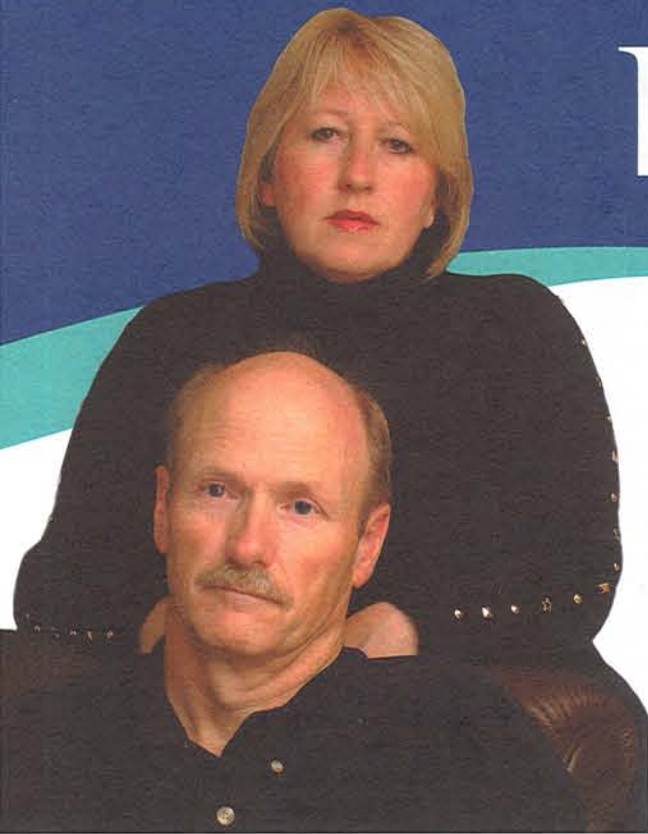


Parkinson's Parkinson Society Canada Soci t  Parkinson Canada

REPORT

Hundreds of thousands of reasons to... **Get Moving!**



Bev and Barry Roberts
live in Paradise, Newfoundland.

A Personal Story

We were 39 and in the prime of our lives. If you believe the saying that "life really begins at 40" then we were almost there. But something was wrong with Barry. We didn't know what it was, but something was definitely wrong.

He was so tired. Then came the tremor in his hand and we knew it was more serious.

The specialist first considered a brain tumor and eventually came to the diagnosis of Young Onset Parkinson's disease. We had no idea what that meant but it didn't matter - we were so relieved that it wasn't a brain tumor.

Barry continued to work but things gradually became overwhelming and at the age of 45, he retired from a job that he loved. In some ways it came as a relief but it was also very hard to give up his career when he was doing so well. At the same time, I knew that I needed to get a job. We were uncertain about so much and I was scared. I learned quickly that life does not stop for Parkinson's - our youngest son was headed to college and we had financial responsibilities that had to be met.

That was six years ago and since then, Parkinson's has changed every aspect of our lives. For a long time, I lived in denial. It's only in the past couple of years that I've come to a place of acceptance - I think accepting Parkinson's allowed me to open up and deal with things more effectively.

Originally, we thought that with medication, Barry and I would go on with our lives as planned. We didn't know much about the disease so we weren't worried. The general sentiment was that Parkinson's wasn't so bad.... the reality of our experience has been quite different.

Barry is one of the youngest people diagnosed in Newfoundland and the full impact of the disease has a lot to do with the stage of life you're at. At 51, Barry's Parkinson's has progressed quickly resulting in his loss of independence and a constant physical battle

between the extremes of not being able to move at all to non-stop involuntary movement. I don't think either of us had any idea that the disease could be so debilitating or how much it would take away so soon. Again, that's part of the acceptance.

Feeling sorry for ourselves just isn't an option. Some days are more frustrating than others but we have to get through it. Sometimes I get angry, never with Barry but with the disease, and then I tell myself that people depend on me, so I have to keep going!

Joy comes from our 8-year old grandson who brings laughter and energy into our lives. He's a bright spark for Barry and a wonderfully willing companion for me - always up for a nature walk or any kind of outing.

Support comes from close family, and neighbours who have come to understand the challenges we face on a daily basis. They recognize, from time-to-time, that both partners need a change and they help out. Through the local Parkinson Society, I have also met a woman who has become a kindred spirit. Having a husband who battles Parkinson's disease, she knows exactly what I'm experiencing and feeling. In many ways we have become each other's lifeline and a place of support whether we need to laugh, cry or just talk something through.

I also have hope. Of course what we all want more than anything is a cure, but while we wait for that, I hope that we find a way to make daily living easier for people with Parkinson's.

We have met so many nice people who try to cope quietly without making too much fuss. We try to stay optimistic and not bring other people down with our challenges.

While Parkinson's disease is generally not considered fatal, Young Onset Parkinson's can kill the spirit. If we hope to develop better treatments and eventually find a cure, it strikes me that private people like us need to find our voice and help the wider community understand the reality of Parkinson's.

Canadian researcher finds brain cells can regenerate

Jackalina Van Kampen, a young Canadian researcher from Prince Edward Island, is being celebrated for the 'very impressive' findings published in a July 2006 issue of *The Journal of Neuroscience*. Van Kampen, Assistant Professor of Neuroscience at the Mayo Clinic in Jacksonville, has completed a five-year research project that proves brain cells can be encouraged to regenerate.

"When I went to grad school, I was taught that brain cells do not regenerate in the adult brain," explains Van Kampen. "Now, with the findings of this study, we know that certain areas of the brain can produce new cells and this is a potential source of new tissue for replacing cells lost through diseases like Parkinson's disease." In her study, Van Kampen was able to successfully restore lost dopamine-producing cells and virtually all behavioural function in adult Parkinsonian rats.

Van Kampen recalls that, five years ago, the research community was very skeptical about her idea - calling it a "crazy notion". However, with the support of Dr. Harold Robertson (head of the Department of Pharmacology at Dalhousie University), she secured a post-doctoral basic research fellowship grant from Parkinson Society Canada and the work began. Today, she admits, "It's nice to have the work recognized as something valuable."

Van Kampen's journey with Parkinson's began more than two decades ago, when her father was diagnosed with the disease at the age of 56. "At the age of 14 or 15, I was part of a girl's group called The Calvinettes. One day our leader asked us to write down what we would do when we grew up and I wrote that I would cure Parkinson's," she laughs.

"I went to McGill to study psychology," says Van Kampen. "I had forgotten all about my idea of curing Parkinson's until I needed to give a presentation for one of my courses. I decided to research Levodopa-induced dyskinesias (involuntary movement caused by this drug used to treat Parkinson's), something my dad was just starting to experience." She confesses that she became immersed in the information and delivered a presentation so detailed that her classmates laughed at her. "At that point I thought maybe I should do this."

Dopamine is a natural chemical produced by the brain to send messages between nerve cells in the brain. In Parkinson's disease, the brain cells that produce dopamine deteriorate and result in the onset of symptoms.

Her path took her to the University of Western Ontario and then on to the University of British Columbia to complete her PhD with Dr. Jon Stoessl in 2000, the man she strives to emulate today. When the opportunity came to return to the east coast, she accepted a fellowship position with Dr. Robertson. "He was very open to my wild and crazy idea," recalls Van Kampen. Two years later, she and her project

were headed south to Jacksonville.

"I want to come home," she says. "I see myself spending the rest of my career dedicated to Parkinson's research and I would love to do that in Canada." The trick is to find the research grant that will make the move possible.

"Research is very expensive and funds are limited, especially in Canada. But people can be sure that every dollar invested in research has an effect," says Van Kampen. "It's like building a house - each brick is very important to the end result."

And Van Kampen strongly supports the notion that Parkinson's research discoveries stand to benefit other related disorders. Her recent project is an excellent example of this spillover effect with findings relevant to the entire neurogenesis field, and therefore to other degenerative disorders. She herself is already applying the same concept to brain cells affected by Alzheimer's disease and having some success.

But her passion remains with Parkinson's. "I'm hopeful that we'll see the development of interventions involving cell replacement, in concert with therapies that will protect remaining healthy cells - and that will stop it dead in its tracks." But like everyone associated with Parkinson's, Van Kampen reminds herself that it will take time and it will take money.



Just the Facts

What is Parkinson's?

Parkinson's is a neurodegenerative disease. Movement is normally controlled by dopamine, a chemical that carries signals between the nerves in the brain. When cells that normally produce dopamine die, the symptoms of Parkinson's appear.

Who gets Parkinson's?

Parkinson's affects approximately 100,000 Canadians, and 6.3 million people worldwide - men and women from all ethnic backgrounds. Although the average age of onset is 60, it also affects people as young as 30 and 40 (called Young-Onset Parkinson's).

How is Parkinson's diagnosed?

A diagnosis of Parkinson's takes time. There are no x-rays or tests to confirm Parkinson's - diagnosis is made after a thorough assessment by a neurologist (a specialist trained in Parkinson's).

What are the symptoms of Parkinson's?

The most common symptoms are: tremor, slowness and stiffness, balance problems and/or rigidity of the muscles. Other symptoms of Parkinson's include: fatigue, soft speech, writing problems, stooped posture, constipation, sleep disturbances, and depression.

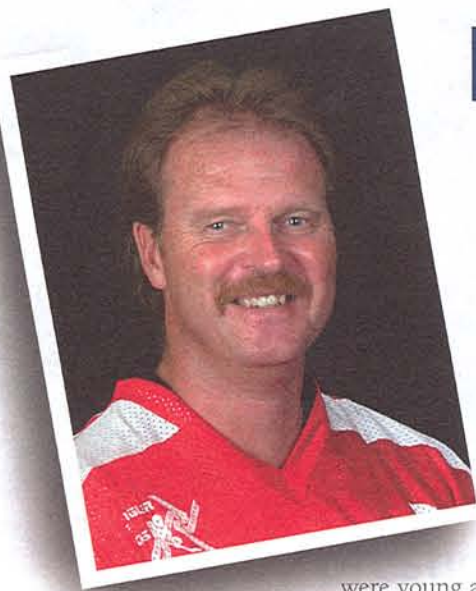
Is there a cure for Parkinson's?

Currently there is no cure. But there are many promising research projects under way, including finding and understanding the causes and developing better treatments.

How is Parkinson's treated?

Parkinson's is treated with medication, which can reduce symptoms, but may cause side effects. Physical and occupational therapy and exercise are also helpful. As the disease advances, medications will need to be adjusted. A small percentage of people with Parkinson's may benefit from brain surgery.

Source: Parkinson's: The Facts, Parkinson Society Canada brochure. For more information, visit www.parkinson.ca or call PSC's national Information & Referral Centre at 1-800-565-3000.



Fighting Back

Former professional athlete battles Parkinson's

Like so many others, Don's first sign of Parkinson's disease was quickly dismissed. He was 32 years old and had just retired from a professional hockey career in the U.S. His children

were young and he was starting a new chapter of his life. He remembers it being the summer of 1993 and noticing that his right hand had developed a mind of its own, but he didn't think much of it.

By 1995, Don had moved his family to his hometown of Deloraine, Manitoba where he bought a business and became an active member of the community. But the trouble with his hand now extended up his arm. At the insistence of his family, he agreed to see his doctor and after referrals to two neurologists, Don was diagnosed with Parkinson's disease at the age of 34.

By his own admission, Don's reaction to this diagnosis was complete denial. He immediately joined the local senior men's hockey team, threw himself into his work and activities with his children. "I wore myself out until the summer of 1996 when I came home one night and could not get out of my truck. I just couldn't make my body move and I realized I couldn't hide from it any longer."

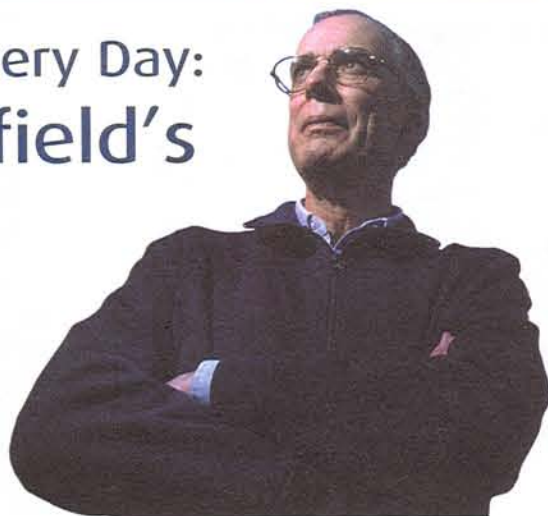
Don committed himself to a regimen of medication, proper nutrition and physical therapy to help manage his Parkinson's symptoms. "My symptoms advanced slowly and then all of a sudden the progression took off and I was in real trouble," recalls Don. "I was getting two or three useful hours in a day and otherwise I was lying on the floor with severe muscle cramping."

In 2004 Don underwent Deep Brain Stimulation surgery to help provide greater relief of his symptoms. He was hopeful that he'd return to work but found that, even after surgery, the inconsistencies of the disease made it impossible. "Facing the fact that I could not go back to work after the surgery was very hard. And it's very frustrating to be on Disability", says Don. "It has been a really difficult process, with lots of ups and downs. I think that my life in professional sports prepared me for this – most success in hockey comes because of determination and mental toughness. Parkinson's requires that too."

Don Dietrich lives with his family in Deloraine, Manitoba.

Deep brain stimulation (DBS) is not for everyone with Parkinson's disease. Anyone considering this surgery needs to be informed of potential risks and benefits, and assessed by a health-care team.

Finding Value Every Day: Michael Pitfield's Journey Continues



In October 2001, *The Ottawa Citizen* published an article titled "Michael Pitfield's Private War". It was an intimate and engaging look at the life of Ottawa's former top bureaucrat and his struggle with Parkinson's disease. The story concluded as Pitfield was recovering from brain surgery – a procedure he hoped would turn back the clock by at least five years.

"My dad definitely got five years, and now we can see that he'll have five more," says Tom Pitfield about the outcome of his father's 2001 brain surgery. "From a mobility perspective, the disease is not progressing as fast as it may have without the surgery and that allows him to look forward to future events in a way that he didn't in the past." But Tom is quick to point out that even though his father's mobility has been fairly stable, the disease has continued to progress in other ways.

For Senator Pitfield, a man renowned as an incredible speaker, able to bring sentences to life with his wit and elegance, the unexpected loss of his speech has been a dear price to pay. "For an avid communicator like my dad, where much of his life depended on his capacity to speak, it has been very frustrating for him," says Tom. "More selfishly, we wish he could have a greater ability to speak with us."

The first thing you notice when you're with Michael Pitfield and his three children – Caroline, Tom and Kate – is the strength of their bond and the obvious devotion they have for him. As a family, they have learned to live with the reality of Parkinson's disease over the past 18 years. "It's a hard disease and we've had to come to grips with the fact that it's going to get worse," says Tom. "The biggest credit I give my dad is that he really tries to make sure he gets the most value out of every day."

For Senator Pitfield, that means going to work at The Senate, spending time with friends and colleagues, and playing with his infant grandson – even though it may be difficult, he continues to lead a full life. He also embraces his role as Honorary Chair of Parkinson Society Canada, an organization that Caroline, Tom and Kate actively support as volunteers.

"Parkinson's is really tough and people need help. As the disease progresses, they need a shoulder to lean on – both literally and figuratively."

Senator Pitfield lives in Montreal, Quebec.

More funds needed to meet volume of requests

With its recent announcement of \$1.89 million for Parkinson's research and clinical funding, Parkinson Society Canada (PSC) brings its 3-year funding commitment to \$3.35 million, falling drastically short of the \$12 million needed by qualified Canadian researchers and clinicians.

PSC, funded entirely by private donations and sponsorships, established its research grants program in 1981 and has invested a total of \$13 million to date – supporting over 200 Canadian researchers engaged in both scientific and clinical projects.

David Park, Associate Professor at the University of Ottawa and Senior Scientist at the Ottawa Health Research Institute, counts on support from PSC. "Funding from PSC ensures that good ideas don't go to waste. It affords us the opportunity to pursue preliminary evidence that may lead us to develop broader projects."

Of course the scope and quantity of work bears a direct relation to funds available. "Our funding sources in Canada are quite limited," says Park. "PSC is the only option outside of federal funding, and then we turn to the States where there's a greater emphasis on Parkinson's specific research."

Experts have long held the opinion that advances in Parkinson's research can benefit hundreds of thousands of Canadians suffering from other conditions, including Multiple Sclerosis, Alzheimer's, ALS, and Diabetes. They also predict that by 2040, neurodegenerative diseases will surpass cancer as the second leading cause of death in Canada.

"Neurological diseases, like Parkinson's, are becoming more prevalent in our aging population," says Joyce Gordon, PSC CEO, "and that should be a major concern for our governments. Beyond the significant human element, the tangible costs of Parkinson's are huge – direct and indirect health care costs, disability costs, lost income and productivity of people in the workforce. Investing in research just makes good sense."

PSC makes a minimum annual investment of \$1 million into Parkinson's specific research, but by all accounts it simply isn't enough. According to Gordon, "We need to get more funds into the hands of researchers. Whether they come from additional donations, corporate support or government funding – this is critically important."

Parkinson's: so much more than a movement disorder

As Parkinson's advances, most people live between the daily extremes of constant involuntary movement, to not being able to move at all. Many take twenty or more pills each day in an effort to create some balance, but treatments provide varying degrees of relief. And that's just the motor issues – Parkinson's is so much more than a movement disorder.

"Parkinson's often affects the autonomic nervous system that controls the bladder, bowel, blood pressure regulation, sexual function and swallowing," reports Jon Stoessel, Director of the Pacific Parkinson's Research Centre at the University of British Columbia, and Chair of Parkinson Society Canada's Scientific Advisory Board. "And then there are the very difficult cognitive and psychiatric complications that affect a significant proportion of our patients. At this point, we don't have great treatments for these symptoms." Not surprisingly, people with Parkinson's and caregivers report

that these aspects of Parkinson's can be much more disturbing than the motor symptoms.

In June 2006, Parkinson Society Canada hosted its first-ever web casts to share information about these non-motor issues of Parkinson's. With financial support from Novartis, and the help of Dr. Mandar Jog (London Health Sciences Centre) and Dr. Michel Panisset (Hotel-Dieu du CHUM), these web cast presentations were designed to help people identify non-motor symptoms that are common in Parkinson's disease, including the effects of medications "wearing off". The specialists shared suggestions for managing these symptoms, including drug and non-drug approaches. Other topics of discussion included depression, cognitive changes, speech difficulties and emotional changes.

These web casts are archived on Parkinson Society Canada's web site in both English and French. To view, visit www.parkinson.ca.

Understanding the full impact of living with Parkinson's

Parkinson's is a complex disease that affects every aspect of an individual's life – work relationships, personal relationships, financial security, identity, and self-esteem. It affects entire families, with different implications at various stages of the disease.

Fran Squire is one of the 100,000 Canadians with Parkinson's and she knows this reality personally. As Chair of Parkinson Society Canada (PSC)'s new Psychosocial Research Committee, she is passionate about finding ways to ease the burden for people living with the Parkinson's today. "People often think of research in terms of white-coated scientists in a laboratory. That type of biomedical research is important, but so too is psychosocial research – the work that helps us understand the full impact of living with this disease."

A funding partnership with the Canadian Institutes of Health Research (CIHR) is specifically designed to encourage young scientists to work in the area of psychosocial Parkinson's research. It is the first phase of a three-part psychosocial program.

Fran's vision is strikingly clear. "This is the research that will make life better for people living with Parkinson's now," says Squire. "We believe that the findings will translate into improved support and service delivery across Canada... so it's a priority."

To make a donation to support Canadian Parkinson's research, visit www.parkinson.ca or call 1-800-565-3000.

"As busy farmers, my wife Francine and I used to put in 80 hour work weeks. We poured our hearts and souls into our business and I sometimes wondered what would ever slow me down. At 47, I found out... Parkinson's! Four years after the first symptoms, I've lost at least 50% of my capacities. There are days when I look at my 82-year-old father and feel older than him. But I haven't given up."

Jacques Lemieux, Diagnosed at age 47

The Value of a Gift

The work of Parkinson Society Canada (PSC), and its 12 regional partners, is funded entirely by private donations and sponsorships. Funds are directed to four primary areas of work that collectively serve to 'ease the burden and find a cure': research, support services, education and advocacy. "Every gift has meaning and significance," says Bev Crandell, PSC's Director of Resource Development. "If we reflect on how our gift helps others, it becomes very tangible and very important."

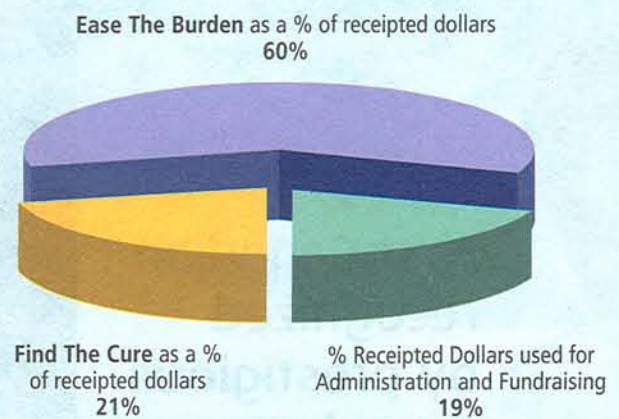
This sentiment is echoed by Canadians with Parkinson's, who receive support services and by researchers, who rely on funding from PSC to continue their work. "People can be sure that every dollar invested in research has an effect," reports Jackalina Van Kampen, PhD. "The money is so well-used in Canada, and projects have far-reaching impact that goes well beyond the Parkinson's community."

To make a donation, go on-line at www.parkinson.ca or call 1-800-565-3000. We'll be happy to share with you the many ways your gift can help.

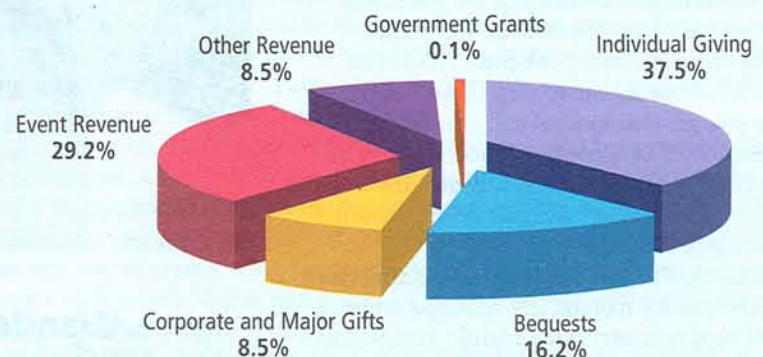
"My project would never have gotten off the ground, and I would not be where I am as a researcher today without that first fellowship grant from Parkinson Society Canada."

Jackalina Van Kampen, PhD
Assistant Professor of Neuroscience, The Mayo Clinic

Parkinson Society Canada and Regional Partners Charitable Information Returns (T3010)



Parkinson Society Canada Sources of Revenue*



*Percentages are based on consolidated financial information as of fiscal year ended May 31, 2006 from Parkinson Society Canada as well as Southwestern Ontario, Central and Northern Ontario, Newfoundland and Labrador, and Manitoba Regions

Advocating for change

Imagine what might happen if government and corporate decision-makers really understood the complexity of issues facing Canadians with Parkinson's and their families. What kind of decisions would they make knowing the full economic and social impact of Parkinson's to Canada as a nation? What kind of investments would they make in research for a cure and better treatments? How would policy change if they knew what we know? What could that mean for the Parkinson's community in Canada and around the world?

For starters, it could mean research discoveries that lead to more effective treatment of Parkinson's symptoms with fewer side effects. It could also mean better access to the supports and services people with Parkinson's need to thrive. Ultimately, it means that the 100,000 Canadians with Parkinson's could experience a better quality of life and could continue to make meaningful contributions to their communities – and wouldn't we all benefit from that?

"Advocating for change is a key focus for Parkinson Society Canada," says Yvon Trepanier, Chair of PSC's Advocacy Committee, "but first we must educate our decision-makers about our experience and the challenges we face." To this end, PSC is building a national network of local volunteers who will help communicate with decision-makers from coast-to-coast – everyday folks who care about Parkinson's issues and are willing to write a letter or make a couple of phone calls.

To learn more about this work, contact us at advocacy@parkinson.ca.

Education key to building understanding and support

Canadians with Parkinson's and their families ranked educating the wider community as one of the top three ways to improve their quality of life in a 2005 informal survey – just behind finding a cure and improving access to supports and service.

"The reality is that people may not have been exposed to someone with Parkinson's so they just don't understand it," says Barbara Snelgrove, Manager, Education and Services for Parkinson Society Canada (PSC). "Whether it be staff in a long-term care facility, the folks who process disability applications, insurance companies or a person walking down the street, most people are not familiar with the complexity of Parkinson's and the resulting challenges."

A 2004 Omnibus survey of Canadians showed that there is significant awareness of the basic symptoms of Parkinson's – including tremor, slowness in movement and balance problems. However, people with Parkinson's report that others have a wide range of reactions to their symptoms, including speculation that their symptoms are the result of being intoxicated. Frustration also mounts when those affected by the disease are repeatedly required to

verify they 'still have' Parkinson's to qualify for financial assistance and other supportive programs. The only certainty is that Parkinson's, a chronic and progressive disease, will continue to advance until a cure is found.

"We have identified several key audiences that require more information about the Parkinson's experience, including people with Parkinson's, and their families. We are working to provide materials and training, accordingly," reports Snelgrove. One such group is family physicians, who are responsible for recognizing the signs of Parkinson's, and for making the referral to a neurologist for diagnosis and ongoing care.

With the help of Dr. Gordon Hardacre, Senior Staff Physician in Family & Community Medicine at Toronto Western Hospital, who was diagnosed with Parkinson's in 1996, PSC developed a family physician's toolkit in 2005. To date, over 30,000 kits have been distributed to family physicians across Canada, complete with an in-depth DVD presentation by movement disorder specialists.

This toolkit is just one example of how PSC works to "Ease the burden, Find a cure"

through education, support, research and advocacy. "Education is central to easing the burden for those living with Parkinson's today," says Snelgrove. "Whether through our web site (www.parkinson.ca), our national Information & Referral Centre (1-800-565-3000), or programs delivered by our regional partners, we're working hard to build understanding and support."

For more information about the Education Program, see "Parkinson's: so much more than a movement disorder".



Family physician's toolkit

April Awareness Month





First Canadian recognized by prestigious award

When asked if he was surprised to learn that he was the 2006 recipient of the Donald Calne Lectureship, Dr. Jon Stoessl admits that he had some notion of what was in the works. "I was to chair the award selection committee until I received a call asking me to step down," says Stoessl. "When you get that kind of call, you know you've either been fired or something good is about to happen." All joking aside, Dr. Stoessl was delighted with the news and for many reasons remains deeply flattered to be recognized with this award.

"Most importantly, I've had a 20-year relationship with Donald Calne. He was my mentor, my colleague and over the years he has become a very good friend," says Stoessl. "I have profound respect for the intellectual contribution Dr. Calne has made to the global Parkinson's effort."

The Donald Calne Lectureship was established in 2002 by Parkinson Society Canada (PSC) to honour Dr. Calne's outstanding service to the Parkinson's community as Professor of Neuroscience at the University of British Columbia, past chair and long-time member of PSC's Scientific Advisory Board. The Lectureship is awarded annually to a distinguished neurologist of international repute, whose work is primarily in the area of Parkinson's disease.

"Dr. Stoessl makes such a valuable contribution to people with Parkinson's," reports Joyce Gordon, PSC CEO, "not only through his practice and his research work, but as a committed volunteer to both PSC and Parkinson Society British Columbia educating others on the issues of Parkinson's at lectures and conferences."

Dr. Stoessl, the first Canadian recipient of the award, is Professor of Medicine (Neurology) and Director of the Pacific Parkinson's Research Centre at the University of British Columbia. A native of the UK, Stoessl moved to Canada in 1960 and obtained his MD from the University of Western Ontario in 1979.

Dr. Stoessl's current research is focused on answering fundamental questions: What causes Parkinson's? How do we better understand complications of the disease and its treatments? What is the larger role of dopamine in the brain?

"I'm particularly delighted to receive this award as a Canadian researcher," says Stoessl. "Canada has an unbelievable history of involvement in Parkinson's research – we've always been a key player in the global effort and Canadian researchers have made major contributions. I am proud that the work of our team has been recognized and hope it contributes to this long tradition of excellence."

Dr. Stoessl will deliver his "State of the Illness" address at the 2006 Donald Calne Lecture on Friday, November 3, 2006 in Ottawa – made possible with the generous support of Fraser Milner Casgrain LLP and Solvay Pharma Inc. The lecture is free and open to the public. For more information, please contact Parkinson Society Canada at 1-800-565-3000.



Bill Barker with grandchildren



Fundraising exceeds \$10 million!

Throughout the month of September, approximately 12,000 Canadians participated in Parkinson Society Canada's 2006 SuperWalk to raise funds for Parkinson's research and support services. Walks were held in 82 communities across the country raising a total of \$1.97 million, and bringing total funds raised since the walk's inception in 1990 to \$10 million!

SuperWalk began with a group of seven people affected by Parkinson's who walked through the streets of downtown Toronto. Since then it has grown to an annual event taking place in communities from coast-to-coast.

Monies raised through SuperWalk fund both Parkinson's research and support services for the 100,000 Canadians living with Parkinson's today. People like Cindy Exton, mother of two from Calgary, who was diagnosed with Parkinson's seven years ago, at the age of 42. "I remember sitting in my car feeling like I'd just been kicked in the stomach," recalls Exton. "My children were just 8 and 10 years old and I had to face the fact that the life I thought I would have was gone."

Cindy credits loving family and friends, along with a good dose of counseling, for helping her accept Parkinson's. "I learned that it was OK to have emotions about it - I had to move through all the stages of grief before I could get on with my life." Part of Cindy's coping strategy was to get involved in making a difference. Jokingly referred to as the 'Queen of SuperWalk' in Calgary, Cindy is very active in the Parkinson's Society of Southern Alberta, sitting on the board of directors and spearheading the annual SuperWalk event.

"Cindy is a great example of the passion I see right across the country," says Debbie Davis, National Manager of SuperWalk. "We rely on volunteer support to make these events happen." And Davis reports that SuperWalk really does fulfill its dual purpose – to raise funds and awareness. "People see the banners and t-shirts at a SuperWalk event and it's amazing how many come up and tell us about someone they know who has Parkinson's. It's a great way for them to learn that there's an organization that can help."

For more information about SuperWalk, visit www.superwalk.com.

Maritime SuperWalk sets new fundraising record

With walks taking place in 13 communities across Nova Scotia, New Brunswick and Prince Edward Island, Parkinson Society Maritime Region successfully raised over \$112,000, 33% more than the 2005 walk.

This comes as great news to Leon Fitzgerald, President of the Society's Halifax/Dartmouth chapter, whose wife Jerri was diagnosed with Parkinson's in 1989. Upon receiving Jerri's diagnosis, Leon jumped in with both feet. "The main thing to do was to get involved, volunteer to try and make things better as far as research and client services, and of course, find a cure."

Leon has been organizing SuperWalk for Parkinson's in Dartmouth for a decade and he is pleased with how far they've come. "Now if we could just increase the number of walks, that would be even better."



The Doyle Family: Four generations at SuperWalk Charlottetown.

Parkinson Society Canada Société Parkinson Canada

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Fax: (250) 475-6619
www.vepc.bc.ca

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