, has it covered in this issue.

There is a lot of ongoing research to either find a cure or in the interim, better treatment for PD. These include therapeutic options, stem cell & surgical intervention. A large number of patients & caregivers have suggested that the current / latest position in these fields be

reported upon, as it is not possible for most of them to know such details on their own. They contend that even to ask a question, some basic subject familiarity is required. The point is well taken & from the next update we hope to give you 'Research News'.

Parkinson's Disease and Movement Disorder Society (PDMDS), a 'charity society' brings you this Update as one of its commitments, to bring about

awareness & information on movement disorders, with the objective of helping the patient, the caregiver, the social worker and, of-course the medical community to collectively improve the quality of life of those afflicted. All those interested in knowing more or helping promote the cause may call me on phone 65761242, or e - m a i l a t : guru\_kohli@rediffmail.com

Remember, you're never alone.



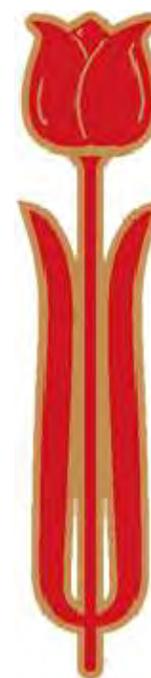
## Significance of the Red TULIP

World Parkinson's Disease Day is celebrated on April 11 in commemoration of Dr. James Parkinson's birthday (1755 - 1824) who established the disease as a clinical entity in a paper entitled An Essay on the Shaking Palsy.

The tulip has been adopted as a symbol by many Parkinson's disease organisations around the world. Similarly, the European Parkinson's Disease Association (EPDA) chose the tulip as their logo.

The general concensus, supported by the Working Group on Parkinson's Disease (formed by the World Health Organisation in 1997), is that the EPDA logo be used as the worldwide symbol for Parkinson's Disease.

By wearing the Red TULIP you are raising awareness and showing your support for people living with Parkinson's and their families around the globe.





# PDMDS Links With Bangalore

Mr John Barrett

Secretary of Parkinson Disease Society of Karnataka (PDSK)

Report on the Public Meeting for Parkinson's Disease patients held at the Rotary Hall of Friendship, 20, Lavelle Rd Bangalore 1, on 2nd February 2007 at 4.30pm.

The Parkinson Disease Society of Karnataka (PDSK) in association with the Rotary Club of Bangalore arranged the meeting. The objective was to inform Parkinson's patients of the activities of the Parkinson's Disease and Movement Disorder Society (PDMDS) and the Iyengar Institute of Yoga in Mumbai.

Unpublished data involving about 50 Parkinson's patients in Mumbai had shown significant improvements in flexibility, mobility, well being and other parameters of the disease in those persons who followed the program laid down by the Institute. Caregivers were also an important part of the program. PDSK'S view was that Yoga under the supervision of a neurologist, and if properly and carefully applied, would do no harm and probably assist the patient. This has been



The President of the Rotary Club of Bangalore addressing the meeting alongwith Mr. Barrett and Mrs. Mayura Prahlad

the general experience in the West also.

Dr. Maria Barretto of PDMDS and Ms. Arti Mehta of the Institute, who came down from Mumbai, gave lectures. Dr Barretto explained about PDMDS, the reasons for the trial and the results. Ms Mehta mentioned the book called "Light on Yoga" by Sage Patanjale. Iyengar Yoga uses supports such as walls, chairs, ropes and blankets to help its practitioners reach the required asanas. The audience was advised

of the diverse features of Yoga.

They were told that precision; timing, sequencing and step by step progression were important aspects of the study. Photographs with many case studies were shown during the lecture.

The PDSK Secretary Mr Barrett said that the hope was that either a study would commence in due course in Bangalore or if there were not enough persons available then those who wished to learn Iyengar Yoga would be referred to the centers around the town.



# Relocation and Me

Mrs. Shail Pandey

I had never thought of moving out of Mumbai at this stage of my life. But as my son took up a new job at the Garden City of Bangalore, I had to shift base even though I had an option to stay in Mumbai. Though there were many scary apprehensions the thought of going to a new place, making new friends with a promised advantage of having a painting room all to myself was very exciting. Moreover I also was a Parkinson's patient for the last 10 years. 'Will I have good, understanding, approachable doctors and friends as I had in Mumbai?' - all these thoughts plagued me.

After shifting, for the first time in my life I lost all confidence, all symptoms associated with PD: depression, crying spells, dyskinesia, anxiety - everything engulfed me.

Then something that had helped me rejuvenate and embalm my body and soul in time of trauma was my God given talent for creativity, especially my painting. I got myself so engrossed in the medium that all symptoms associated with my PD diminished.

Regaining my lost confidence a bit, I was motivated to move ahead and also thought of engaging myself in

some activity that will keep me occupied and indirectly enable me to help other PD patients.

I called Dr Maria Baretto the coordinator of PDMDS in Mumbai and expressed my desire. Though I had met her briefly in Mumbai, she recognized me and was very enthusiastic about it.

She asked for my CV and forwarded it to some doctors like, Amita Patel and John Barret the vice president and secretary of the Parkinson society in Bangalore. They in turn were very kind enough to visit me at my home, which gave us a chance to know about the activities of the society in Mumbai and Bangalore.

Then during the All India Neuro conference in Bangalore Dr Baretto visited me, along with Mayura Prahlad and her cousin Shubha- two other dedicated people associated with the Parkinson society in Bangalore.

*contd. on the next page*



Mrs. Shail Pandey proudly displays her art.

*contd....*

We saw the presentation of Dr. Baretto and were highly impressed. It was very informative and encouraging. It dealt with subjects like diet, yoga, care giving, speech therapy, in PD and its management and ofcourse the medicines. The contribution of many doctors and

the interactions of patients during the question answer sessions were very insightful.

I conclude by saying that besides the professionals in the neuro-field, the part of the executive committee members, the role of dedicated people like Mrs. Mayura Prahlad, and Shubha are like life

support to PD patients. May their tribe increase.

I also take this opportunity to thank Dr Maria Baretto, Amita Patel, John Barret, Mayura, Shubha and Dr Ashok Singhal of Apollo Sagar - they were like life buoys to my sinking confidence during my relocation. God Bless!



## PDMDS - An Update On Our Activities

Preeti Sunderaraman  
Clinical Psychologist

### **Borivili Support Group Meetings Held On- 4th November '06, 2nd December '06, 6th January '07, 20th January '07.**

On the 4th , the session commenced with Dr Manoj Rajani (neurologist), educating the patients about Parkinson's disease and briefing them about its etiology, prognosis and the various therapeutic options. The session was interactive with several patients asking queries, especially about prognosis. Dr Renuka the physiotherapist spent 40 minutes with the patients demonstrating different exercises. The session lasted for 2 ½ hours.

On the 2nd, Dr Maria Barretto and Ms Preeti Sunderaraman (Clinical Psychologist) started the session by explaining in depth the contents of the Nutrition manual. This was followed by Dr Manoj Rajani elucidating the different pharmacological interventions and also discussing the latest research on drug therapy. The session was interactive with the patients clearing several commonly held misconceptions.

On the 6th January, Ms Preeti Sunderaraman conducted the session with the patients. The theme selected for discussion was depression and the different ways

of coping with it. Exercises to strengthen facial muscles were also demonstrated. A New Year resolution, to involve all members and help them showcase their talents and have a 'fun' activity during every such meeting, was made by the group. The agenda for the forthcoming meeting was decided with the help of the group.

On the 20th, we kick-started the session with Mr Amrik Singh playing the piano as was decided in the previous meeting. Everyone seemed to enjoy the musical event, with them clapping and even singing to familiar Hindi, Marathi and even Gujarati tunes. This was

followed by Ms Preeti teaching the group, exercises for the hand, primarily the warm up exercises. A brief discussion about the common problems faced by the individuals with Parkinson's and its impact on their lives was also held.

### **Nair Hospital Support Group Meetings Held on- 9th November '06, 14th December '06, 8th February '07**

On the 9th, the Nair hospital neurology team along with the physiotherapist Dr Renuka conducted the meeting. A comprehensive talk was given on Parkinson's disease by the neurologists with the help of OHP. Hence the patients found it interesting and also helped improve their understanding about the basic brain structures and various neurotransmitters involved in the process. The physiotherapist demonstrated exercises for the various parts of the body and also in order to improve muscle flexibility. The session lasted for 3 hours.

On the 14th, the physiotherapist Dr Sonal talked about the importance of facial expressions. With the help

of hand held mirrors she demonstrated how they could practice the facial exercises. The speech therapist, Dr Gayatri of the speech therapy department at Nair Hospital explained in detail with the aid of OHP the mechanisms involved in the production of speech and also the steps needed for swallowing food and water. The session ended with the patients clarifying their doubts regarding speech related issues.

On the 8th, the neurologist team with the help of pre-recorded video demonstrated the various positions in which the physiotherapy exercises could be done. The CD also showed patients showing the correct method of doing exercises. This was followed by Dr Gayatri's interactive session with the patient's regarding their specific speech related problems. She then went on to demonstrate different throat and voice modulation exercises for each of the specific problems that had been gathered from the earlier discussion. She also gave excellent handy tips to everyone present in general to improve their articulation.

### **Hinduja Support Group Meeting Held on 29th November '06**

Dr Gayatri initiated the session with detailed explanation given to patients on the steps involved in chewing and swallowing. She taught about the different muscles involved in the process with the help of clear and concise drawings. This was followed by Dr Charulata Sankla's presentation on the past and present developments in pharmacotherapy. She explained about the importance of the various dosages and their probable side effects. Ms Preeti then addressed the issue of depression in PD and about the ways of coping with it. The session ended with Dr Maria Barretto, the coordinator of PDMDS, interacting with members of the audience and informing the group about the up-coming events. She also ensured that all the members of the audience received the Nutrition manual along with the latest issue of the PDMDS newsletter of '06.

### **Wockhardt Hospital Support Group Meeting**

For the first time patients and their

caregivers from Navi Mumbai and north central areas like Chembur, Mulund were invited to attend a support group meeting on 15th December at Wockhardt Hospital, Mulund. Dr Shamim Khan welcomed the group and apprised them of the various programs conducted at Wockhardt for patient and carer support and education. Dr Preeti Sahute presented data about the prevalence and incidence rates of PD in India and talked in detail about its etiology. She also discussed the biophysiology of the disease and about the therapeutic options currently available.

Subsequently Dr Doshi discussed the available surgery options in advanced Parkinson's disease.

### Iyengar Yoga Sessions

A second yoga program for Parkinson's was conducted from October to December 06 at the Iyengar Yoga Institute, Lower Parel. After the ten day regular session the yoga sessions were held on every Wednesday. Due to the tremendous positive responses that we have received from the patients plans to organize a third term of yoga sessions are in the pipelines.

### PDMDS Thanks You For Your Support at the Mumbai Marathon

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#### DETAILS OF YOGA PROGRAM FOR PARKINSON'S TO BE CONDUCTED BY IYENGAR YOGASHRAYA

Date : 23rd April to 4th May, 07. (Weekends off)

Time : 4.00 p.m. to 5.30 p.m.

Venue : Iyengar Yogashraya, 126, Elmac House, Senapati Bapat Marg, Opp. Kamala Mills, Lower Parel, Mumbai.

Cost : A consolidated sum of Rs 1000/- for the 10 sessions.

Concession and sponsorship available if required.

Register immediately. Admissions on first come first serve basis.  
Contact details for registration:

Tel. No : Iyengar Yogashraya Ms Rohini 24948416  
(from 9.00 a.m. to 4.00 p.m.only)

For further details : Ms. Preeti Sunderaraman - 9322593169



# Exercise In Parkinson's Disease (Part - II)

By Nawaz Irani  
Clinical Psychologist

Our last issue of 'Movement' featured the article "EXERCISE IN PARKINSON'S DISEASE (PART - I)". As promised there, we bring you the concluding part of the article, which includes a simple sample exercise program that can be practiced by all PD patients on a daily basis.

Firstly, one should be guided by their doctor, physiotherapist or health care professional when devising an exercise program.

Secondly, the aim should be to build up to five to ten repetitions of each exercise, and ideally, the exercise program should target the following:

- **Overall fitness**
- **Muscle flexibility**
- **Face**
- **Head and shoulders**
- **Arms and torso**
- **Hands and wrists**
- **Legs.**

## Overall fitness

Walking is excellent for overall fitness.

Suggestions include:

- Choose flat, obstacle-free terrain.
- Gently stretch your leg muscles before you start walking.
- Taking larger strides may help you keep better balanced.
- Focus on lifting each foot and placing it down heel first.
- Count each step this can help to make a smoother, more rhythmic walking style.
- Move your arms as you walk, if possible.
- If walking isn't practical or possible, explore other options such as water aerobics or stationary cycling.
- Aim to perform aerobic exercise about three times per week.

## Muscle flexibility

Stretching suggestions include:

- Hold an easy stretch and don't bounce.
- Maintain the stretch for up to 30 seconds.
- Repeat each stretch twice.
- If you feel any pain or discomfort, ease off.
- Incorporate gentle stretching into your warm up and cool down routines.

## Face

Pull faces at yourself in the mirror.

Suggestions include:

- Surprise lift your eyebrows and open your mouth.
- Displeasure frown and purse your lips together.
- Disgust crinkle your nose as if you smell something that is truly awful.
- Pleasure make a big smile.

## Head and shoulders

Suggestions include:

- Turn your head slowly from left to right, aiming to glance over each shoulder.
- Lift your face to the ceiling, then drop your chin to your chest.
- Drop your left ear to your left shoulder. Straighten up. Drop your right ear to your right shoulder.
- Raise and lower your shoulders. Roll your shoulders forwards, then backwards.

## Arms and torso

Suggestions include:

- Clasp your hands and raise your arms overhead. Lower slowly.
- Stretch out one arm at a time in front of you then out to the side, using the other hand to hold on to the chair if necessary.
- Put your hands behind your head and open out your elbows.
- Put your hands on your hips and

lean forward a little. Straighten up.

### Hands and wrists

Suggestions include:

- Touch your shoulders, and then straighten out your arms up above your head.
- Rotate your hands so the palms face up then down.
- Bend your hands at the wrists up and down.
- Clench and unclench your fists.

### Legs

Suggestions include:

- Lie flat on your back, bend one knee, and hug it to your chest.

Straighten the leg. Repeat with the other leg.

- Sit down, extend one leg and make a circle with your foot. Repeat on the other side.
- Point your toes and then lift your foot, pulling your toes towards you.
- While sitting down, straighten one leg at a time.
- While sitting down, slowly raise and lower your leg as if stamping your foot in slow motion. Repeat with the other leg.
- Perform stationary marching, lifting each leg as high as you can.
- Stand behind a chair and hold on. Lift one leg high to the side. Put

your foot back on the floor, and repeat with the other leg.

### Light weights

Light weights can increase the intensity of your exercise program. You could buy weights that strap with Velcro tape closures to your wrists and ankles, or else use household items such as water-filled bottles. Choose a weight that you can push (without pain or fatigue) for an easy 10 repetitions. Only increase the weight once you can comfortably perform three sets of 10 repetitions.



## Depression in Parkinson's Disease

Preeti Sunderaraman  
Clinical Psychologist

Most of us are aware of the main motor symptoms of Parkinson's disease - tremors of hands and legs, slowness of movement, a shuffling gait and soft slurred speech are easily recognized by us as being part of Parkinson's disease. Besides these, there are other nonmotor symptoms, which commonly occur in PD but are not so readily recognized. Depression is one of them. Depression occurs in nearly 40-50% of PD patients. It can occur at any stage of the illness. It sometimes occurs even before the

onset of motor symptoms. Depression is one of the most important factors affecting the quality of life of people with Parkinson's disease. Hence it is important to recognize and treat depression in PD as early and effectively as possible. The symptoms of depression are -

- Persistent sad, anxious, or "empty" mood
- Feelings of hopelessness, pessimism
- Feelings of guilt, worthlessness, helplessness

- Loss of interest or pleasure in hobbies and activities that were once enjoyed, including sex
- Decreased energy, fatigue, being "slowed down"
- Difficulty concentrating, remembering, making decisions
- Insomnia, early-morning awakening, or oversleeping
- Appetite and/or weight changes
- Thoughts of death or suicide, or suicide attempts
- Restlessness, irritability

*contd. on the next page*

If five or more of these symptoms are present every day for at least two weeks and interfere with routine daily activities such as work, self-care, and childcare or social life, seek an evaluation for depression.

Depression is a treatable disorder. Antidepressants help alleviate the symptoms and hence improve the quality of life. There are several other ways of coping with depression. A few of them are mentioned below

1. Confide - Share your thoughts and feelings with your family and friends. This helps you to unburden yourself and make you feel instantly better. You might also be surprised that several of your friends may be sharing the same anxieties and thoughts as you. They make you realize that you are 'not alone'. Hence being with your friends and receiving their support may act as a 'social buffer'.

2. Tell your physician about the symptoms. Even if it may not seem important to you, it is always better to disclose even the smallest of your worries.

3. Counselling - Being with a professional counselor may help you adopt a different perspective on your illness. Regular sessions also help you discover yourself and help gain insights about your life.

4. Joining a support group - This is one of the most beneficial ways of helping you identify with other people who are 'just like you'. Apart from gaining vast amount of information about the treatment options, you get to interact and make new friends.

5. Keep yourself busy - As the saying goes 'An idle mind is a devil's workshop'. Keep yourself occupied by joining clubs (laughter clubs, yoga groups, music classes,

etc). This once again makes you become a part of a social group and helps you relax.

6. Exercise - Engage in any physical activity for at least half an hour each day. It may include brisk walking, dancing, gyming, cycling basically anything that suits your condition. But remember to start a regular regime only after consulting your doctor.

The above-mentioned strategies are not the only ones. You can be innovative and may adopt many other ways of coping like going on family picnics, going for a vacation with your spouse, making a decision to start learning something new like painting or singing.





# Healing Power of The Mind and Spirit In Parkinson's Disease

Ronald Rodrigues

The power of faith, prayer, love and hope is immeasurable. Learning to tap into our spiritual selves and the world is a highly personal endeavor. Ways to begin this process include exploring one's faith and belief in a higher power or God. Daily treatment of your spirit is just as important as your daily medication or daily exercise

I have continued to grow in awareness of my spiritual nature. In fact getting Parkinson's has helped me to do so. I used to be one of those perfectionist personalities and Parkinson's has taught me to slow down and enjoy the simple pleasures. I realize that the body I inhabit is only a small part of me and it doesn't change who I am inside. I am seeing the world through new eyes and I am closer to God, thanks to Parkinson's disease

The power of faith, prayer and positive thoughts can be miraculous in some cases. I pray

daily and accept God's will in my life. I try to stay focused on the good that has come out of this. I have some limitations with my physical functions but that each day is a gift that I intend to use well.

I still have that choice of choosing my attitude. My belief in God and my associated faith in him continues to be the most significant factor in the quality of my life. I believe God has a plan for me, which happens to include this bout with Parkinson's disease. My goal is to conform my plan for my

life to his plan. My quest is to discover that purpose and to fulfill it.

Parkinson's disease does not alter the plan or purpose of my life it only provides an added dimension to the journey

And so as I come to the conclusion- it is my belief, my prayer, my hope, my dream that all of us will learn to explore our spiritual nature and cultivate this part of ourselves in order to unleash its power to help us live more harmonious, balanced and healthy lives.

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INTAS ASTERA



# You Ask - We Answer

Q1. I was wondering if two different types of medicines prescribed for two different medical conditions can be had simultaneously (at the same time). Example medicines for diabetes or for any other heart condition can be had simultaneously with parkinson's medicines.

-Mr. D' Lima

Ans: In general medicines for two different medical conditions (like diabetes and heart disease) can be taken simultaneously with Parkinson's medications. It would, of course, be wise to inform your doctor prescribing these medicines, of your PD status, in case he wishes to make some alterations

Q2. Is there any proportion of water and medicines that has to taken for maximal effect?

-Mr. R. D. Rao

Ans: I do not think there is any fixed proportion of water and medicines to be taken for maximal effect. It is wise to drink a good amount of liquid daily to maintain good hydration and prevent

constipation. Taking the drug along with fizzy drinks is supposed to improve the drug's absorption.

Q3. What is the order in which one must have Parkinson's medicines? Is there any 'best' time when one should consume the medicines?

-Mr. R. D. Rao

Ans: I don't think there is a definite order in which the PD drugs can be had. PD drugs can be taken on an empty stomach or after meals. On an empty stomach the drug effect occurs faster but the incidence of nausea and acidity is more. If taken after a meal, it takes longer for the drug to act, but the drug effect may remain for a longer time. One word of advice is to avoid milk with levodopa. Milk significantly affects the absorption of levodopa from the stomach.

Q4. Is there any relation between hand tremor and leg tremor?

-Mrs. Anjana Shah

Ans: In PD, rest tremor can occur over any part of the body. It can affect the hands and legs.

Usually, in the early stages, the tremor is more over one side involving both the hand and leg. Sometimes the hand tremor is more noticeable and sometimes it is the leg tremor. Usually the tremor is not as disturbing to the patients as the rigidity and slowness of movement (bradykinesia).

Q5. After sitting on the floor for sometime, when I try to get up I feel dizzy for a few seconds. Why does this happen to me? Is this common?

-Mr. Pritam Herwani

Ans: This is most probably due to postural hypotension. This means that when a person gets up from a sitting or lying down position, the blood pressure falls, causing giddiness. Postural hypotension does occur in Parkinson's disease and is mainly due to the drugs used. Almost all the drugs used have this side effect. So if this occurs, it is better to consult your doctor. He may need to adjust your medications. You should also increase your fluid and salt intake.



# About Us

The Parkinson's Disease & Movement Disorder Society (PDMDS), formed in 2001, is an all India 'Registered Charity Society'. It works to improve the quality of life of people with Parkinson's disease and movement disorders.

## Objectives

- To develop and coordinate support groups. To act as a liaison between the various chapters and support groups in India.
- To disseminate the knowledge and understanding of Parkinson's Disease amongst the medical community, public, patients and their relations. Towards this goal to publish newsletters and books.
- To organize workshops, seminars, conferences, and other functions to promote the cause of Parkinson's disease.
- To encourage research in all aspects of Parkinson's Disease and Movement Disorders.

## Activities

The PDMDS conducts regular seminars for patients and their caregivers. Eminent speakers are invited to deliver guest lectures

during these seminars. Panel discussions and interactive question and answer sessions are also conducted.

The 7th World Parkinson's Day international symposium was hosted in December 2003. Over 35 international experts and others from all over India participated. The World Health Organization and the Movement Disorder Society cosponsored the symposium. At this meeting a Global Declaration was launched (Please turn over to view the global declaration). Mrs Mary Baker, Chairperson, European Parkinson's Disease Association (EPDA) and prominent industrialists and celebrities signed this declaration.

## Support Groups

To provide emotional and social support in the vicinity of their homes and to create awareness on the multidisciplinary approach to Parkinson's, the society has initiated several support groups.

These groups meet at regular intervals. Lectures and demonstrations that highlight the importance of physiotherapy, occupational therapy, speech therapy, diet and nutrition and

yoga in the management of Parkinson's are held.

## Newsletter

The PDMDS regularly publishes a newsletter MOVEMENT. It includes information on activities of the society and articles related to various aspects of Parkinson's Disease.

## Publications

- A book "Parkinson's Disease and Movement Disorders" edited by T.N. Mehrotra and Kalyan Bhattacharyya for neurologists and physicians has been published.
- A booklet titled 'A Nutritional guide to Parkinson's Disease' has been compiled and distributed at the support group meetings.

## Research

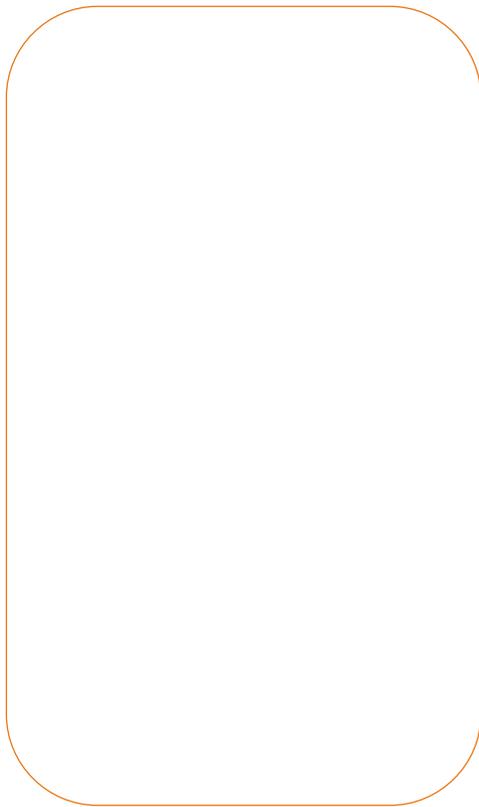
- The society in association with the Iyengar Yoga Institute has conducted a research study "To investigate the effectiveness of yoga on Parkinson's Disease".

A study "To assess the prevalence of Non-motor symptoms in Parkinson's Disease" is currently being conducted.



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**Book-Post**



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 6, Jasville, 1st Floor, Opp. Liberty Cinema,  
 Marine Lines, Mumbai – 400020.

A different journey awaits each one, but our destination is the same.

As the PDMDS moves further forward in this journey, our destination has been to reach out to you. For some of us the journey is through bringing you information, for others it is through answering your doubts, for still others it has been through bringing each of you closer to each other.

Similarly, your destination has been to deal with the disease, but the journey through it has been different for each of you. We at PDMDS are extremely keen on knowing what your experiences have been. In a similar vein we would also like to know what you have taken from **movement** – your comments and criticisms; what you would like to see in **movement** – your suggestions and questions. So please write to us.

Besides **movement**, localized support groups, seminars, national and international representation have helped PDMDS move closer towards its goal to “Make the PD World Smaller.” To make it still smaller we invite non-member patients to become a part of our society. Moreover, none of our existing patient-members should have to miss out on being a part of the activities or receiving an update of **movement** because of a change in residence. Therefore keep us informed of any change in address or telephone numbers. We further invite any organizations or support groups associated with PD & movement disorders, anywhere in the world, to get yourselves enrolled in our mailing list, and we request enrollment into your mailing list.

PDMDS’ consistent goal, being a ‘Charity Society’, has been to make the healthcare system accessible, to spread awareness of tried but dormant ways, and discover new ways of making a difference in the lives of patients and caregivers. It goes without saying that funding is required for these purposes, and therefore we request those well-wishers interested in making donations to our efforts and cause, to contact us.

If you wish to correspond with us for any of the above, or require any information regarding the same, the contact details are given as follows:

Address all correspondence to:  
**THE PARKINSON'S DISEASE & MOVEMENT DISORDER SOCIETY,**  
 Dr. B. S. Singhal  
 Bombay Hospital,  
 12 Marine Lines, Mumbai 400 020  
 Tel: (91 22) 2206 8787, 2206 4747  
 E-mail: [alfmaria88@hotmail.com](mailto:alfmaria88@hotmail.com) / [ktvania@vsnl.com](mailto:ktvania@vsnl.com)