

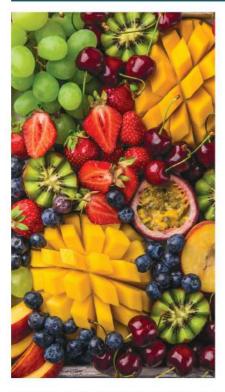
# LIFESPARK NEWSLETTER

#### THIS NEWSLETTER IS DEDICATED IN HONOR OF

#### A. Y. GRUSKIN

IN APPRECIATION FOR EVERYTHING HE DOES FOR LIFESPARK. HE IS ALWAYS THERE FOR US AND NEVER SITS STILL! MAY HE BE GEBENTCHED WITH MANY MORE OPPORTUNITIES TO HELP KLAL YISROEL & ALWAYS BE ON THE GIVING END!

FOR SPONSORSHIP OPPORTUNITIES, PLEASE CONTACT INFO@LIFESPARKPD.COM OR CALL 732.806.1133 X 302.



## SHEVAT - CALL TO PRAYER

Chazal teach us that by the month of Shevat, the trees have absorbed their fill of the seasonal rains and are brimming with the potential of their hidden fruits. Their fresh bounty eagerly awaits to burst forth. Meanwhile, the trees appear barren, and in many climates, Shevat falls in the depths of frozen winter. The trees stand cold and empty.

The question is clear. If the developmental process is complete and the trees are ready to produce, why is there a delay in revealing their final product? What lesson can we draw from this postponement?

The reasoning behind this suspension traces back to the very formation of trees themselves. Trees were created on the third day of creation. Yet, the Torah informs us that they did not sprout above ground until the sixth day. Why? Because their growth requires rain, and rain did not fall until Man, created on the sixth day, recognized the need and prayed for it. The ultimate fruition of trees always requires the prayerful efforts of Man to bring them to completion.

This fulfillment process repeats itself each year, reflecting the primal process of the trees at creation. Yes, the trees are ready, eager to blossom and bear fruit, while the delay serves as our reminder to open our hearts and raise our voices in prayer. Every year, we must be reminded of our essential role in the cycle of trees. Though we may be far from holding fresh fruit in our hands and may even gaze upon a frozen, barren tree, our task remains clear: appreciate the rain and recognize how much we depend on Hashem's

Rabbi Tyviki Fener

blessing to achieve any endeavor we have nearly completed. Like the tree, our potential is vast; however, for ultimate realization, we need Him. We must acknowledge that need and pray for His blessing and Siyata Di'Shmaya. Let us heed the fruitless, silent call of Shevat - the Call to Prayer. מ"ו בשבם שמח.

We are pleased to inform you that at the request of many of our male members, we have established a Men's Patient Support Group. The group will serve as a dedicated space for individuals with PD to come together, share, and gain understanding in dealing with and coping with PD.

Rabbi Dr. Fishel Mael, PhD, Organizational Psychology; Certified Professional Coach, from Baltimore, MD will moderate the group.

Additionally, we will be starting a second series of our Ladies' Patient Support Groups shortly, once again moderated by Gloria Lebeaux, LCSW. She was extremely well-received and we are glad she will be joining us once more.

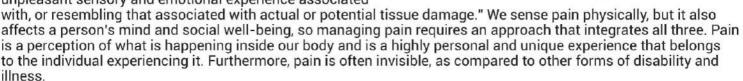
We hope to start both groups soon. Please get in touch with our office for more details and to join. Please Email rivka@lifesparkpd.com OR call 732.806.1133 ext. 302, Monday thru Thursday 11:00-4:00

#### THE PAIN-PARKINSON'S CONNECTION

CAUSES, CONSEQUENCES, AND CUTTING-EDGE THERAPIES WITH DR. JACOB HASCALOVICI

On December 22<sup>nd</sup>, we were honored to hear from Dr. Jacob Hascalovici. Dr. Jacob is a neurologist specializing in pain management and is the director of Pain Management in the Neurology Department at Hackensack University Medical Center. He specializes in personalized care and attention to individual chronic pain and focuses on whole-body care. The following is a summary of the thought-provoking and informative lecture Dr. Jacob gave.

•What is pain? The official medical definition is "an unpleasant sensory and emotional experience associated



- •What is the difference between acute and chronic pain? Acute pain is severe, and intense but also usually shortlived and is often caused by trauma, surgery, or injury. Chronic pain is continual and recurring pain that doesn't seem to be getting better. The pain extends beyond the expected time frame of an injury to heal (3-6 months), hence the need to see a pain specialist.
- •Why can't anyone figure out what is causing my pain? Pain is personal, hard to remember and describe, and imaging and testing don't always give enough information. Additionally, pain can involve many tissue types, evolve over time, and radiate to other body areas.
- •What causes pain? There are 3 types of pain: Muscle pain squeezing, and dull pressure. Bone/Joint Pain sharp, stabbing feeling. Nerve Pain – burning, shooting sensation, radiating.
- •What are treatment options available to treat pain? Physical Therapy and rehabilitation, massage, Chiropractic manipulation, acupuncture, over-the-counter vitamins and minerals, over-the-counter and prescription medications, topical creams, and patches. Other interventions can be done in a doctor's office - Cortisone injections, epidural injections into the spine, nerve blocks, and radiofrequency ablation.

To use Naturopathics, you must ensure they are safe, effective, and affordable.

#### •Will my chronic pain ever go away?

Yes, because many patients will eventually find long-lasting relief with a lot of continuous care.

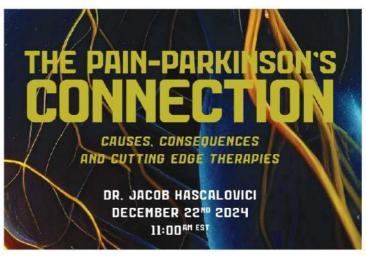
No, because many conditions that cause chronic pain don't have a cure. However, although some degree of pain might be inevitable, that doesn't mean you need to suffer from pain.

Maybe, because of the concept of self-efficacy, a person's belief in their ability to heal, along with positive thinking, mindset, and motivation, is a fundamental factor in pain relief.

Dr. Jacob leaves us with the message that there is always room for hope!

As always, the full zoom event was recorded and posted on our website www.lifesparkpd.com/educatio





#### TAKING THE NEXT STEP

STRATEGIES FOR OVERCOMING GAIT-FREEZING IN PARKINSON'S WITH DR. JOOHI JIMENEZ-SHAHED

Dr. Joohi Jimenez-Shahed is the Associate Professor of Neurology and the Medical Director of Movement Disorders and Brain Circuit Therapies at Mt. Sinai Hospital. On January 12th, she gave an informative and comprehensive talk on Gait-Freezing.

Freezing of Gait (FOG) is the temporary involuntary inability to move, where the person with PD may feel like their feet are stuck in place or glued to the ground. It can happen



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frequently and be very troubling because episodes are unpredictable, and people around them try to 'help' them by forcing them to move. This can pose a significant fall risk, leading to injuries and subsequent loss of independence. It typically occurs in those with fewer tremors and less rigidity, and will usually be shortly before the next dose of dopaminergic medication is due. FOG also increases as the disease progresses, and depression and anxiety increase along with it. It also seems to increase as the dose and length of time taking levodopa increase. Some doctors have also seen it occur more often in those whose Parkinson's symptoms began on the left side.

FOG can be caused by the typical PD neurological impairment or the cognitive load – such as when the PD person does two things simultaneously, even simple things like holding something while walking. Other causes may be impaired sensory processing or integration, such as entering a narrow space like a doorway, stressful situations, and other medical conditions.

Any change in walking can trigger FOG, i.e. transitioning from standing to walking, turning a corner, or stepping from one type of surface to another. Sometimes it can be triggered in response to levodopa medications, and sometimes FOG appears in 'on' stages, sometimes in 'off' stages, and sometimes in both.

Various strategies can be used to overcome FOG: Marching in place, shifting weight from one leg to the other or side to side, stepping in time to music, imagining a line on the floor or using a target on the floor to step over, the 4 S strategy — Stop, Sigh, Shift, Step, trying another movement with another body part, or to change directions.

Treatments can include tweaking the dose of levodopa or switching to other dopaminergic medication such as Selegiline or Rasagiline. Physical therapists can do many types of rehab therapies to help FOG. Various walkers can also help; the U-step walker only moves when you grip the brake, so that adds a different movement to distract the mind from walking. DBS may help, as well as spinal cord stimulation and other medical stimulations that are being researched.

Recognize triggers and adjust your home so furniture and rugs are out of the way to increase open space for walking. Try using your mindset to overcome FOG – don't panic, pause and reset, focus on pushing down the heel, stay calm and try to relax. Family members can help by tapping them, counting with them, and helping them with any tips that work for them.

Watch the full video on our website www.lifesparkpd.com/education for many more tips and techniques to help you!



# MEDICAL MOVEMENT



# TWO CUTTING-EDGE PARKINSON'S RESEARCH PROJECTS

Researchers at the University of Edinburgh, Scotland, believe they could be on the brink of cracking some of the leading causes of Parkinson's. Parkinson's is the fastest-growing neurological condition in the world. There are more than 40 different symptoms, ranging from tremors to anxiety, and while some can be treated with medication, often the drugs themselves cause significant side effects. Researchers worldwide are applying full-time to understanding, treating, and ultimately curing the disease – b'ezras Hashem!

Parkinson's UK is the largest member-led charitable funder of Parkinson's research in Europe. They have committed

close to £400,000 to fund two new projects at the University of Edinburgh and are at the forefront of global progress towards new treatments and a cure. The researchers are using cutting-edge technology to understand how brain cell changes may lead to the development of Parkinson's and are trying to develop new treatments for the condition by creating a complete and accurate model of Parkinson's in the lab. Simultaneously, they are also focusing on a currently little-known gene that might play a role in the disease.



#### **Understanding Brain Cell Changes**

Professor Tilo Kunath at the University of Edinburgh

has a project that aims to make it much easier to test new Parkinson's medicines and understand the importance of infection in Parkinson's development. His team will use live imaging technology to examine how a key protein, alpha-synuclein, believed to play a central role in damaging brain cells in Parkinson's, behaves when exposed to viruses and toxins. They want to investigate whether certain drugs can improve the waste disposal system in brain cells, stopping proteins like alpha-synuclein from building up.

"There are four factors that might trigger damage or make it worse for people with Parkinson's – viral infection, exposure to environmental toxins, poor cellular waste disposal, and an individual's genes. Looking at them in combination will enable us to build a complete and accurate model of Parkinson's in a dish," said Prof Kunath.

He feels that this information is essential because this model can predict which new medications would most likely work in people and help make new treatments available for Parkinson's. It would also help to understand how viruses impact alpha-synuclein, which in turn would change how we treat Parkinson's.

#### A Gene That May Be a Key Factor in the Development of Parkinson's

Dr Kathryn Bowles of the Dementia Research Institute at the University of Edinburgh will be using the funding received to investigate the workings of a little-known gene, the LRRC37A2 gene, which may play a role in the development of Parkinson's. The LRRC37A2 gene is thought to help protect the brain, making people with higher levels of this gene less likely to develop Parkinson's and, conversely, having less of it may be a risk factor for

Parkinson's. Dr. Bowles will be building on previous research into the gene and studying how to confirm if this gene is indeed protective, what it does, and how having more of this gene in the brain prevents Parkinson's from developing. This work inspires her and her team because it will open up new channels for targeted Parkinson's treatments.

"If we can confirm this gene is protective and understand why, that will open up new avenues for therapy. We can then say these are the mechanisms we need to target, and this is how we can change the expression of this gene, which is a pathway to therapy. It's quite far away, but it's a new avenue to go down," explained Dr Bowles.

#### Why research matters to people with Parkinson's

Parkinson's is the fastest-growing neurological condition in the world, with no current treatment available to slow, stop, or reverse the condition. Research is the only way to advance knowledge about Parkinson's and move towards a cure or better treatments. There are currently more than a hundred trials, each needing more than a thousand people to participate. The more people participate as information from the trials comes in, the better the understanding of the disease is, and the faster progress can be made. Wherever a cure comes from, we are all going to benefit, so with Hashem's help, we will be hearing more and more positive results shortly!

### **News Flash**

Beech Bands, also known as "Deep Brain Stimulation (DBS) Bands," are a wearable, non-invasive therapy being explored for Parkinson's disease. These bands work by delivering small, vibrating pulses that, in an as-of-yet-unknown fashion, target specific areas of the brain involved in motor control, aiming to alleviate symptoms such as tremors, rigidity, and bradykinesia (slowness of movement). Additionally, Beech Bands have been



shown to improve speech significantly in Parkinson's patients. While traditional DBS involves implanting electrodes directly into the brain, research into wearable devices like Beech Bands could offer a less invasive alternative for providing similar therapeutic benefits. Beech Bands can be worn on the wrist and look as unobtrusive as a smartwatch, yet do not have any 'smart' capabilities.

Carl Beech, a Parkinson's patient who has extreme difficulty with his speech, created them in the United Kingdom. The effects of the Beech Band on him were remarkable, and he is currently trying to produce many more to disseminate as many as he can. They were being marketed in the UK at the equivalent of approximately 30 US dollars, making them an affordable and painless therapeutic approach that helps manage symptoms alongside medications. It seems like a phenomenal option that can target symptoms, particularly during 'off' times. LifeSpark is working on obtaining these devices for our members to try, and we encourage everyone to stay on the lookout for more information in the coming months. This could be an exciting opportunity to explore a new way to manage Parkinson's disease symptoms.

For information on how you can watch the Beech Band in action, contact our office info@LifeSparkPD.com

### **ASTAXANTHIN**

Recently, studies have shown that antioxidant compounds derived from foods might help gastrointestinal issues by modulating the composition of some of the beneficial microbial species in our gut. Probiotics are one of these potent antioxidants that may be health-promoting and have other beneficial effects on the body.

Astaxanthin is a probiotic that is essentially a red pigment belonging to a group of chemicals called carotenoids It occurs in certain algae and causes the pink-red color in salmon. More notably, it exhibits superb antioxidant properties that might protect cells from damage and improve how the immune system functions. Because it can affect the gut microbiota and is an anti-inflammatory, it may have several health benefits, including digestive health, skin health, energy metabolism, cardiovascular health, cognitive functions, immunity, and vision.

However, despite these beneficial health effects, our knowledge about the function of astaxanthin remains limited. Doctors with whom LifeSpark consults frequently have concluded that it should not be harmful if taken in moderation, and the potential benefits are very high. Therefore, if anyone has a perceived benefit from taking a few milligrams a day, it can be something they can add to their diet. With this in mind, we offer a few words of caution: Always speak to your doctor before beginning any supplement. Astaxanthin may interact with blood thinners, cholesterol medications, liver medications and functions, and immune support medications. It might also cause increased bowel movements and red stool color, and it might cause stomach pain in high doses.



#### Solve the puzzle for the sum of the top numbers

#### Rules:

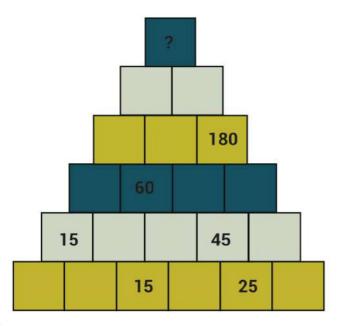
Each block represents a number The number on each block is the **sum** of the two numbers directly beneath it

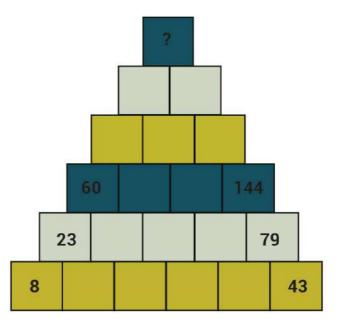


One inexpensive brand of

Astaxanthin on the market.

Astaxanthin







The Educational Event on Sunday was excellent! Thanks for sending me the email. I could not attend at the time but it was phenomenal that I could listen at my leisure because I have trouble attending the sessions when they are given!!

G.M.

You are such an amazing organization! Rabbi Gruskin's things he wrote on the website gave my wife such incredible chizuk! Not just for Parkinson's, but for life!

N.R.

Thank you, Rabbi and Mrs Gruskin for the "Help and Hope" you are bringing to people.

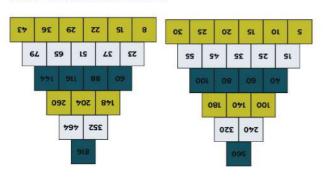
M.N.

#### Dear Editor,

I want to express my appreciation for your article on the potential benefits of green tea in Parkinson's disease treatment. It's encouraging to see research exploring natural compounds like EGCG, which could offer a non-invasive way to slow disease progression. As someone who follows Parkinson's research closely, I'm grateful that you are keeping readers informed on emerging possibilities. With more studies like these, we can remain hopeful for new ways to improve the lives of those affected by PD.

Mr. K. P.

#### MIND GYM ANSWERS PAGE 6





"As explained, Parkinson's Disease is a depletion of dopamine in the brain. But before you fill up that space with a lot of negative thoughts, let's discuss your treatment options."

Dear Rabbi Gruskin and the rest of the devoted staff,

Thank you so much for the inspiring lectures on the phone. I try to listen every month. Even my husband listens in because he was home bein hazmanim. Keep up the good work. Hatzlocha Raba, kol tuv,

B.D.

#### Dear Editor,

The development of adaptive Deep Brain Stimulation (aDBS) for Parkinson's disease (PD) represents an exciting step in personalized care. Unlike traditional DBS, aDBS adjusts in real-time based on brain activity, offering better symptom control and improving quality of life. That many study participants reported a 50% improvement over conventional DBS is promising. This technology could be a game-changer, making treatments more effective and reducing the need for constant clinical adjustments.

I hope more studies explore its benefits. Thank you for highlighting this promising topic!

Mrs. G.

Drop us a line info@lifesparkpd.com Subject line - Editor Or text 732.534.6388



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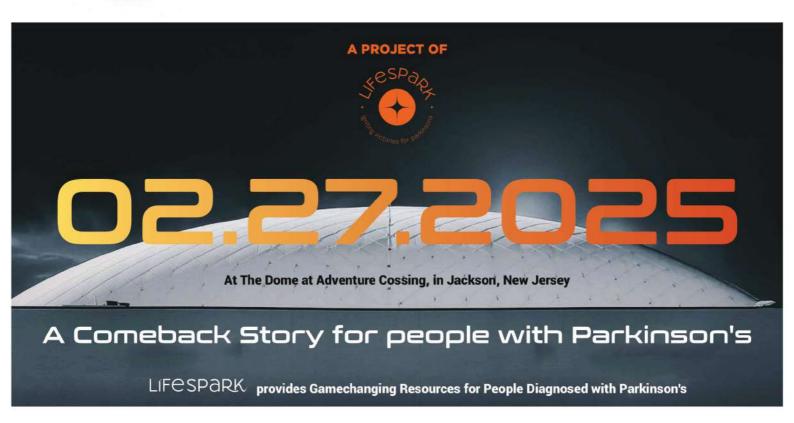
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LifeSpark has teamed up with the LBA to create an incredible evening with a volleyball tournament as a fundraiser for our Parkinson's community. To donate, please use this link https://www.rayze.it/therally/Lifesparkpd.

For more information, please reach out to our office TheRally@LifeSparkPD.com or call Shani at 732.806.1133 x301