



JUNE NEWSLETTER



PRESIDENT'S MESSAGE

I am enjoying the colours of Autumn. But winter is getting closer, and the cold is no friend to Parky People. So dress warmly and keep moving if you can.

This is a good time to learn a new craft. We have a Craft Group that meets once a fortnight at my place. You are welcome to come along and learn knitting, crocheting, embroidery, sewing, quilting and smocking. For further information contact me on rdparkin@yahoo.com.au. (Did you know that soldiers with Shell Shock (PTSD) during WW1 were taught knitting as part of their recovery process, and many went on to become top designers.)

Our next meeting is on Friday 5th June where Suliana Manuofetoa and Hayley Need from Medtronic Deep Brain Stimulation will give us a greater understanding of this procedure. So this is your opportunity to ask questions and find out exactly what is involved, and whether this is the option for you.

Our choir will be singing at the Uniting Church Berowra fete on Saturday 6th June. So drop in if you are nearby.

Also a big thank you to all the wonderful people who pitched in to make the BBQ such a success, particularly John, Dick and the wonderful Danielle. It is always a highlight of the year.

Rose Parkin



ACTIVITIES / EVENTS

Tuesdays 10.00am	Walking and Social Group	Asquith Park, Mills Ave, Asquith
Thursdays 10.00am-11.30am	Parkinsong (Each Thursday)	Turrumurra Seniors Centre Gilroy Rd, Turrumurra
Friday 5 June 10.00am-12.00pm	Members' General Meeting - <i>Guest Speakers from Medtronic Deep Brain Stimulation</i>	Mt Colah Community Centre 6X Pierre Cl, Mt Colah
Fridays 12, 19, 26 June 11.30am-12.30pm	Exercises Classes (except first Friday of Month)	Mt Colah Community Centre 6X LPierre Cl, Mt Colah
Sat. 6 June 10.30am-11.00am	Market Stall & Choir performing at Berowra Uniting Church (see details below *)	Berowra Uniting Church Alan Road, Berowra
Fri. 3 July 10.00am-12.00pm	Members' General Meeting - Guest Speaker on <i>Search Dogs</i> , Sydney	Mt Colah Community Centre 6X Pierre Cl, Mt Colah
Fri. 7 August 10.00am-12.00pm	Members' CONCERT - Angela Hogan from Opera Australia	Mt Colah Community Centre 6X Pierre Cl, Mt Colah

* The Parky Choir will be performing from 10:30 until 11:00 a.m. Best to arrive around 10am. Delicious scones are available to have with your morning tea/coffee and you can also enjoy a sausage sandwich for lunch to top up your energy levels!!!

We'd also appreciate any hand made knitted or crocheted garments AND any biscuits, slices or cakes to sell on our stall. Also, if at all possible, it would be appreciated if some help could be provided to look after the stall as it gets quite busy for one.

Thanks very much. Diana Sidney

Position Vacant

Website Officer - www.parkypeople.org

Keep the Association's Website up-to-date. No experience required but interested to learn a new skill. Appropriate training will be provided with continued support.

Enquiries to: terri.weston@gmail.com

Thank you Bev Dind for contributing these very interesting videos for our Newsletter.



WHAT IS PARKINSON'S

It's a neurodegenerative disease affecting movement. The disease is characterised by a lack of dopamine. Yes, you are right but I urge you to be patient and watch this video which is quite long.

The video talks about a second motor system within the brain which is less dependent on dopamine. If we engage this system we will have more control of our movements.

https://youtu.be/9YWu9b_4rwI?si=XNmVrTMGtr7uTm45

To find out more about this not-for-profit organisation, google - parkinsonvoiceproject.



HOME PRACTICE SESSIONS

Hello

I complete one of these 20min videos most nights. This one has the usual but also a video of a patient talking before and after therapy. It's quite impressive.

https://parkinsonvoiceproject.org/home-practice-sessions/?srsltid=AfmBOorX-rSTUmgnuc-nA_pKh0h_HQoD4kSsfJUEy5O6_25Kw0gTZSUp

Bev Dind



APATHY & MOTIVATION IN PARKINSON'S



Signs of Apathy

- Less interest in activities once enjoyed
- Spending more time without a clear purpose
- Needing reminders to start or finish daily tasks
- Less emotional response (for example, feeling “flat” or less excited)
- Withdrawing from conversations or social activities
- Trouble staying engaged in activities (for example, losing focus or interest more easily)

Apathy is a lack of enthusiasm, interest, or motivation for things you used to enjoy, and it is a common non-motor symptom of Parkinson's.

Apathy can be challenging but is manageable through optimising your medications, staying social and continuing to do the things you used to do.

Apathy & lack of motivation in Parkinson's:

Apathy is a common non-motor symptom, affecting up to 40% of people living with Parkinson's. It is characterised by a lack of interest, enthusiasm, or motivation to do the things you used to do, which can significantly impact daily life and relationships. Unlike depression, apathy is not associated with feelings of sadness or guilt but rather a general emotional flatness and difficulty starting activities.

Progression of apathy in Parkinson's:

When does apathy appear?

Apathy can show up even before a formal Parkinson's diagnosis, during the prodromal (early) phase, and tends to become more common as the condition progresses.

What does apathy look like?:

It's not just “lack of motivation.” Apathy is a multidimensional experience that can affect:

- *Behaviour, with reduced initiative or engagement in activities*
- *Social interaction, with withdrawal or reduced interest in connecting with others*
- *Emotional response, although emotional sensitivity may remain intact in some people, other aspects may be dulled*



Apathy and Motivation in Parkinson's (continued)

Some people with apathy in Parkinson's may still feel emotions deeply, but they might struggle to express them or act on them. Apathy affects motivation and initiative, not necessarily empathy or emotional awareness.

However, in some cases, especially when apathy is combined with executive dysfunction or cognitive decline, a person might appear:

- Indifferent or emotionally flat
- Less responsive to others' feelings or social cues
- Occasionally frustrated or irritable, especially if they're misunderstood or overwhelmed

But this doesn't mean they become intentionally insensitive or belligerent. These behaviours are often a reflection of neurological changes, not personality or intent. However, it is still frustrating for the person affected and those around them.

Is apathy the same as depression?

While apathy and depression can overlap, they're distinct conditions. Apathy is more closely tied to cognitive changes, especially difficulties with executive function, like planning, decision-making, and goal-setting. People with apathy feel indifferent or not bothered. Depression is more closely tied to mood changes, such as persistent sadness, hopelessness, and negative thoughts about the future, rather than the motivational and cognitive deficits that define apathy.

Why addressing apathy matters

Apathy can interfere with effective management of Parkinson's symptoms, as people may struggle to stick to their medication schedules, maintain physical activity, or engage in social interactions. This can lead to a decline in overall health and wellbeing.

Strategies for managing apathy - Apathy manifests in three forms

1. cognitive (loss of interest in new things)
2. emotional (reduced emotional response)
3. behavioural (difficulty initiating activities)

While there are no specific medications approved for treating apathy, structured activities, social engagement, and regular exercise can help. Care partners play a crucial role in recognising apathy and encouraging their loved ones to seek support from their care team.



Apathy and Motivation in Parkinson's (continued)

By understanding apathy as a symptom of Parkinson's, you, your friends and family can take steps to ensure you stay engaged and active in doing the things you love despite this frustrating symptom.

Key Statistics

1. Apathy affects up to 40% of people with Parkinson's disease, making it one of the most common non-motor symptoms (den Brok et al., 2015).
2. Apathy is strongly associated with executive dysfunction, particularly difficulties in planning and goal-directed behavior (Kulisevsky et al., 2013).
3. Meta-analyses confirm apathy is independent of depression, though they may co-occur, highlighting the need for distinct treatment approaches (Foley & Cipolotti, 2021).
4. Apathy significantly reduces participation in daily activities and is linked to poorer disease outcomes and caregiver burden (Mele et al., 2020).

Strategies for managing apathy

While there are no specific medications approved for treating apathy, structured activities, social engagement, and regular exercise can help. Care partners play a crucial role in recognising apathy and encouraging their loved ones to seek support from their care team.

Apathy in Parkinson's can be challenging, but there are strategies to manage it. Be open about your apathy to friends and family, stay engaged socially, exercise, and optimise medications, lifestyle and treatments.

Here are our top ten tips

1. **Reflect on your feelings:** Consider why you feel apathetic and try to see things differently. Focus on what you can still do rather than what you can't. If you're feeling low or anxious, find ways to improve your mood, like taking a walk or doing something else you love.
2. **Reconnect with past enjoyments:** Re-engage in activities you used to enjoy, reconnect with friends, or revisit exercise classes. Remember, these past enjoyments can bring back a sense of joy and purpose, helping you to feel more hopeful and motivated.



Apathy and Motivation in Parkinson's (continued)

3. **Follow a routine:** Having a routine reduces the need for excessive planning and effort. Reduce decision-making by having a predictable schedule.
4. **Stick to your plans:** Even if you're feeling apathetic, making yourself meet up with friends or going to support groups or your favourite activities can positively impact your mental health.
5. **Set realistic goals:** Break down larger tasks into smaller steps to make them achievable and less overwhelming. This approach can empower you, giving you a sense of control over your tasks and helping you to feel more accomplished.
6. **Manage energy levels:** Plan enjoyable activities around when you are "on" and have the most energy. Exercise, eat well, drink lots of water, and practice good sleep hygiene to maintain your energy levels.
7. **Stay social and active:** Physical activity benefits physical and mental health in Parkinson's. Consider going on a walk or to the gym with friends. Engaging in physical activities promotes a healthy lifestyle and provides an opportunity for social interaction, which can help combat apathy.
8. **Talk to family and friends:** You need to share your feelings with loved ones and let them know that apathy is a common symptom of Parkinson's and that you may need help staying motivated or getting out of the house. They can provide support and positive feedback, which can be key to managing apathy.
9. **Consult your specialist or Parkinson's Nurse:** If you're struggling with apathy, it's important to seek professional advice. Tell your specialist or Parkinson's Nurse so they can provide strategies to address your apathy effectively. Don't hesitate to reach out for help from your OT who can tailor time-management, motivation and planning interventions for you.
10. **Consider telehealth services:** Telehealth or virtual appointments allow you to connect with mental health professionals remotely. You can have video consultations, phone calls, or chat sessions from home. This convenient and supportive service is beneficial if you have mobility issues or live in a regional, rural or remote area. Remember that seeking professional help is a positive step toward better mental wellbeing, and telehealth can support you.

Parkinson's Australia



ANNUAL BBQ AT BOBBIN HEAD, 1 MAY 2026



As usual it was a terrific day with wonderful food and friends. A great Toaster/Griller was raffled raising money for the Association's projects. See details in the next item.



RAFFLE DONATION OF A TOASTER/GRILLER FROM NICOLE MORGAN (DAUGHTER OF PAM BEATTIE, OUR WELFARE OFFICER) WHICH WAS DRAWN AT THE BOBBIN HEAD BBQ, RAISING \$285 AND WON BY RAY IRVING

When Mum and Dad told us Dad had been diagnosed with Parkinson's Disease, I remember being gripped with fear. Then asking what is that? It was a condition I had not heard of or, if I had, did not register what it meant for the sufferer. Mum and Dad were calm and talked the family through what would lie ahead. For a long time things stayed pretty normal although Dad did resign from work.

He never appeared to be depressed about his condition but I do know he was embarrassed by the tremor in his hand. It was as though he now had permission to retire early and to fill his days with long drives and afternoon rests. Mum, on the other hand, took on the responsibility of sole bread winner and hoping one day Dad would have dinner ready for when she came home!



As his condition progressed, the doctor and specialist visits increased. Dad had trust in his long held belief in God and confidence in Mum. Around this time they joined the Turrumurra Parkinson's Support Group which was a highlight of Dad's month as he was very sociable and who doesn't love the cakes and hot cuppa served. The support group met for many years in the Uniting Church at Turrumurra and the move to Mr Colah is fairly recent.

Seeing others who understood, sympathised and supported the disease made for a solid group of good friends and great company. Having a laugh, learning something new and just being part of a special group of people made a world of difference to Dad. Mum has continued helping and enjoying the friendship of the Parky People and I am grateful to them. The group is full of intelligent, professional people who are getting on with life and having fun along the way.

Parky People are my chosen charity as it's more than raising money, it's caring about others.

Nicole Morgan

**THANK YOU VERY MUCH NICOLE.
Hornsby Ku-ring-gai Parkinson's Association
Committee and Members**



MEETING WITH COMMUNITY DEVELOPMENT OFFICER (LIBRARY & COMMUNITY SERVICES), HORNSBY SHIRE COUNCIL

On Tuesday, 28 April, our President and Vice President (Rose and Michael Parkin) and Secretary (Helen Jordan) met for an hour with Sue Downing, the Hornsby Shire Council's Community Development Officer, Library and Community Services. Sue focuses on community engagement, youth programs and senior social initiatives involving the planning and implementation of community programs, responding to local needs and advocating for residents. Sue has been very aware of the increasing number of people in the Shire who have dementia and was very interested to learn more about Parkinson's.

Sue advised that Council would be holding a *Hello Hornsby Coffee & Chat* event on Tuesday 5 May at Asquith Park and, on viewing our list of events in the Parky People Newsletter, she was very pleased to note that this date would align with our Walking and Social Group (W/S). She invited us to stop by and join them for a chat and a few picnic treats.

Hello Hornsby is a program funded by the NSW Government aimed at reducing social isolation among seniors aged 60 and above. This initiative includes a series of events, such as educational talks, social gatherings, and interactive activities to foster community connection and engagement.

Our Association will keep in touch with Sue in order to increase Council's awareness of Parkinson's Disease. The W/S group was small on the day but we spent important time with Council officers and a Councillor who advised that she attends all *Hello Hornsby* events to find out what the issues are for residents.





CHOIR

WONDERFUL NEWS! Our Director of Music, Naomi Cooper, and Acting/Relieving Director, John Fitzgerald Sice (Jack) are the proud parents of a beautiful baby girl, Delphi.

Naomi and Jack arrived at the Hospital with less than an hour before Delphi arrived.

All the choir members were thrilled to hear the news and view her photo on the large screen. Jack very proudly announced that Delphi is perfection plus, feeding well and has already, in just a week, regained her birth weight.

* * *

About a week prior to Delphi's birth, the choir sang, for the second time, at the Regis Hornsby Aged Care Home. The choir members and residents thoroughly enjoyed the experience with residents joining in with some well known songs.





EN GARDE! A FUN EXERCISE WITH A SERIOUS PURPOSE

One of the exercises we've been practising recently uses half pool noodles – and while it often gets a few laughs, it's actually excellent for posture, coordination, balance, and extension.

The exercise can be performed seated or standing, depending on confidence and ability.

Seated Version:

Sit tall in the chair and hold the end of the half noodle in your right hand.

Keeping the elbow close to your side, slowly extend the noodle out in front of you as far as possible without leaning forward. Then pull it back in under control.

Repeat 10 times before changing to the left hand.

The focus is on:

- sitting tall
- controlled movement
- reaching without collapsing forward
- maintaining good posture throughout

Standing Progression:

For those able to progress safely to standing, we add a split stance:

- left foot forward
- noodle in the right hand

Participants may hold onto the back of a chair with the other hand if needed for safety and balance.

From this position, extend the noodle fully forward – like a fencing lunge – and at full extension shout: **“En garde!”** ... preferably at the top of your voice.

Hold the fully extended position for a count of five before returning to the start.

Repeat 5 times, then swap sides.



EN GARDE! A FUN EXERCISE WITH A SERIOUS PURPOSE (Continued)

This progression challenges:

- balance
- coordination
- posture
- weight transfer
- confidence with movement
- and, perhaps most importantly, willingness to have a little fun while exercising.

The shouting is optional – although strongly encouraged.

Side note: It doesn't have to be a half pool noodle, a walking stick would work just as well.



Felicity Neale

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HYPOMIMIA, ALSO KNOWN AS FACIAL MASKING

Key Takeaways

- People with Parkinson's disease may develop
- hypomimia, also known as facial masking

which is a loss or reduction of facial expressions that can make someone appear depressed or apathetic even when they are not.

View all takeaways

People with Parkinson's disease may develop a symptom called hypomimia, which is a loss or reduction of facial expressions. People with this symptom may appear depressed or apathetic, even when that's not how they're feeling. As a result, facial masking can lead to misunderstandings and negatively affect social interactions and relationships.

"People always thought I hated them," one MyParkinsonsTeam member wrote. "After I was diagnosed and found this was a symptom, I looked in the mirror, and it suddenly made sense."

Various aspects of Parkinson's contribute to facial masking, but the primary cause is a lack of dopamine in the brain. Recognizing this symptom early on will help you get treatment to address the issue.

What Causes Hypomimia?

Parkinson's disease is a neurodegenerative movement disorder that affects various functions throughout the body. Neurons (nerve cells) responsible for making dopamine help control facial expressions. Damage to these neurons affects how the muscles of the face move to create an expression in response to brain messages.

In addition, Parkinson's can cause motor changes that limit the ability to form facial expressions, such as bradykinesia (slowed movements) and muscle rigidity. Stiff facial muscles can impair gestures, such as smiling or raising eyebrows during everyday conversations.

Cognitive impairments from Parkinson's disease may also make it more difficult to recognize and respond appropriately to other people's facial or nonverbal cues. People with Parkinson's may experience changing moods or depression that can be hard to distinguish from the masklike expression caused by reduced dopamine levels. It's not unusual for this early symptom of Parkinson's to be misdiagnosed as depression. However, people with Parkinson's may also feel depressed and require mental health support.



HYPOMIMIA, ALSO KNOWN AS FACIAL MASKING (Continued)

Speech changes, like speaking more softly, can compound the confusion about your true emotions when talking with others. Some of these symptoms can be treated with medication or speech therapy. Educating family members and caregivers about facial masking can increase understanding and patience for better communication despite barriers brought on by the disease.

Impact of Facial Masking

Facial masking can have a negative impact on people's workplace and social interactions, such as job interviews and day-to-day encounters with others. Studies show that facial masking may negatively affect the well-being of care partners of those with Parkinson's disease.

Caregivers on MyParkinsonsTeam have shared their challenges reading their loved ones' expressions: "The hardest thing for me is reading my partner's facial expression. Does anyone else have this problem?"

Another member commiserated: "OMG! That is the worst thing for me. I haven't been able to 'read him' for a couple of years now."

Couples therapy can be helpful for people with Parkinson's and their partners, encouraging them to talk about a range of issues affecting their relationships, whether it's facial masking or involving adult children in caregiving.

Treating Facial Masking

Talk with your neurologist or another health care provider about how facial masking is affecting you. They can help you understand your options for managing hypomimia. In some cases, general treatments for Parkinson's disease may help ease your symptoms. Other strategies, like working with a speech-language pathologist or specialized rehabilitation programs, may help improve your facial movements.

Medications

"My first symptom was masking, a stony face, and a flat affect where normal facial expression was missing," shared a MyParkinsonsTeam member. "I began to have more normal facial expressions as soon as I began meds."



HYPOMIMIA, ALSO KNOWN AS FACIAL MASKING (Continued)

Levodopa is usually the first medication prescribed for Parkinson's. This medication replaces depleted dopamine levels and may help with facial masking and other motor symptoms. Levodopa on its own can cause nausea, so it may be combined with a medication called carbidopa to reduce this side effect. Carbidopa helps keep levodopa intact until it reaches the brain. Other Parkinson's medications that treat motor symptoms may also help with hypomimia.

Additional Strategies To Manage Hypomimia

A speech-language pathologist with experience in Parkinson's disease can provide specialized support and resources to help you with facial masking. This may include doing facial movement exercises.

"I move my facial muscles trying to get some expression," a MyParkinsonsTeam member shared. "My face feels so stiff, and people say I don't smile like I used to." Another member commented, "Some Parkinson's-related exercise classes include practicing facial expressions to help overcome this symptom. Smiling helps keep facial muscles pliable (a good reason to smile more)."

The Lee Silverman Voice Treatment Loud program (LSVT LOUD) is a form of intensive speech therapy to help people with Parkinson's increase their speech volume. LSVT LOUD may also help improve your facial movements.

Some small studies have evaluated specialized forms of facial masking therapy. The therapy improved facial expressions in all cases and, in one trial, also improved the participants' moods.

Talk With Others Who Understand

MyParkinsonsTeam is the social network for people with Parkinson's disease and their loved ones. On MyParkinsonsTeam, more than 99,000 members come together to ask questions, give advice, and share their stories with others who understand life with Parkinson's disease.

Has Parkinson's affected your or your loved one's ability to understand nonverbal cues or express emotion? How have these common symptoms of Parkinson's made an impact on your quality of life and relationships? You may like to join MyParkinsonsTeam which provides opportunities for people to share their experiences.

Thank you Dick Babb for regularly providing the Newsletter with important articles from MyParkinsonsTeam. See more - <https://www.myparkinsonsteam.com/>



COMMITTEE MEMBERS

- President, Rose Parkin
- Vice President, Michael Parkin
- Treasurer, Ian Madden
- Public Officer/Membership, Dick Babb
- Welfare Officer, Pam Beattie
- Event Co-ordinator, John Moore
- Music Co-ordinator, Peter Sidney
- Asst. Music Co-ordinator, Diana Sidney
- Secretary, Helen Jordan
- Assistant Secretary, Keith Kennedy



The Committee welcomes advice and suggestions regarding the Association's activities. Please don't hesitate to contact any of the Committee Members as feedback and new ideas are important to ensure we are addressing the needs of our members.



WELFARE CALLS

Please advise Pam Beattie, our Welfare Officer, if you know someone who would welcome a call from Pam - 0435 716 392



JOKE OF THE MONTH

An American is hiking in Scotland ...
... and he pauses to drink from a stream.

A passing shepherd calls out

"Dinnae drink frae that, it's all fulla coo piss an shite!"

The American says to him

"I'm terribly sorry sir,

would you very much mind repeating that in proper English?"

And the shepherd says

"I'm terribly sorry sir, I was only asking if you would like to borrow this tin cup and get a proper drink?"