

# MOVEMENT DISORDER DIGEST

News from the Johns Hopkins Parkinson's Disease and Movement Disorders Center



## New Additions

The Johns Hopkins Parkinson's Disease and Movement Disorders Center is pleased to welcome four allied health and research team members: Gerson Suarez-Cedeno, MD, Sydney Baybayan, BA, Gabriela Gomez, BS, and Chelsea Ganc, BS, MS, CHES.

Below, please find information about them and their roles on our team.

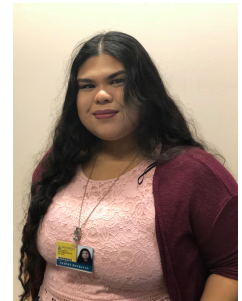


### Gerson Suarez-Cedeno, MD

Dr. Gerson Suarez-Cedeno started his 2-year fellowship program at the Johns Hopkins Parkinson's Disease and Movement Disorder Center in July 2018. He is a graduate of the Universidad de Antioquia Medical School of Medellin, Colombia. While there, he performed in vitro research of the neuroprotective effects of antioxidants against toxins that cause Parkinson-like diseases. During his training here, he hopes to learn about Movement Disorders and how best to provide care to our patients and families.

### Sydney Baybayan, BA

Sydney is a new research assistant, originally from Philadelphia. Sydney hopes to take what she is learning while working in the Movement Disorders Clinic into a rewarding career in academia. In her free time—when she's not reading protocols, processing labs, or entering data—she likes to sit down with her ukulele and play a few tunes (anything from Al Green to Mozart).



### Gabriela Gomez, BS

Gabriela is a researcher, artist, and aspiring physician. After studying neuroscience and visual arts at Duke University, she took her enthusiasm for gerontology and neuroscience to the Lab of Behavioral Neuroscience at the National Institute on Aging, where she spent two years as a research fellow. She enjoys collaborating with the Medical Behavioral Unit care team on a tailored music intervention at Johns Hopkins Hospital and connecting with individuals in hospice as a patient companion. Her experience with non-pharmacological interventions and end-of-life care enhanced her research and informed her intention to ground future research in clinical care. Having discerned a vocation in medicine, she recently completed the Post-Baccalaureate Premedical Program at Johns Hopkins to fulfill premedical requirements while continuing to pursue her research interests with the Sphingolipid Signaling and Vascular Biology Laboratory and the Center for Music and Medicine. In her spare time she enjoys painting, writing, and spending time with family.



### Chelsea Ganc, BS, MS, CHES

Chelsea joined the center in September as our new Health Educator. She is a graduate of the University of Delaware with a Bachelors of Science in Behavioral Health. She completed her Masters of Science in Health Promotion in May of 2018. As a Certified Health Education Specialist, Chelsea has an extensive background in community outreach, program implementation and evaluation, as well as motivational interviewing techniques. Chelsea is dedicated to providing ongoing support for members of the Parkinson's community. She feels most alive when she is immersed in her passion: helping others.



## RESEARCH HIGHLIGHT

Department of Psychiatry & Behavioral Sciences

**Humor Perception in Parkinson's Disease (IRB00171818)**

PI: Jason Brandt, PhD

Contact: Victor Del Bene, PhD (410) 502-6338

**Objective:**

To study the relationship between emotional feelings and expression in people with Parkinson's disease (PD), and whether this relationship is related to the degree of "facial masking" often seen in PD.

**Eligibility:**

1. Individuals with PD taking dopamine replacement medication
2. No diagnosis of dementia
3. Able and willing to participate in the on and off-state



## RESEARCH STUDIES

### Currently Enrolling Research Studies in Movement Disorders

Your participation will allow you to have firsthand experience with developing new medical treatments that may be beneficial to others. Current treatment methods for neurologic disorders are only available because of volunteer participants in clinical trials. Clinical trial information is excerpted from [www.clinicaltrials.gov](http://www.clinicaltrials.gov)

### Parkinson's Disease and Related Disorders

#### Parkinson's Progression Markers Initiative: Genetic Cohort (NA\_00039232)

**Objective:** Identify links to PD and learn how the LRRK2 mutation affects certain populations (Part of the Michael J. Fox Foundation *Parkinson's Progression Markers Initiative*)

**Eligibility:** Individuals of Ashkenazi Jewish descent who have a first-degree relative with PD

**P.I.:** Emile Moukheiber, M.D. **Contact:** Kori Ribb: 410-614-2216

#### APL-130277 for the Acute Treatment of OFF Episodes (NA\_00086593)

**Objective:** Evaluate APL-130277 (sublingual version of apomorphine hydrochloride) in treatment of sudden "off time" in PD

**Eligibility:** Individuals with PD taking levodopa and having at least 2 hours of "off time" daily

**P.I.:** George Ricaurte, M.D. **Contact:** Kori Ribb: 410-614-2216

#### Rotigotine for Anxiety in Parkinson's (NA\_00092051)

**Objective:** Eight-week study of rotigotine for the treatment of anxiety disorders in PD

**Eligibility:** Individuals diagnosed with PD experiencing anxiety

**P.I.:** Gregory Pontone, M.D. **Contact:** Kate Perepezko: 410-614-1242

#### Udall Center Longitudinal Study (NA\_00032761)

**Objective:** Examine the relationship between the clinical symptoms of PD and the disease process in brain tissue. Participation involves eventual brain donation.

**Eligibility:** Individuals diagnosed with PD or atypical PD and those without a neurological diagnosis

**P.I.:** Liana Rosenthal, M.D. **Contact:** Catherine Bakker: 410-616-2814

## RESEARCH STUDIES

### Udall Center Brain Donation Program (NA\_00032761)

**Objective:** Examine the pathological changes in the brain tissue of individuals diagnosed with PD or related disorders as compared to controls

**Eligibility:** Individuals diagnosed with PD or atypical PD and those without a neurological diagnosis

**P.I.:** [Liana Rosenthal, M.D.](#) **Contact:** Catherine Bakker: 410-616-2814

### Establishment of a Clinical Neuropsychological Database on Parkinson's Disease and Other Movement Disorders (NA\_0001573)

**Objective:** To assemble cognitive, mood and other psychological test results for use in future studies

**Eligibility:** All PD and ET patients seen for clinical assessment in the Division of Medical Psychology

**P.I.:** [Jason Brandt, Ph.D.](#) **Contact:** Barnett Shpritz: 410-955-1469

### Effects of Subthalamic Nucleus Deep Brain Stimulation on Decision Making in Parkinson's Disease (IRB 00078439)

**Objective:** To determine whether treatment with DBS changes the perceived value of prizes and rewards, attitudes toward risk taking and other aspects of decision making

**Eligibility:** All PD and ET patients seen for clinical assessment in the Division of Medical Psychology

**P.I.:** [Jason Brandt, Ph.D.](#) **Contact:** Barnett Shpritz: 410-955-1469

### Exploring Mechanisms for Neuropsychiatric Symptoms of PD Using Transcranial Direct Current Stimulation (tDCS) (NA\_008795)

**Objective:** To study if tDCS helps depression, cognition or other non-motor PD symptoms

**Eligibility:** All individuals diagnosed with PD who have symptoms of depression

**P.I.:** [Kelly Mills, M.D.](#) **Contact:** Yousef Salimpour: 410-502-2666

### Investigations of Neurovascular Abnormalities in the Olfactory Cortex Using Advanced MRI Technologies (IRB00141396)

**Objective:** To investigate neurovascular abnormalities in the olfactory cortex using advanced MRI techniques

**Eligibility:** PD patients diagnosed for more than 3 years who are able to tolerate an MRI brain scan and undergo smell and memory identification tasks

**P.I.:** [Jun Hua, Ph.D.](#) **Contact:** Adrian Paez: 443-923-9551

## Other Movement Disorders

### General Characterization: Movement Disorders (NA\_000554)

**Objective:** To study the genetic risk factors involved in movement disorders

**Eligibility:** Individuals with PD, atypical parkinsonism, dystonia, ataxia and Lewy body dementia

**P.I.:** [Jeffrey Rothstein, M.D., Ph.D.](#) **Contact:** Sonja Scholz, Email: [sschol5@jhmi.edu](mailto:sschol5@jhmi.edu)

### 4RTNI-2 (NA\_00130505)

**Objective and Eligibility:** Select individuals with CBD, PSP or vPSP; healthy controls, caregiver component

**P.I.:** [Alex Pantelyat, M.D.](#) **Contact:** Diane Lanham: 443-287-4156

### A Randomized Controlled Trial of OnabotulinumtoxinA for Depression in Parkinson Disease (IRB00082708)

**Objective:** To assess the efficacy of onabotulinumtoxinA on depression in persons with idiopathic Parkinson disease

**Eligibility:** Individuals aged 18-95 years diagnosed with idiopathic PD and experiencing symptoms of depression

**P.I.:** [Alex Pantelyat, M.D.](#) **Contact:** Lavinia Rizvi, Email: [lrizvi1@jhmi.edu](mailto:lrizvi1@jhmi.edu)

## EDUCATION

### INTRODUCING TELEMEDICINE

By Emile Moukheiber, MD

With the aging population, the prevalence of Parkinson's Disease (PD) in the world's most populous nations is expected to rise to more than 8.7 million patients, twice as much as in 2005. Current care models do not meet the needs of individuals with Parkinson's Disease. Many have limited access to proper care, and that, when delivered, is institution-based rather than patient-centered, further adding to the inequity of the current care model. In the U.S., 42% of individuals with PD older than 65, and up to 100% of individuals in some rural areas, do not see a neurologist soon after diagnosis. These numbers are further inflated when encompassing the larger scope of Neurodegenerative Disorders, including atypical Parkinsonian syndromes and Ataxia patients. The demand of in-home care is therefore growing due to this demographic shift, along with the evolving social and technological factors. Technological advances have enabled the transition of care back to the home.



We are therefore happy to announce the launch of our new web-based video conferencing service, which may offer similar clinical benefits to that of in-person care, while alleviating some caregiver burden. We will be starting with medical consultations first and hopefully expand to the full scope of multidisciplinary care, tele-rehabilitation, speech therapy, mental health care, and genetic counseling. For more information, please contact our center to see if you

### WHAT IS YOUR WHY?

*A series highlighting our care provider's why factor...*

By Arita McCoy, CRNP

In outpatient nursing, we have the unique experience of caring for patients outside of the traditional inpatient hospital setting. I became involved with nursing because of the dynamic approach that it takes in delivering care to patients, but I always thought that there was more that we could do as healthcare professionals to prevent some of the medical issues that individuals often have in the acute setting. I saw nursing in the outpatient setting as an opportunity to help patients live longer, better lives.



After I graduated from Elon University, I met Becky Dunlop, a nurse at Johns Hopkins, who worked at the Parkinson's Disease and Movement Disorder Center. Becky was passionate about helping people with Parkinson's to manage their own health care, reaching out to underserved communities, and caring for care partners, which really spoke to me. I soon began working in the center, helping with community outreach and education, while in nursing school. This became a mutually beneficial situation, as I was able to absorb all the knowledge I could about PD as I was becoming an active caregiver of my grandmother, who had been diagnosed about 5 years prior. After nursing school and getting some additional work experiences, I was hired as a research/clinical care nurse at the PDMD Center, and several years later finished a Masters degree and began working in my current role as a nurse practitioner.

Working in this center, I have been exposed to a large variety of innovative healthcare delivery methods. We have the unique ability to improve the lives of individuals with movement disorders with the expert options currently available, push these treatments further in more innovative ways (new surgical options, telehealth), and come up with new therapies through clinical trials and investigator-initiated research to change the future.

I am doing this work because I believe that, as a team, we have the amazing opportunity to give patients and their families the best care that we are capable of. Although there is much work to do, it is always rewarding, satisfying and motivating. I am also pleased that we can combine this with community outreach and education, to assist with instilling self-management/motivation, and to reach those who may not otherwise have access to quality care. I am eternally grateful to the Center for providing me this amazing, purposeful experience!

## EDUCATION

## Traveling with Parkinson's Disease

By Karl Robb

Whether you are considering an awe-inspiring trip to the Grand Canyon or a weekend getaway to the mountains, the thought of managing Parkinson's disease and some of the bothersome issues that can crop up while away might be enough to make you stay home. Here is a list of helpful tips that I hope will make you and your travel companions more comfortable on your next vacation.

*The full-length article originally appeared on Parkinson.org*

**Create a checklist.** Following a good list will help you be prepared and not be over-packed.

**Start packing early.** Packing ahead of schedule will allow you to relax and feel less rushed the day you leave. Make sure that the clothes you want to wear are ready (do not wait to wash them the night before) and all the items you want to bring are easily accessible.

**Choose comfort over fashion.** Pack comfortable clothes and walking shoes that will allow you to move freely. Your mobility and flexibility should be a priority when you are on the go.

**Bring extra meds.** Carry at least a week or more of extra prescription medications and a current prescription for refills. Keep your medications in their original, labeled containers in case you need to go through security or get refills.

**Carry a list of your meds and a doctor's note.** You might want to consider getting a laminated copy of your current medications and a letter from your doctor explaining that you are being treated for Parkinson's disease. A document like this might be helpful in case you have a health issue or need to show airport security.

**Pack your meds in your carry-on bag.** Doing so will help you avoid any chance of being separated from your medication. You do not want to lose your luggage with your meds to boot! Make sure you have the generic name of all your meds. Other countries may not have the same commercial name.

**Plot your course before you get there.** Whether you are flying or driving, research your destination and the stops along the way to find out if hotels and rest stops can accommodate your special needs. You can use Google Earth, a website that allows you to zoom in on specific areas such as airports to get a picture of entrances, stairs and more.

**Charge your cell phone.** Make sure your cell phone is charged and ready in case of emergency. Be sure all phone contacts are current.



**Take water and snacks to go.** Pack some portable fruit like an apple, energy bars and some trail mix. Have water on hand so you can take your pills on time. You might want to pack a collapsible cup (available at most drug stores) so you can get water from water fountains.

**Get an early start.** Heavy traffic and long security lines can leave you feeling pressured. Getting an early start will take the edge off a stressful journey. If you need assistance at any point, do not hesitate to ask. A little help will make your trip go more smoothly.

**Pace yourself.** Do not wear yourself out trying to do and see everything. Be realistic about how much energy you have for site seeing activities and other events. Also, pay attention to how you are feeling and rest when you need to.

**Take your meds.** When traveling, it is so easy to overlook a medication dose. Do your best to follow your medication schedule.

**If traveling to a country with a different time zone consider making adjustments to your medications.** Discuss your medication schedule with your physician before your trip.

**Make things easy.** If flying, ask for handicap assistance, consider a non-stop flight and an aisle seat close to the restroom. In your hotel you should ask for a handicap room on the first floor.

**A cruise can be a good way to enjoy vacations for you and your caregiver.** However, if you suffer from motion sickness you should remember that metoclopramide, prochlorperazine and droperidol should be avoided.

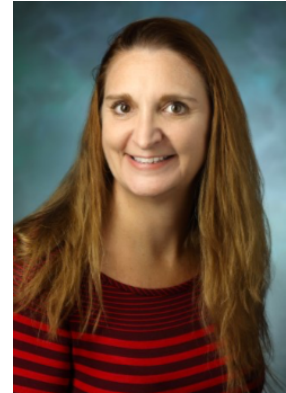
**Enjoy yourself.** Traveling with Parkinson's can be an enjoyable experience, or a real drudgery. Following these tips will help make your next trip a rejuvenating adventure.

## RESEARCH UPDATES

**Do you have Parkinson's Disease and Suffer from Depression?**

By Diane Lanham, MA and Alexander Pantelyat, MD

About 50% of persons with Parkinson Disease will develop symptoms of depression at some point during their illness—at times severe enough to warrant treatment with medication or counseling. Unfortunately, treating depression in Parkinson Disease is difficult, as many persons are sensitive to side effects from medications, do not respond to medications, or do not have enough mobility to go to regular counseling sessions. The ability to offer additional treatment options may increase the chances of improving symptoms of depression when conventional treatments are ineffective or unavailable.



We are currently conducting a study to see if the drug onabotulinumtoxinA (BOTOX®) is helpful for the treatment of depression in individuals with Parkinson Disease.

OnabotulinumtoxinA (BOTOX®) is a synthetic form of botulinum toxin serotype A (BoNT-A) which has been used over the past fifty years in research and for medical reasons. Earlier studies have found that BoNT-A is helpful in relieving symptoms in persons who are suffering from depression. Though the exact mechanism of how this drug helps depression is not known, it is thought to work by limiting the ability to frown and feedback to the emotional parts of the brain from the changes in facial expressions.

OnabotulinumtoxinA (BOTOX®) is approved by the Food and Drug Administration (FDA) for the treatment of strabismus, blepharospasm, hemifacial spasm, cervical dystonia, hyperhidrosis, migraine headaches and cosmetically for frown lines and facial wrinkles. OnabotulinumtoxinA (BOTOX®) is not approved by the FDA for the treatment of depression in Parkinson Disease and therefore its use in this study is investigational. A description of this study can be found at: <https://clinicaltrials.gov/ct2/show/NCT03069911?term=botulinum+toxin+depression&cond=Parkinson+Disease&rank=1>

Participants in this study will be randomly assigned (by chance, like the flip of a coin) to receive either the active study drug (onabotulinumtoxinA) or a placebo (an inactive material that does not contain any active study drug). In this study, the placebo will be a salt-water solution or saline. Participants already taking medications for depression will not need to stop their medications.

If you are an established patient at the Johns Hopkins Parkinson's Disease and Movement Disorders Center, have been diagnosed with Idiopathic Parkinson Disease, and are experiencing symptoms of depression, you may be eligible for this study.

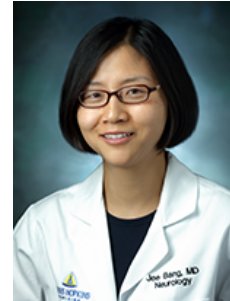
For more information, please contact study coordinator Lavinia Rizvi at [Lrizvi1@jhmi.edu](mailto:Lrizvi1@jhmi.edu).

## RESEARCH UPDATES (cont.)

### Huntington's Disease Clinical Research Update

By Jee Bang, MD

The Huntington's Disease Center of Excellence at Johns Hopkins has been actively leading basic and clinical research for almost 40 years. We provide multidisciplinary care for the patients in the clinic, many of whom are also participating in clinical trials. We also have patients who travel from elsewhere to participate in trials. Here is the summary of the current and upcoming research studies in Huntington's disease (HD):



Enroll-HD is a worldwide observational study for HD families, which has been ongoing since 2013. This longitudinal study measures the progression of the disease by looking at motor, cognitive, and mood and behavior symptoms, and comparing to stage of disease and CAG repeat numbers. Controls, at-risk, pre-symptomatic, and symptomatic participants are all welcome to join. This study also connects the participants with clinical trials. For example, an Enroll-HD participant who also fits the eligibility criteria for a new clinical trial would be invited to join that trial in addition.

HDClarity is a multi-site cerebrospinal fluid (CSF) collection initiative to facilitate therapeutic development for HD. It is an add-on study to Enroll-HD. It involves analyzing biomarker (blood and CSF) pathways for drug development. The participants donate their CSF in a one-time lumbar puncture session (also known as a spinal tap). This study is of great relevance, since many upcoming experimental medications to treat HD are given via lumbar punctures.

Roche has embarked on two new studies for HD patients, which will be coming to American and other international HD centers soon. Both of these studies will test a type of medication called anti-sense oligonucleotide, which is designed to lower the levels of the Huntington protein. The Natural History Study is a multi-site, prospective, longitudinal cohort study measuring cerebrospinal fluid-mutant Huntington protein in patients with HD. This study is set to begin in late 2018. It will be measuring the mutant Huntington protein (mHTT) in the CSF in HD patients, and how it changes within a 15-month period. This study's purpose is to examine the predictive value of baseline CSF mHTT levels on measures of clinical disease progression, MRIs, and cognitive assessments, and change in biomarkers of neuronal injury. All the participants in this study will receive the study drug after the 15-month observational period.

The other Roche study is called GENERATION HD1, which is a randomized, multicenter, double-blind, placebo-controlled, phase III clinical study to evaluate the efficacy and safety of intrathecally (i.e. delivered into the CSF via a lumbar puncture) administered RO7234292 (RO6042) in patients with manifest Huntington's disease. This study is set to begin in early 2019. The participants in this study will undergo monthly lumbar punctures. One third of the participants will receive the study drug, another third will receive alternating doses of placebo and the study drug, and another third will receive the placebo for 25 months. At the end of that period, all participants will receive the study drug.

Please contact the HD research team for any questions about our clinical care or the research trials.

[www.hopkinsmedicine.org/psychiatry/hd](http://www.hopkinsmedicine.org/psychiatry/hd)

Research Coordinators:

Kia Ultz: [kcarte23@jhmi.edu](mailto:kcarte23@jhmi.edu); 410- 955-1349; Jaci Bran: [jbran1@jhmi.edu](mailto:jbran1@jhmi.edu); 410-614-9483

## CENTER UPDATES

### Johns Hopkins Center for Music & Medicine

By Alexander Pantelyat, MD

The Johns Hopkins Center for Music & Medicine (*Music as Medicine. Medicine for Musicians.*) was established in 2015 through a collaboration between the School of Medicine (led by Alex Pantelyat from the Department of Neurology) and Peabody Conservatory at Johns Hopkins. The Center is led by Alex Pantelyat and Sarah Hoover, Associate Dean for Innovation, Interdisciplinary Partnerships and Community Initiatives at Peabody. The Center's vision is to bring music and medicine together by 1) making music and rhythm an integral part of treating illness, and 2) improving the health of musicians worldwide. Using Music as Medicine is a particularly timely endeavor, as the National Institutes of Health have allocated approximately \$5 million in funding for projects dedicated to Music in Health (discovery of mechanisms through which music benefits the brain, and clinical trials) in the next year.



Since its inception, the Center has been conducting a number of clinical studies aiming at improving the lives of patients with various conditions. In particular, the focus has been on Parkinson's Disease. The *Parkinsonics* trial assessed the effects of weekly group singing on the quality of life, voice loudness, mood and movement in patients with Parkinson's Disease. We found objective improvements in voice loudness and quality of life (particularly in terms of communication with others). The ParkinSonics community-based choir developed out of the trial, meets monthly at Govans Presbyterian Church in Baltimore, and is open to patients with all Parkinsonian disorders. It is supported by our Parkinson's Disease and Movement Disorders Center and the Maryland Association for Parkinson Support, Inc. You can obtain more information by contacting, [info@marylandparkinsonsupport.org](mailto:info@marylandparkinsonsupport.org) or 443-470-0279.

More recently, the *Guitar-PD* study assessed the effects of 12 twice-weekly guitar lessons on hand dexterity, overall movement, quality of life, mood and cognition in patients with Parkinson's Disease. The study is a collaboration between guitar faculty at Peabody, including Zane Forshee and Serap Bastepe-Gray, and a research team from our Parkinson's Disease and Movement Disorders Center; the study is supported by our Parkinson's Disease and Movement Disorders Center, the Johns Hopkins Brain Science Institute, and the Steinway Series at Silo Hill. Data analysis is ongoing, and group guitar lessons for patients with Parkinson's Disease are being offered at Towson Peabody Preparatory (949 Dulaney Valley Road, Towson, Maryland 21204; 667-208-6650).

The next study we are planning is Drum-PD/HD, which will assess the effects of group drumming on daily function, movement, quality of life, and caregiver burden for patients with Parkinson's Disease, Huntington's Disease, and their care partners.

More information about the Center for Music & Medicine can be found at <https://www.hopkinsmedicine.org/center-for-music-and-medicine/index.html> and by emailing [musicandmedicine@jhmi.edu](mailto:musicandmedicine@jhmi.edu).



## PACING FOR PARKINSON'S

### That's a Wrap!



The 2018 Baltimore Running Festival is now in the books. Pacing for Parkinson's would like to share with you this year's numbers.

**192:** Final number of participants on this year's P4P team.

**10:** Number of years we've been a charity team with the BRF!

**\$110,837:** Amount of money raised by this year's team so far.

**19:** Number of top fundraisers, who raised \$1,000 or more by race day

**1,089.70:** Number of miles run or walked by the P4P team at the Baltimore Running Festival!

The Johns Hopkins Parkinson's Disease and Movement Disorder Center would like to sincerely thank all the participants who participated in Pacing for Parkinson's at the Baltimore Running Festival! A big, heartfelt thank you to everyone, especially committee members. None of this would have been possible without the amazing members of the planning committee - **Kaylin Kopcho, Aliya Reich, Paul Deluca, Geordan Burton, Ryan Dreibelbis, Kathy Hobart, Jenna Scott, Tim Snee, Jennifer Eklof, Andy Katz, SheTiel Winder, and Arita McCoy.** Stay tuned for P4P 2019!

If you would like to donate, there is still time! Please visit <https://pacing4parkinsons.org>.



## PARKINSON'S PROGRAM CALENDAR

### Parkinson's Disease Educational Series

3<sup>rd</sup> Wednesday of Every Month  
7:00-9:00PM  
St. Thomas Episcopal Church  
1108 Providence Road, Towson, MD 21286  
*November 21-* Arita McCoy- Updates in PD  
*December 19-* Raj Rajan, MSc., -Q & A  
For more information, contact Chelsea Ganc at 410-955-6684

### Atypical Parkinsonism Support Group

4<sup>th</sup> Thursday of Every Month  
2:00-4:00PM  
St. Thomas Episcopal Church  
1108 Providence Road, Towson, MD 21286  
*This support group is designed for individuals with Multiple System Atrophy (MSA), Corticobasal Degeneration (CBD), Progressive Supranuclear Palsy (PSP), and Dementia with Lewy Bodies (DLB) as well as their caregivers.*  
For more information, contact Chelsea Ganc at 410-955-6684

### Education and Empowerment: A Guide for the Newly Diagnosed

January 14th; April 22nd; July 22th; October 14th  
1:00-4:00PM  
Good Samaritan Hospital  
5601 Loch Raven Blvd., Baltimore, MD 21239  
Meeting will be held on the 2<sup>nd</sup> floor conference room  
For more information, contact Chelsea Ganc at 410-955-6684

### NEW Lewy Body Dementia Support Group

January 7th; February 4th; March 4th  
2:00-4:00PM  
St. Thomas Episcopal Church  
1108 Providence Road, Towson, MD 21286  
*This support group is designed for those with Dementia with Lewy Body as well as those experiencing cognitive challenges secondary to their Parkinson's Disease as well as their caregivers.*  
For more information, contact Chelsea Ganc at 410-955-6684

## UPCOMING EVENTS

### Caregiver Summit

The Parkinson's Foundation invites you to join their upcoming Caregiver Summit. The event will take place on **Saturday, December 1, 2018** and will be broadcasted live from Phoenix, Arizona to 13 satellite locations around the country in English and Spanish. Visit [parkinson.org/summit](http://parkinson.org/summit) for more information.

### Parkinson's Disease Community Seminar

*Presented by the Four State Alliance for Parkinson's Support and the Otterbein United Methodist Church.*

**Date:** Friday, April 12, 2019 from 9AM-4PM

**Location:** Otterbein United Methodist Church  
108 E. Franklin Street  
Hagerstown, MD 21740

**Contact:** 240-625-2722

### Moving Day

Event Details

**Date:** Saturday, June 9, 2019

**Location:** Weinberg YMCA in Waverly

**Registration Opens:** 8:30 a.m.

**Walk Start:** 10:30 a.m.

**Contact:**

Tami Brown

ph: 301-329-2673

[tbrown@parkinson.org](mailto:tbrown@parkinson.org)

### Live Well with Parkinson's Disease

2019 PFNCA Symposium  
*Live & Stimulcast Lectures by leading Physicians who specialize in Parkinson's*

**Date:** March 23, 2019

**Location:** Choose to attend in Towson, MD or Falls Church, VA

*Registration opens in January.*

Visit [www.parkinsonfoundation.org](http://www.parkinsonfoundation.org) or call 301-844-6510 to learn more.

## ACTIVITY AND EXERCISE PROGRAMS

Sponsored by the Johns Hopkins PDMD Center, Pacing for Parkinson's & the Maryland Association for Parkinson Support

- **Parkinson's Exercise Program- Brick Bodies at Padonia**

2430 Broad Avenue, Lutherville Timonium, MD 21093

Free Class; members & non-members at Brick Bodies

For more information, visit [info@marylandparkinsonsupport.org](mailto:info@marylandparkinsonsupport.org) or 443-470-0279

- **ParkinSonics Community Chorus**

Every Wednesday, 1:30-3:30PM

Govans Presbyterian Church, Sharp Hall

5828 York Road, Baltimore, MD, 21212

For more information, contact [info@marylandparkinsonsupport.org](mailto:info@marylandparkinsonsupport.org) or 443-470-0279.

- **Dance for Parkinson's**

Goucher College, Decker Sports and Recreation Center- Todd Dance Studio

1012 Dulaney Valley Road, Towson, MD

Tuesdays 3:30PM

Free Class

For more information contact, [ellentalles@comcast.net](mailto:ellentalles@comcast.net) or 410-419-2956

- **Rock Steady Boxing Forest Hill and Parkinson's Pedaling Class- Forest Hill**

For more information, including days and times, call or check [Class schedule](#).

Forest Hill Health and Fitness, 2217 Commerce Road, Forest Hill, MD 21050

For more information contact, <http://www.foresthillhealthfitness.com> or 410-893-4153

- **Pedaling for Parkinson's**

*Pedaling for Parkinson's uses high cadence cycling (80-90 RPM's) to improve motor function and relieve many symptoms. This program is free to guests with medical consent.*

Mondays and Wednesdays 11AM-12PM

The Y In Central Maryland- Weinberg Y in Waverly

900 E. 33rd Street

Baltimore, MD 21218

Monday, Wednesday, Friday 11:30AM-12:30PM

The Y in Ellicott City (Dancel)

4331 Montgomery Road

Ellicott City, MD 21043



## THE JOHNS HOPKINS PARKINSON'S DISEASE AND MOVEMENT DISORDER CENTER

The Johns Hopkins Parkinson's Disease and Movement Disorders Center is dedicated to the tripartite mission of education, research, and excellent care of those living with movement disorders.

Johns Hopkins Outpatient Center  
601 North Caroline Street, Suite 5064  
Baltimore, MD 21287

**410-955-8795**

**[www.hopkinsmedicine.org/neuro/movement](http://www.hopkinsmedicine.org/neuro/movement)**

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### Physician Faculty

Jee Bang, MD  
Ankur Butala, MD  
Ted Dawson, MD, PhD  
Kelly Mills, MD  
Emile Moukheiber, MD  
Alex Pantelyat, MD  
George Ricaurte, MD, PhD  
Liana Rosenthal, MD

### Fellows

Bonnie Kaas, MD  
Suraj Rajan, MD  
Sonja Scholz, MD, PhD  
Gerson Suarez-Cedeno, MD

### Additional Faculty

Jason Brandt, PhD  
Valina Dawson, PhD  
Daniel Gold, DO  
Stephen Grill, MD, PhD  
Gregory Pontone, MD  
Shawn Smyth, MD  
Howard Weiss, MD

### Neurosurgical Team

William Anderson, MD, PhD  
Teresa Wojtasiewicz, MD

### Allied & Research Team

Jana Arreola  
Catherine Bakker, MS  
Sydney Baybayan, BA  
Carrie Berlett, BS  
Emily Carman, BSN, RN, CNRN  
Amanda Gallagher, CCC-SLP  
Kecia Garrett  
Chelsea Ganc, MS, CHES  
Gabriela Gomez, BS  
Anna J. Hall, BA  
Vanessa Johnson, BS  
Diane Lanham, MA  
Arita McCoy, CRNP  
Nicola Mennucci, BS  
Jennifer Millar, PT  
Kate Perepezko, MSPH  
Regina Poole, BA  
Kori Ribb, BSN, RN, CNRN  
Lavina Rizvi, BS  
Donna Tippet, MPH, CCC-SLP

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Johns Hopkins Parkinson's Disease  
and Movement Disorders Center  
601 North Caroline Street, Suite 5064  
Baltimore, MD 21287

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