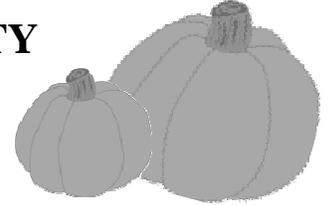


# CAPITAL AREA PARKINSON'S SOCIETY

(512) 371-3373

<http://www.capitalareaparkinsons.org>

NOVEMBER 2010



## NOVEMBER 20<sup>TH</sup> MONTHLY MEETING

November 20th we'll have our Final Round Table discussion of the year. Remember, this is a great time to share, discuss and have questions answered by others who may be going through some of the same experiences or have already gone through similar experiences.

**New Location:** Riverbend Church in the Quads from 2:00-4:00pm, 4124 N. Capital of Texas Hwy (Hwy 360), Austin, 78746.

The Quads are located on the west side of the campus, off Cedar Street. There are well-marked signs leading to the Quads, should you take another entrance.

## SUPPORT GROUP CORNER

\*\*\*Check [www.capitalareaparkinsons.org](http://www.capitalareaparkinsons.org) for more support group locations \*\*\*

Susie Lightfoot-Scherr has just started another Support Group in Lockhart. The first meeting is Thursday, November 11<sup>th</sup> at 2pm. The group meets on the 2<sup>nd</sup> Thursday of every month and is located in Parkview Nursing & Rehab Center in the Robuck Room. You may contact Paige at 512-398-2362 or Susie at 512-345-1380 for more information or RSVP.

Solo with Parkinson's meets December 6th, from 12:30-2, for lunch and conversation at the home of Kitty Hoskins, 8227 Summer Place, Austin 78759.

Call Kitty, 345-6408, to let her know that you are coming; call Lydia Blanchard, 445-2478, for more information. Solo with Parkinson's is a group for those who have Parkinson's disease and are without care partners.

## THE SLATE IS IN!!!

At the November meeting, membership will be voting on Officer's elect. This is an open election; therefore, other members may be nominated for a position at the meeting.

Currently slated- President: Deborah Bryson, Vice President: Tyler Sutliff, Secretary: Lydia Blanchard, Treasurer : Claudette Porter.

## NPF's New Helpline: 1-800-4PD-INFO (1-800-473-4636)

This new helpline is staffed by a group of dedicated, highly-trained specialists, ie: social workers and nurses, with Spanish speaking capabilities. The Helpline can draw on the latest research and practice guidelines to help answer questions. If they are unable to answer your questions, they will direct you in the right place. For more information, visit: [www.parkinson.org/helpline](http://www.parkinson.org/helpline)

## CAPS ADVISORS

Kitty Hoskins  
Lois Rice  
Lorraine Chammah  
Maxine Jenks  
Sam Anderson  
Susie Lightfoot Scherr

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Vice President  
Jaime Johnson  
Secretary  
Lydia Blanchard  
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Claudette Porter

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Patricia Bordie  
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Wynnette Harris  
Yulah Sisler

## TIME FOR DUES

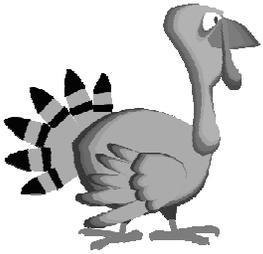
Please be sure to pay your 2011 annual dues of \$15 at the next meeting OR [pay online on the website](#) OR you can

mail payment to:

Capital Area  
Parkinson's Society.  
PO Box 27565,  
Austin, TX 78755-2565.

Check made out to:  
Capital Area Parkinson's Society





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NOVEMBER 2010



## Swallowing in Parkinson Disease: Be Proactive – Stay Healthy

Source: American Parkinson's Disease Association, Inc  
[www.aapsg.org](http://www.aapsg.org)

Have you noticed any difficulty with swallowing since you have been diagnosed with Parkinson disease (PD)? These swallowing difficulties are classified as dysphasia. Dysphasia is any problem in chewing or swallowing from the time food, drinks, or medications enter the mouth until they enter the esophagus. Dysphasia is common in PD and is not a disease itself, but rather a symptom of an underlying condition that affects safe swallow function. This article serves to describe the swallowing process, identify symptoms of dysphasia, and discuss ways to be proactive in making swallowing as safe and easy as possible.

The normal swallow is divided into three stages: 1) oral stage, 2) pharyngeal (throat) stage, and 3) esophageal stage. The oral stage includes the lip seal (after food/liquids/medications have entered the mouth), tongue control, and the ability to move these substances from the front to back of the mouth. The pharyngeal phase includes the soft palate (soft tissue on the back of the roof of the mouth) rising, initiation of the swallowing reflex, laryngeal (voice box) elevation, and food/liquids/ medications passing into the esophagus. The esophageal phase occurs when food/liquids/medications pass through the esophagus to the stomach, lasting anywhere from 8 to 20 seconds.

Swallowing problems are important to detect because they can lead to a variety of other issues, such as: difficulty taking medications, dehydration, malnutrition, aspiration (food or liquid entering the lungs), constipation, or esophageal reflux. The following list provides several possible symptoms of dysphasia:

- Drooling
- Taking a long time to eat
- Difficulty swallowing pills

- Food or liquid collecting or spilling out the mouth, due to poor lip closure
- Food left in the mouth after swallowing
- Difficulty chewing, forming, and/or moving food to the back of the mouth
- Taking 2-3 attempts to complete a swallow or food remaining in the mouth for several seconds after chewing is completed
- Difficulty getting the swallow reflex started
- Coughing or choking

Your physician should always be kept informed of swallowing difficulties and may recommend a swallow test with a speech-language pathologist (SLP). A swallow test can either be an office visit or a modified barium swallow (MBS) study, which is an x-ray to check problems with swallow function and determine why a swallowing difficulty exists. Following the swallow test, the SLP can provide an individualized swallow plan to make swallowing as safe and easy as possible.

For a list of Swallowing Strategies, visit

[www.capitalareaparkinsons.org](http://www.capitalareaparkinsons.org).

The article demonstrates that dysphasia is multifaceted and complex. There are a variety of ways to manage swallowing problems and a unique solution for each person. Be proactive in managing swallowing difficulties – and stay healthy!

