

Cambridge Branch Newsletter – November-December 2016

Editor
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RECENT EVENTS

DANCE CLASSES CONFIRMED FOR 2017

Plans have now been confirmed for the dance exercise program for Branch members and any others living with Parkinson's. This follows on from two successful dance taster sessions earlier this year organised by the Dance Ensemble founders, Romina Vuono and Jeanette Simpson, who produced and performed in the dance show, 'Take a Step', in January of this year. They are planning a twice-a-month dance activity called 'Engage', which is geared specifically to the needs and limitations of those with Parkinson's, for which they have had special training. Activities with a rhythmic component, and exercise with dance-like qualities, are recommended by Parkinson's UK as aids to help with the most common symptoms of the condition.

We hope members will find this activity very helpful and enjoyable. The dance programme will initially run for six months from January to June 2017, starting on January 21. The two classes each month will be on the first and third Saturdays, running from 2-4pm, at the Frank Lee Centre, on the Addenbrooke's Hospital site. For more information and to enroll contact Romina Vuono at rv254@cam.ac.uk.

THREE CAMPAIGNS AT PARTY CONFERENCES



Our Branch Chairman, Charlie Nightingale (pictured with Heidi Allen, Tory MP for South Cambridgeshire) was a representative for Parkinson's UK at this year's Conservative Party Conference, held at Birmingham's ICC from October 2-5. "In three days we met 17 MPs. It was a great way to access them, and altogether a rewarding experience," he said. Overall, supporters and staff from Parkinson's UK attended the conferences of all three main parties. They held nearly 40 meetings with MPs, to discuss three main campaign issues: Attendance Allowance, Prescription Charges, and the impact of Brexit on UK science and research.

Around 36,000 people with Parkinson's claim Attendance Allowance (AA), which enables them to pay for crucial things like taxis to medical appointments, energy bills, food and clothing. The AA is currently administered by the Department for Work and Pensions. The Government is proposing that instead, in England it should be devolved to Local Authorities (LAs), which would have to fund payments from business rates. Parkinson's UK says this will create a postcode lottery, and is concerned that many LAs will not be able to meet the demand from business rates, resulting in people losing this vital support. Some LAs might decide they cannot provide AA at all, or transfer the money into social care, which would significantly increase demand on already over-stretched social care services.

With regard to Prescription Charges, Parkinson's UK says the medical exemption criteria set in 1968 are out of date and illogical, and exclude Parkinson's. As a result, many younger people with Parkinson's must pay for prescriptions. All people with long term conditions should be exempted from prescription charges, says Parkinson's UK.

The UK has been a net beneficiary of EU science funding, and currently works closely with researchers across the EU, to increase understanding of many conditions and create new treatments. It also shares a regulatory framework on areas such as access to drugs. All this makes it vital that the Brexit negotiations are well focused. In particular, they must ensure continued access to EU funding programmes and collaboration opportunities to advance understanding of Parkinson's. We must also maintain ease of movement, allowing people to travel and work across the EU, and ensure a compatible regulatory framework between the UK and the EU, says Parkinson's UK. For more about what happened at the party conferences, contact campaigns@parkinsons.org.uk.

WORLD PARKINSON'S CONGRESS STAGES FOURTH MEETING

Our Branch member Andrew Curran is an ambassador for the World Parkinson's Congress, which staged its fourth major meeting in September, in Portland, Oregon. Here is his report.

The Congress was a fantastic event lasting four days and attended by over 4,600 people from 67 countries. Speakers covered pretty much all aspects of Parkinson's, from the latest developments in stem cell research to the best dietary choices. And while the talks were the main focus of the Congress, other events were also popular. The Renewal Room had an exciting schedule of activities that ranged from Tai Chi and yoga to dancing and drumming. There was a Book Nook that displayed a range of Parkinson's literature and stories, mostly written by people with Parkinson's (PwP). The Congress theatre, with its daily shows of song and dance, was a great space to unwind.



There was also the Art Walk, a new feature of this year's Congress. One exhibition really stood out for me: Anders Leines, a Norwegian photographer with Parkinson's, had assembled a series of portraits and accompanying text entitled "This is Parkinson's". This simple but captivating exhibition of photos and personal statements highlighted young people living with Parkinson's and dispelled the myth that Parkinson's only affects individuals over 60.

As well as attending talks and the various activities, I also spoke to PwP and we shared our views on living with the condition. I saw a pattern in those that I listened to: the most common symptoms they struggled with were the non-motor symptoms like sleep disturbances, depression, apathy, cognitive issues and behavioural changes, to name a few.

It got me thinking: can we really define Parkinson's as a movement disorder, when it affects so many of our faculties? I don't think so. We have to accept the fact that Parkinson's affects our minds as much as (if not more than) our bodies. The thing that stood out for me in our discussions was not the specific difficulties individuals have, but the overall effect Parkinson's had on them and their families, and how they manage lives that have been irreversibly changed.

This is what I ultimately took away from the Congress: as a person with Parkinson's, it seems to me that how we think and feel is more important than how we walk or write. So let's look after our emotional well-being, because I believe if we do that, it will set us on the right path to achieving contentment, no matter what our physical limitations may be.

SUCCESSFUL FUND RAISING



Two highly successful fund raising efforts took place over the last few months. First was Chris and Pam Holt's cream teas, staged in their Haslingfield garden. Always a popular event, this raised the impressive sum of £542 specifically for our Branch, as well as a further smaller amount for Parkinson's UK. Pam is shown presenting the cheque to our Chairman, Charlie Nightingale. Another extremely fruitful fund raising event was a collection done at Sainsbury's Coldhams Lane branch in Cambridge on September 2. In a few hours we managed to collect no less than £537 from shoppers. Well done and a huge thank you to all those volunteers who took part, a marvellous job!

THAMES TREK CROSSES 16 BRIDGES

On 10 September, Elizabeth Forbes, wife of branch member Martin, completed the Thames Bridges Trek to raise money for Parkinson's UK. This was a large event that involved walking from near Putney Bridge in London to Bermondsey. The route traversed 16 bridges across the Thames. "It was a great walk as it passed so many fine sights and London landmarks: the London Eye, Houses of Parliament and St Paul's, to name but a few," Elizabeth says. "The bridges were also really interesting, the final one being Tower Bridge. The total distance walked was nearly 25km and I finished within five hours, including a 20 minute lunch break. Participants walked in aid of many different charities and I believe there were more than 70 people in total walking for Parkinson's. I would very much recommend this annual event and am very pleased to say my total sum raised is more than £1500."

SCIENTISTS DO STAND-UP COMEDY FOR PARKINSON'S



An unusual fund raising event has raised more than £700 for our Branch – by getting scientists to do standup comedy! Called Science Showoff, it was organised by Philippa Russell (far left), of Cambridge University's Stem Cell Institute, and Steve Cross, a scientist-turned-comedian. They helped train Cambridge researchers to perform a stand-up comedy act for the first time, after just two weeks practice. Then they performed live – and brilliantly! – to a packed house at the Portland Arms on October 10. Money was raised through both ticket sales and collections on the night, and the photo shows a cheque being presented to Chairman Charlie

Nightingale by two of the participants, PhD students Alisa Molotova and Stanley Strawbridge. The Institute already had links with Parkinson's, having received generous funding from Parkinson's UK. Also, Philippa worked with the Parkinson's UK Patient Public Involvement group on a film about stem cell research into neurodegenerative conditions, see: <https://www.youtube.com/watch?v=UhsjerKsr-o>.

BRANCH MEETINGS

CHIEF EXECUTIVE STEVE FORD PRAISES BRANCH

October's meeting greeted the Chief Executive of Parkinson's UK, Steve Ford, who opened his talk with praise for our Branch – clearly a dynamic group, he said, and such branches played a vital role for Parkinson's UK. His main theme stemmed from “thousands of conversations with people with Parkinson's (PwP)” about what would make the biggest difference in their lives by 2020. Three key priorities emerged: better treatment, provision of quality services as standard, and the ability to take control.



For better treatment, scientific advances were critical, and Parkinson's UK has spent a total of around £90m over decades funding research and trials. “But what difference has it actually made in practice?” Steve asked. Not enough, and drug companies were questioning whether it was worth investing in research into Parkinson's and other degenerative conditions. One key requirement was to recognise how much Parkinson's differs between individuals, something clinical trials typically failed to take into

account. The recent creation of a global coalition of Parkinson's charities and drug companies aims to correct that, he said. “This could really change the likelihood of trials being successful.”

Provision of top quality services for PwP was not yet standard across the board, Steve admitted. “There is too much variety, which is why the Parkinson's Excellence Network was set up,” (See <https://www.parkinsons.org.uk/professionals>). This aims to support service improvement and engage people affected by Parkinson's, provide information about education and training, and foster collaboration opportunities.

Taking control meant a whole range of issues, he said – from focusing on what each individual with Parkinson's could do, to making best possible use of the support and information now available. His talk ended with a Q&A, at which branch member David Johnston asked a question precisely about control. He said the service he had received in Cambridge was good, but recent experiences at a hospital elsewhere had been very poor. What could he do about it? He put forward several suggestions: the Parkinson's magazine could feature an article about how to deal with poor care; create a ratings website, much like Trip Advisor; and encourage the use of patient feedback. The hospital he is dealing with has had 70% negative feedback, he said. Steve was encouraging, and assured David he would take action about his proposals. An optimistic end to the session!

DOES IMMUNE SYSTEM PLAY A PART?

Our immune system forms a marvellous defence for us against disease – most of the time. But it can go wrong and become attacker rather than defender, as in the case of the autoimmune diseases. There are more than 80 of these, three of the best known being multiple sclerosis, arthritis and Type 1 diabetes.

For some time now, researchers have suspected that the immune system may also play a role in Parkinson's, and this was the subject of an interesting talk at the September Branch Meeting by Dr Caroline Williams-Gray, a Junior Research Group Leader at the Brain Repair Centre and a Clinical Lecturer in Cambridge University's neurosciences department.

She said the first step is to prove that the immune system is actually playing a part in Parkinson's, and in particular the difference in how quickly the condition progresses from person to person. Post mortem studies of brains donated by people with Parkinson's show lots of inflammatory cells in various areas of the brain, including the one most responsible for Parkinson's, the substantia nigra. PET scans and blood samples from newly diagnosed patients show the same thing, suggesting that inflammatory changes may occur in advance of typical Parkinson's symptoms. Also, research has shown that for people who regularly take conventional anti-inflammatory drugs like voltarol or ibuprofen (for other conditions), the risk of developing Parkinson's is about one third less than normal, a significant difference.



“Immune cell types and markers in the blood differ in Parkinson's compared to control individuals, and a more inflammatory immune marker profile is predictive of more rapid disease progression,” Caroline (left) said. “And if the immune system is involved, we can potentially do something about it, to slow down that progression. The immune system is a promising drug target.” That is why a clinical trial of a drug to suppress the immune system in PD patients is now planned. If funding applications are successful it could start within a year.

TULIP CLUB



The Tulip Club is a draw that raises funds for the Cambridge branch of Parkinson's UK. Membership costs £12 per year, and every month members' numbers are entered into the draw. Two prizes of £10 are won each month, with a bonus at Christmas – the two prizes then being £30 each. The monthly draw usually takes place at the Branch Meeting, with winners being notified individually. People can join the club at any time, and membership runs for 12 months from that date. Anyone can take more than one subscription. To join, fill out a simple membership form and send it with a cheque for £12 made out to Parkinson's UK (Cambridge Branch). Forms are available from Michael Moore of 103 Queen Edith's Way, Cambridge CB1 8PL, tel 01223-244202, email

michael@mooresplace.eclipse.co.uk, and also at branch meetings, from Michael or the desk.

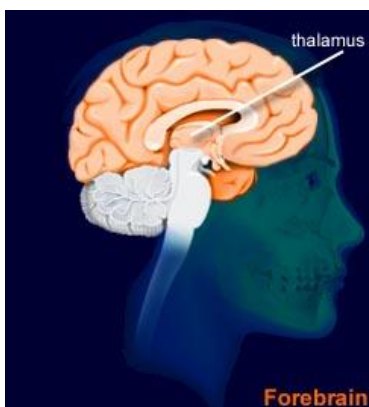
SCIENCE AND RESEARCH

ULTRASOUND THERAPY FOR TREMOR

Positive results from a clinical trial of focused ultrasound therapy for tremor have been published in the New England Journal of Medicine. Studies using the technique for treating Parkinson's are currently underway and if successful, could provide a non-invasive alternative treatment to Deep Brain Stimulation (DBS).

Researchers at INSIGHTEC, a company that focuses on non-invasive surgical treatments, carried out the trial on 66 people with essential tremor and found significant improvements in hand tremor after three months. Focused ultrasound uses crossing beams of ultrasound to precisely target particular tissues in the body. Individual ultrasound beams pass through tissue harmlessly, but where multiple beams (1000 or more) meet, the energy becomes intense, affecting the tissue focused on. This treatment is still developing but is already approved to treat certain types of tumours.

The first focused ultrasound machine in the UK is now being used at St Mary's Hospital in Paddington, London, to treat people with essential tremor, such as in the arm. Treatment for Parkinson's is also planned, possibly in 2017. The ultrasound waves focus on and burn a hole (a lesion a few mm in diameter) in an area of the brain called the thalamus, which decreases or stops the tremor.

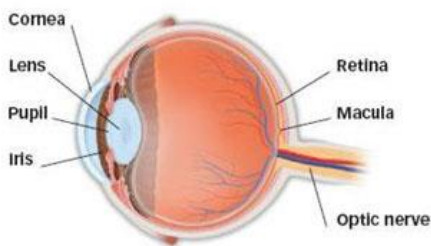


The procedure is carried out in a magnetic resonance scanner whilst the patient is awake. With the ultrasound technique, there is no need to insert anything into the brain, unlike DBS, making it much less invasive. It also has advantages over other techniques like radiosurgery. See a summary of treatments for Parkinson's tremor at the Focused Ultrasound Foundation <http://www.fusfoundation.org/diseases-and-conditions/brain-disorders/parkinsonian-tremor>.

EARLY DIAGNOSIS ADVANCES

Several recent developments suggest it could soon be possible to achieve early diagnosis of Parkinson's, before obvious symptoms appear. For example, Edinburgh University researchers have discovered a way of detecting a molecule linked to Parkinson's in samples of patients' spinal fluid. The test detects a protein molecule called alpha-synuclein, which forms sticky clumps called Lewy bodies inside the brain cells of people with Parkinson's and some types of dementia. Previous efforts to develop a test for alpha-synuclein have produced inconsistent results because the protein is also found in healthy brains. It is only when the protein clumps together that it causes problems.

The Edinburgh technique is a highly sensitive way of measuring the stickiness of proteins, called real-time quaking induced conversion. It can detect tiny differences in the properties of proteins in the brain that can mean the difference between disease or not. In early tests, the technique accurately identified 19 out of 20 samples from patients with Parkinson's, as well as three samples from people considered to be at risk of the condition. There were no false positives in any of the 15 control samples from healthy people. The technique also identified patients with a type of dementia caused by Lewy bodies, but not other types of dementia such as Alzheimer's disease.



The second development is a low-cost, non-invasive eye test to detect Parkinson's. Based on research in rats at University College London (UCL), researchers have discovered a new method of observing changes in the retina, which can be seen in Parkinson's before symptoms become evident. Using instruments routinely used in eye clinics, the scientists employed the new imaging technique to observe these retinal changes at an early stage. This method would allow earlier diagnosis of Parkinson's and also could be used to monitor how patients respond to treatment. The technique has

already been tested in humans for glaucoma and trials are due to start soon for Alzheimer's.

Following the observation of retinal changes in the rats, the team treated the animals with a new version of the anti-diabetic drug rosiglitazone, which helps to protect nerve cells. There was clear evidence of reduced retinal cell death as well as a protective effect on the brain, suggesting that it could have potential as a treatment for Parkinson's.

Finally, the BBC2 programme Nature's Weirdest Events featured the Parkinson's UK funded study investigating whether skin odour could lead to early diagnosis of Parkinson's. Researchers believe Parkinson's may cause changes in the sebum – an oily substance in the skin – of people with the condition that results in a unique and subtle odour on the skin only detectable by people with a keen sense of smell. The study began after a 'super-smeller' from Scotland was able to identify people with Parkinson's from just the T-shirts they had slept in. The super-smeller was even able to detect smell changes in someone who had not yet developed the condition. See

<https://www.parkinsons.org.uk/news/21-october-2015/skin-odour-could-lead-early-diagnosis-parkinsons>

ANTI-LEUKEMIA DRUG TO BE TESTED

An anti-leukemia drug, nilotinib, which has shown dramatic potential for treating Parkinson's (see Newsletter of January/February 2016), is to be trialled by three leading Parkinson's research organisations: the Michael J. Fox Foundation, the Van Andel Research Institute, and the Cure Parkinson's Trust (CPT).

The three aim to design and co-fund a therapeutic development program including a double-blind, placebo-controlled clinical trial of nilotinib expected to begin in 2017. Preclinical studies have shown that nilotinib may protect neuronal cells from Parkinson's by inhibiting the activity of a protein known as c-Abl, but more work is needed to understand the relationship between nilotinib dosing and c-Abl activity. The role of c-Abl as a cancer driver in myelogenous leukemia is well known and recent work has demonstrated it may also play a role in Parkinson's.

There is reason for optimism about the promise of nilotinib for Parkinson's, both as a therapy to reduce symptoms in the short term and potentially even as a disease-modifying treatment – one that can slow or even stop Parkinson's progression, something no current treatment can do. Nonetheless, the organisations urge patients and clinicians to wait for further safety data before considering adding the drug to their treatment regimens. There is not yet enough information to assert that it works in Parkinson's and, perhaps most critically, that it is safe to take long-term, they say. However, some people are already taking nilotinib, and the organisations are very keen to hear from them. If you are one of them, completing [this survey](#) would be very helpful. Alternatively, call the CPT on 020-7487-3892.

RESEARCH VIDEOS AVAILABLE



Want to find out more about laboratory research? Parkinson's UK provides online research videos that explore the science behind Parkinson's and how researchers are working towards better treatments and a cure. Watch the latest animations, interviews and lectures on a wide range of topics including: [pain and swallowing in Parkinson's](#); [treating Parkinson's by reprogramming cells](#); [preventing falls and using stem cells to cure Parkinson's](#). Plus lots more! See <https://www.parkinsons.org.uk/content/lab-parkinsons-research-lecture-series>

DIABETES TREATMENT UNDER TRIAL

A clinical trial is now underway in Los Angeles to test a Type II diabetes drug, liraglutide, as a potential treatment for Parkinson's. The trial is part of the [Linked Clinical Trials initiative](#) (LCT), a programme led by the Cure Parkinson's Trust, working with the US Van Andel Research Institute. Type II diabetes and Parkinson's may not appear to have much in common but a look below the surface reveals important molecular similarities that provide a potential target, with the hope of slowing or stopping the progression of Parkinson's.

Liraglutide belongs to a class of drugs called [GLP-1 agonists](#) and prompts the release of insulin, which lowers glucose levels in the blood when bound to its receptor. Recent findings suggest that when liraglutide activates these receptors in the brain, it provides protection against degenerative damage to key brain cells, specifically those affected in Parkinson's.

"Given the increasing evidence of a possible role of insulin resistance in neurodegeneration, we expect this GLP-1 agonist to have an impact Parkinson's symptoms and its progression," said the trial leader, Dr Michael Tagliati. "A remarkable aspect of this research is the focus on mechanisms that may address both motor and non-motor features of the disease."

DATES FOR YOUR DIARY

QUIZ POSTPONEMENT

We are disappointed to announce that our proposed Quiz on October 13 had to be postponed. Despite the valiant efforts of several committee members, who made direct approaches to local companies and organisations, we had little or no response from them. So, we hope to resurrect the idea some time in 2017. Watch this space!

MEMORIAL LECTURE ON GDNF

Parkinson's UK is holding this year's Florence Pite Memorial lecture at the Royal College of Surgeons (35-43 Lincoln's Inn Fields, London), titled 'Uncovering new Parkinson's treatments: What's next?' It starts at 6.45pm on November 23, and will discuss the trial of GDNF (Glial cell line-Derived Neurotrophic Factor), seen as one of the most promising current new therapies. Speakers will include Dr Alan Whone of the Frenchay Hospital who led the GDNF trial, and a patient. They will discuss their experience of being part of the clinical trials. Places are free but must be booked in advance. Contact Parkinson's UK on 020 7963 9319 or events@parkinsons.org.uk. Florence Pite was a musician diagnosed with Parkinson's in 1995 who died in 2014, leaving a legacy to support the delivery of the lecture.

CHRISTMAS LUNCH



Our Christmas lunch is fast approaching – Friday, December 9, at the David Rayner Building. Start time 12 for 12.30, tickets at £17.50 available at the Branch Meeting (November 25), or from Margaret Steane (01223 860128; msteane@msteane.freeserve.co.uk). There is a choice of two starters, two main courses and two desserts: vegetable soup or prawn cocktail; roast beef or turkey; and Christmas pudding or fresh fruit salad. There will also be a vegetarian option. Please make your choices when you buy your ticket(s).

DECEMBER CARERS' MEETING

The December Carers' Meeting on **Friday, December 16** will feature as main speaker Valerie Freestone, a Dementia Specialist Nurse from Addenbrooke's Hospital. The meeting runs from 10:30-12:30pm, at Davison House, Brookfields Hospital, CB1 3DF. The meetings are often invaluable for both carers and people with Parkinson's, so please try to

come. **But also please note: if you plan to attend, it is important that you phone the office (01223 723018) in advance and make a booking in the patient's name. Also, please say if the carer will be attending on their own or together with the person they look after, so the team know how many people they have to accommodate for the organised activity.** After the December meeting, there will be a short bring and share lunch to celebrate Christmas.

WALKING AND BIKING



Local organisations are offering walking and biking events for people of all abilities, with leaders and instructors on hand. The Sustrans 'Walk Local' team operates six short, easy walks around Cambridge, including ones starting from Addenbrooke's Hospital, Cottenham, and Histon and Impington. Details: 01223-319981; walklocal@sustrans.org.uk; www.sustrans.org.uk/events. YouCanBikeToo offers bike rides suitable for everyone every Sunday from 11-12noon at Milton Country Park (01223-420060). It rents out all-ability bikes for £6 an hour including helmets (support workers free). For more, see www.youcanbiketoo.org/family-fun-sundays.

GENTLE MOVEMENTS IN EXERCISE CLASSES

Exercise classes, called Gentle Movements, based on practices like Chi Kung, Feldenkrais, Yoga and dance are being run by Moniek Hopman at the Cambridge Friends Meeting House (91- 93 Hartington Grove, CB1 7UB). Group sessions take place during term time on Tuesdays from 1.30-2.30pm and Thursdays, 11.30am-12.30pm. Moniek can also arrange one-to-one sessions. Some clients have Parkinson's, including branch member Martin Forbes. He says the exercises are suitable for everybody, including those with limited mobility. "They are gentle but good, less demanding than pilates, which I also do," Martin says. Charges are £6 per session if paid per half term or £7.50 per drop-in session. For more, contact Moniek on 01223-842478 or gentlemovements22@gmail.com.

PARKINSON'S AWARENESS WEEK

Parkinson's Awareness Week will run from April 10-16 next year, a special one for Parkinson's as it is the 200th anniversary of the publication of the paper that identified the condition, by James Parkinson. And April 11 was actually his birthday! More details in the next newsletter.

TULIP 2017 FUN-RUN: START GETTING SPONSORS!

Next year's Tulip Fun-Run – 10.30am on Sunday, April 23 – may seem a long time in the future, but getting sponsors takes time! Download application forms and full details and instructions from www.parkinsonscambridge.org.uk or Charlie Nightingale (12 Aylesford Way, Stapleford, CB22 5DP). Lots of participants required!

IN MEMORIAM

John Ison and Don Humphries, members of our Branch, have died. Future newsletter editions will acknowledge members' deaths. Please let the editor (dboothroyd@btinternet.com) know of the passing of a local member.

Facebook: www.facebook.com/parkinsonsukcambridge/

Twitter: <https://twitter.com/CambBranchPUK>

Help Line 0808 800 0303 (free phone call). Specialist advisers can answer questions on any aspect of Parkinson's. **Parkinson's Nurses in our area.** If you would like advice about your Parkinson's or information about groups they run please contact the Parkinson's Nurse Team on **01223 723018**.

Branch Website – www.parkinsonscambridge.org.uk

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PARKINSON'S UK – CAMBRIDGE BRANCH CALENDAR – NOVEMBER-DECEMBER 2016

REGULAR MEETINGS AND ACTIVITIES

* SEE OF SPECIAL NOTE for holiday breaks *

* Aquatherapy *

Thursdays weekly, 14:30-15:30
Chesterton Sports Centre, Gilbert Rd, CB4 3NY
Contact: Caroline 01223 314279

Branch Meeting

Fourth Friday of every month except December
10:30-14:00,
David Rayner Building, Scotsdale's
Garden Centre, Gt Shelford, CB22 5JT
Includes soup and sandwich lunch.
Details in "OF SPECIAL NOTE", **but be aware that
the programme may change, and consult
website or phone to check if necessary.**
Contact: Caroline 01223 314279

Bring and Share lunch

First Tuesday of each month, 12:15-15:00
Barnabas Court, Milton, CB24 6WR
[To reach Barnabas Court leave A14 at Milton (A10) exit, head to
Tesco, take Cambridge Rd off Tesco roundabout and Barnabas Ct is
second on right. All are welcome to all or part of meeting]
Contact: Gabby 01223 356433

Carers' Meeting

Programme of support, chat, information and
friendship
Quarterly, second Friday of the month
NB Third Friday in December 2016
10:30-12:30 – see "Of Special Note"
Davison House, Brookfields Hospital, CB1 3DF
Aromatherapy 10:30-12:00
Contact: Lorna 01223 723018 or 07770 533948
Numbers limited: PHONE to indicate interest

"Engage" Dance for Parkinson's

A dance exercise programme for those living with
Parkinson's
1st and 3rd Saturday each month, 14:00-16:00
The Frank Lee Centre, Addenbrooke's Hospital
Contact Romina Vuono 01223 331186; 07748
293833; rv254@cam.ac.uk.

Nightingale Singers

Speech Therapy through Song
Fourth Friday of month, 12:45
David Rayner Building, Scotsdale's Garden Centre,
Gt Shelford, CB22 5JT
Contact: Charles Nightingale 01223 844763

* Yoga *

Mondays weekly, **10:30-11:30**
The Meadows Community Centre, Room 2
St Catharine's Road (corner of Arbury Rd & Kings
Hedges Rd) CB4 3XJ
Contact: Michèle 01223 563774

OF SPECIAL NOTE

NOVEMBER

- 1: Bring and Share Lunch: including
Photography Appreciation with Jenny Grant
- 25: Branch meeting:
10:30 Refreshments
11:00 Christmas Party
Aromatherapy throughout

DECEMBER

- 5: No Yoga
- 9: Christmas lunch.** *See article above*
- 15: Last Aquatherapy until January 5, 2017
- 16: Carer's Meeting **NB** not 2nd, but 3rd Friday
- 19: Last Yoga until January 9, 2017
- 23: No Branch Meeting or Nightingale Singers
- 25: **A MERRY CHRISTMAS TO ALL!**

JANUARY, 2017

- 3: No Bring and Share Lunch
- 5: Aquatherapy resumes
- 9: Yoga resumes
- 21: "Engage" dance for Parkinson's; *see article above*
- 27: Branch Meeting:
10:30 Refreshments
11:00 David Johnston talks about
"Wills, Lasting Powers of
Attorney and Advance Directives"
12:00 Lunch

FEBRUARY

- 24: Branch Meeting:
10:30 Refreshments
11:00 Colin Kirtland presents an illustrated
talk: "Wildlife in the Garden"
12:00 Lunch

MARCH

- 10: Carer's Meeting
- 24: Branch Meeting and **AGM**:
10:30 Refreshments
11:00 AGM
11:30 Talk to be announced
12:15 Lunch

APRIL

- 10-16: Parkinson's Awareness Week
- 23: Tulip Fun-Run 2017**
- 28: Branch meeting
10:30 Refreshments
11:00 Anna-Louise Smith, Research Support
Network Manager, P-UK
12:00 Lunch