

OCTOBER 2011

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**New Exercise Class**

La Porte, TX

Beginning October 6th  
4:00-5:00 pm

See Schedule—page 5

This publication is not intended to provide diagnosis or treatment. Always seek the advice of your physician or pharmacist with questions regarding medical conditions or drug interactions.

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**TEVA** Neuroscience



## Immunizations for people with Parkinson's disease

by Terry Satterwhite, MD

Those with PD need as little hassle from infectious diseases as they can get and there is no better way to avoid certain bacterial and viral diseases than to be properly vaccinated. The Advisory Committee on Immunization Practice annually reviews the recommended immunization schedules and makes appropriate changes. Each individual should assume responsibility for his or her vaccine status and review it with their primary care physician on an annual basis. Below is a discussion of three recommended vaccines that are of particular importance for those with PD.

Pulmonary problems are not strangers to those with PD. Everyone over the age of 6 months should get an annual **influenza immunization**. It is estimated that approximately 36,000 people die each year in the US secondary to influenza. Most of these can be prevented by a yearly flu shot. Serious reactions to the flu shot are rare but you should tell your healthcare provider if you have egg allergy (new guidelines are in place for those with egg allergy) or if you have had prior reactions to any immunization. For a variety of reasons, flu shots are not 100% protective against the flu and antiviral drugs can be prescribed when needed. It should be noted that the flu shot does not protect against other viruses that cause cold and flu-like symptoms and flu shots do not cause the flu.

Streptococcus pneumonia is a bacterium that causes blood stream infections, meningitis and pneumonia. This organism causes many hospitalizations and deaths each year, especially in those over age 65. The safe **pneumococcal vaccine** protects against 23 strains of pneumococcus that cause 75% of the illnesses. A single shot is recommended for everyone over age 65. People under age 65 with certain chronic conditions, Parkinson's being one of them, should be vaccinated and receive a single booster dose after 5 years. Redness and pain at the injection site may occur, however, serious reactions are rare.

Shingles is a major problem and occurs with increased frequency as we age. Shingles (Herpes Zoster) is caused by the chicken pox virus that has remained dormant in the nervous system since the initial infection (usually in childhood). For unknown reasons the dormant virus becomes active and travels along a nerve pathway called a dermatome causing a painful rash. The rash resolves over a period of days, but pain can be quite severe and can last for months or even years. This is called post herpetic neuralgia (PHN). Fortunately, there is a **zoster vaccine** that reduces the incident of shingles by about 50% but more importantly reduces the PHN by 2/3. One dose of zoster vaccine is given to those age 60 or older even if you have had shingles because recurrent attacks can occur. Antiviral drugs and other medication may be prescribed for shingles, but they must be started early and the results are variable with little or no effect on PHN. It is much better to prevent this malady.

All medications, procedures and vaccines can have adverse reactions and these must be weighed against the risk of the disease. In all but the rarest of cases, one is much better served by the vaccine. See the HAPS website for additional resources.

*Dr. Satterwhite is a member of the HAPS Board of Advisors and Medical Advisory Board. He is Professor Emeritus at The University of Texas Medical School at Houston specializing in internal medicine and infectious disease.*



**What:** Randy Roger Band's 3rd Annual "For the Sake of the Shot" Charity Golf Tournament (three man scramble) and post tournament acoustic concert by Randy Rogers and Friends

**When:** Monday, November 14, 2011

**Where:** Gleannloch Pines Golf Club—19393 Champion Forest Drive, Spring, TX 77379



When the Randy Rogers Band's last project debuted as the most-downloaded country album on iTunes, plenty of the industry "insiders" on Music Row were left scratching their heads: Who are these guys?

The Texas-born-and-bred crew, who earned their road-warrior reputation in bars and dives across the American West, still spends more than 200 days on the road a year, breaking attendance records at venues on each tour. But they aren't just hitting red dirt dens anymore; they're opening for the likes of Willie Nelson, The Eagles and

George Strait and landing spots on *The Tonight Show with Jay Leno* and *Late Show With David Letterman*. Their two previous albums debuted at No. 1 on the iTunes Country Chart and in the Top 5 on the *Billboard* Top Country Albums Chart and they earned two ACM Vocal Group of the Year nominations

Houston Area Parkinson Society (HAPS) is an organization near and dear to the members of the Randy Rogers Band. Guitar player Geoffrey Hill's father, George, was diagnosed with Parkinson's in his 40's and found HAPS not long after. The Randy Rogers Band wants to give back to HAPS for all that is being done in the community for George and others living with Parkinson's disease.

Join us for a day of great golf, great fun and great music! There are sponsorship opportunities for teams as well as individual tournament tickets, spectator tickets and concert tickets available for purchase.

For more information go to [www.hapsonline.org](http://www.hapsonline.org) or call 713-626-7114.

## NEWLY DIAGNOSED EDUCATION PROGRAM

For those who have been diagnosed with Parkinson's disease within the last three years.

**Saturday, October 22nd**

**8:30 am —1 2:30 pm**

**Presented by Dr. Greg McLauchlin**

Registration required. Contact the HAPS office for more information at 713-626-7114 or [crist@hapsonline.org](mailto:crist@hapsonline.org)

## **Biomarker study for early diagnosis of Parkinson's disease**

### **A Natural History Analysis of Rapid Eye Movement Sleep Behavior Disorder as Prognostic for Parkinson's disease**

The study follows 4 groups over 5 years– enrolling people with an idiopathic Parkinson's disease diagnosis, atypical parkinsonian syndromes (PS) diagnoses, diagnosed REM Sleep Behavior Disorder (RBD) and healthy volunteers/controls, without any neurodegenerative symptoms or RBD, who match the gender and age of the of the RBD and PS participants.

The goal of the study is to determine whether a combination of certain behavioral and physical observations could be used to identify very early parkinsonian syndromes (PS), especially idiopathic Parkinson's disease (iPD). The hope is to find clues for earlier disease detection and causality. Drug companies are working hard to discover neuroprotective drugs that can slow the progression of PD. If this study data produces a way to identify a person as very likely to develop Parkinson's disease, these neuroprotective therapies will be applied in a clinical trial.

Study participants should expect a neurological and physical exam in a clinical research unit on the first visit evaluating for REM behavior sleep disorder (RBD), loss of ability to detect odors using the UPSIT scratch and sniff booklet, cognitive changes using a computer-based test, non-motor symptoms using questionnaires, and movement changes using the Unified Parkinson's Disease Rating Scale. General health and medications are evaluated, and a functional MRI is performed. Blood and cerebral spinal fluid via a lumbar puncture (if the participant agrees) are taken for biomarker testing and are kept frozen until needed. Subsequent visits include clinical neurologic and physical exams and blood work every six months for five years. Participants from out of town come in once a year. A repeat MRI and lumbar puncture would be requested if a diagnosis change occurs.

If you are interested in participating in this study, contact Research Coordinator Vicki Ephron, RN at 713-500-707 or [Vicki.j.ephron@uth.tmc.edu](mailto:Vicki.j.ephron@uth.tmc.edu).



## **Welcome Back!**

HAPS is excited to have Celeste Harris, LMSW back as a part-time member of the social service department! Celeste will continue to facilitate support groups, but will also be doing case management. She is in the office on Mondays and Wednesdays 9:00 am-2:00 pm and can be contacted by phone at 713-313-5305 or [harris@hapsonline.org](mailto:harris@hapsonline.org).

## **Balance study in Parkinson's disease patients**

The UTMB Department of Otolaryngology is looking for patients with mild to moderate Parkinson's disease interested in participating in a research study involving balance. This is a novel, low risk study that seeks to investigate improving balance problems in patients with Parkinson's disease using vibration therapy or vibrotactile stimulation (VTS) and to better understand the exact mechanism of these balance issues. If you or someone you know would like to participate or would like more information, contact Dr. Susan Edionwe at [soedionw@utmb.edu](mailto:soedionw@utmb.edu), Dr. Tomoko Makishima at [tomakish@utmb.edu](mailto:tomakish@utmb.edu) or Tina Brasher at 409-772-2702.

## HAPS PD EXERCISE AND SUPPORT GROUPS

ALL GROUPS ARE FREE OF CHARGE—PLEASE CALL TO CONFIRM GROUP TIMES AND LOCATIONS

### CENTRAL

<b>PD &amp; DEMENTIA/ LEWY BODY DEMENTIA CAREGIVER SUPPORT GROUP</b>	4th Monday of month 10:00 am—11:30 am	Support group for caregivers of persons with Parkinson's and dementia or Lewy Body Dementia	Kathleen Crist, LMSW 713-626-7114
<b>WATER EXERCISE</b>	Mondays 1:00—2:00 pm  Thursdays 11:00 am—12:00 noon	Metropolitan Multi-Service Center 1475 West Gray Houston, TX 77019	To request participant paperwork Alfonso Hernandez 713-520-8670
<b>EXERCISE</b>	Tuesdays 3:30—4:30 pm	TIRR 2455 S. Braeswood Houston, TX 77030	Alfonso Hernandez 713-520-8670
<b>SPEECH &amp; EXERCISE</b>	Wednesdays 2:30—4:00 pm	Memorial Dr. Presbyterian Church 11612 Memorial Drive—Room 101 Houston, TX 77024	Alfonso Hernandez 713-520-8670
<b>YOUNG ONSET SUPPORT GROUP</b>	2nd Wednesday of every other month 7:00—9:00 pm	For those younger than 55 with Parkinson's disease	Kathleen Crist, LMSW 713-626-7114
<b>TAI CHI</b>	Tuesdays 10:30—11:30 am	Metropolitan Multi-Service Center 1475 West Gray Houston, TX 77019	Alfonso Hernandez 713-520-8670
<b>TANGO</b>	Wednesdays 1:00—2:15 pm	Metropolitan Multi-Service Center 1475 West Gray Houston, TX 77019	Alfonso Hernandez 713-520-8670
<b>DANCE</b>	Mondays 12:15—1:30 pm	Houston Ballet Center for Dance 610 Preston Houston, TX 77002	Kathleen Crist, LMSW 713-626-7114
<b>SINGING</b>	2nd & 4th Mondays of month 1:30—2:30 pm	Houston Ballet Center for Dance 610 Preston Houston, TX 77002	Kathleen Crist, LMSW 713-626-7114
<b>EXERCISE</b>	Thursdays 9:45—10:45 am	Metropolitan Multi-Service Center 1475 West Gray Houston, TX 77019	Alfonso Hernandez 713-520-8670
<b>POST DBS SUPPORT GROUP</b>	4th Wednesday of every other month 6:00—7:30pm	For those who have completed Deep Brain Stimulation Surgery	Kathleen Crist, LMSW 713-626-7114
<b>PD SUPPORT GROUP</b>	3rd Tuesday of month 10:00—11:30 am	American Red Cross 2700 SW Freeway Houston, TX 77098	Kathleen Crist, LMSW 713-626-7114
<b>TAI CHI</b>	Fridays 11:00 am—12:00 noon	Memorial Dr. Presbyterian Church 11612 Memorial Drive—Room 102 Houston, TX 77024	Alfonso Hernandez 713-520-8670
<b>NEWLY DIAGNOSED SUPPORT GROUP</b>	3rd Monday of month 6:30—7:30 pm	For those who have been diagnosed with Parkinson's within the last three years	Kathleen Crist, LMSW 713-626-7114

### SOUTHWEST

<b>EXERCISE</b>	Mondays 10:00—11:00 am	First United Methodist Church 1220 FM 1092 Missouri City, TX 77459	Alfonso Hernandez 713-520-8670
<b>EXERCISE &amp; SPEECH</b>	Tuesdays 2:00—3:45 pm	St. Phillip's Methodist Church 5501 Beechnut—Room 104 Houston, TX 77096	Alfonso Hernandez 713-520-8670
<b>MUSIC</b>	Fridays 10:00—11:00 am	Space is limited. Please call to register.	Alfonso Hernandez 713-520-8670

### EAST

<b>WATER EXERCISE</b>	Tuesdays Thursdays 2:00—3:00 pm	Bay Area Rehabilitation Center 5313 Decker Drive Baytown, TX 77520	Alfonso Hernandez 713-520-8670
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SOUTHEAST			
<b>SPEECH &amp; EXERCISE</b>	Tuesdays 1:30—3:00 pm	Kindred Hospital Bay Area 4801 E Sam Houston Parkway South Pasadena, TX 77505	Alfonso Hernandez 713-520-8670
 <b>EXERCISE</b>	Thursdays 4:00—5:00 pm	Parsons House 8727 Fairmont Parkway La Porte, TX 77571	Alfonso Hernandez 713-520-8670
SOUTH			
<b>SPEECH &amp; EXERCISE</b>	Mondays 3:30—5:00 pm	Clear Lake Rehab Hospital 655 E. Medical Center Blvd. Webster, TX 77598	Alfonso Hernandez 713-520-8670
<b>WATER EXERCISE</b>	Thursdays 4:00—5:00 pm	Clear Lake Rehab Hospital 655 E. Medical Center Blvd. Webster, TX 77598	Alfonso Hernandez 713-520-8670
<b>CAREGIVER SUPPORT GROUP</b>	3rd Monday of month 4:00—5:00 pm	Clear Lake Rehab Hospital 655 E. Medical Center Blvd. Webster, TX 77598	Kathleen Crist, LMSW 713-626-7114
<b>EXERCISE</b>	Wednesdays 4:00—5:00 pm	St. Andrew's Episcopal Church 2535 E. Broadway, FM 518 Pearland, TX 77581	Alfonso Hernandez 713-520-8670
 <b>EXERCISE</b>	Thursdays 4:00—5:00 pm	Alvin Lutheran Church 1800 FM 1462 Alvin, TX 77512	Alfonso Hernandez 713-520-8670
WEST			
<b>SPEECH &amp; EXERCISE</b>	Tuesdays 5:20—6:50 pm	1st United Methodist Church of Katy 5601 5th Street Room 111 Katy, TX 77493	Alfonso Hernandez 713-520-8670
NORTHEAST			
<b>EXERCISE</b>	Wednesdays 12:00 noon—1:00 pm	HealthSouth Rehabilitation Hospital 19002 McKay Blvd. Humble, TX 77338	Alfonso Hernandez 713-520-8670
<b>PD SUPPORT GROUP</b>	Every other Wednesday 6:30—7:30 pm	First United Methodist Church Humble 800 East Main—Room 220 Humble, TX 77338	Kathleen Crist, LMSW 713-626-7114
NORTH			
<b>WATER EXERCISE</b>	Mondays 12:30—1:30 pm	Reliant Rehab Hospital N Houston 117 Vision Park Blvd. Shenandoah, TX 77384	Alfonso Hernandez 713-520-8670
<b>SPEECH</b>	Tuesdays 1:45—2:30 pm	Reliant Rehab Hospital N Houston 117 Vision Park Blvd. Shenandoah, TX 77384	Alfonso Hernandez 713-520-8670
<b>EXERCISE &amp; TAI CHI</b>	1st, 3rd, 5th Thursdays 1:30—2:30 pm 2nd, 4th Thursdays	Woodlands United Methodist Church 2200 Lake Woodlands Drive The Woodlands, TX 77380	Alfonso Hernandez 713-520-8670
<b>CAREGIVER SUPPORT GROUP</b>	1st Thursday of month 1:30—2:30 pm	Woodlands United Methodist Church 2200 Lake Woodlands Drive The Woodlands, TX 77380	Kathleen Crist, LMSW 713-626-7114
NORTHWEST			
<b>TAI CHI</b>	Fridays 11:00—12:00 noon	Tomball United Methodist Church 1603 Baker Drive (Faith Building) Tomball, TX 77375	Alfonso Hernandez 713-520-8670
<b>TAI CHI</b>	Wednesdays 10:00—11:00 am	John Wesley United Methodist Church 5830 Bermuda Dunes (Boy Scout Building) Houston, TX 77069	Alfonso Hernandez 713-520-8670
<b>SPEECH</b>	Thursdays 1:00—2:00 pm	TEAM Approach Speech Therapy Center 11240 FM 1960 W. Suite 209 Houston, TX 77065	Alfonso Hernandez 713-520-8670
<b>CROSSROADS GROUP</b>	2nd Wednesday of every other month 6:30—8:30 pm	For individuals with PD between age 55 and 70.	Kathleen Crist, LMSW 713-626-7114

## INDIVIDUALS WITH PARKINSON'S RESTING TREMOR LESS LIKELY TO EXPERIENCE TROUBLING LEVODOPA SIDE EFFECT

After long-term treatment with levodopa, some people with Parkinson's disease (PD) experience jerky, involuntary movements of the arms, legs, or head, a condition known as dyskinesia. While the causes of levodopa-induced dyskinesia (LID) are still unclear, a new study published in the August 2011 issue of *Archives of Neurology* has revealed that people who have a resting tremor when diagnosed with Parkinson's are less likely to experience this unpleasant side effect.

For many people with Parkinson's, the first obvious sign of their disease is a shaking of the hands when the muscles are relaxed and at rest — a so-called resting tremor. Previous research has shown that people with resting tremor often have a different course of Parkinson's than those who do not. Stefan Kipfer, M.D., of the University of Berne, in Switzerland, wondered if resting tremor could also predict a person's likelihood of developing LID. To answer this question, Dr. Kipfer and his colleagues analyzed data from 85 people with Parkinson's who were in the database of the Movement Disorders Center in Berne, Switzerland.

### Results

- ◆ Thirty-nine of the 85 people with Parkinson's had LID.
- ◆ People with Parkinson's with LID had a longer duration of Parkinson's, a younger age of onset, more axial motor symptoms such as abnormal posture and gait, and were less likely to have resting tremor as a first sign of disease.
- ◆ The absence of a resting tremor at diagnosis was a strong predictor of LID, independent of daily levodopa dose or duration of Parkinson's.

### What Does it Mean?

Parkinson is a very heterogeneous disease; one in which different people may have different presenting symptoms and different disease course. Resting tremor is perhaps the most recognizable sign of Parkinson's, yet, only about half of all people with Parkinson's exhibit this symptom at diagnosis. Studies have shown that people who experience resting tremor as an initial sign of Parkinson's have a slower disease progression and respond differently to therapies than those who do not.

Some people with PD develop LID months or years after treatment begins. Much time and energy is being devoted to finding clinical and biological tools that are able estimate disease progression in different individuals. This retrospective study is part of that effort and suggests that doctors might be able to predict a person's likelihood of developing LID on the basis of whether or not they have resting tremor as an initial manifestation of their disease. This knowledge could allow doctors to better prepare and monitor individuals with Parkinson's for the troubling side effect.

*Reference:* Kipfer, S., Stephan, M. A., Schüpbach, W. M. M., Ballinari, P., & Kaelin-Lang, A. (2011). Resting tremor in Parkinson disease: a negative predictor of levodopa-induced dyskinesia. *Archives of Neurology*, 68(8), 1037–1039. doi:10.1001/archneurol.2011.147

*This article was originally published in September 2011, by the Parkinson's Disease Foundation (PDF). It is reprinted, in its entirety, with permission from PDF. For other news, please visit [www.pdf.org](http://www.pdf.org).*



### NATIONAL PRESCRIPTION DRUG TAKE BACK DAY

The Drug Enforcement Administration (DEA) has scheduled another National Prescription Drug Take Back Day on Saturday, October 29, 2011, from 10:00 am-2:00 pm for those who want to turn in unused or expired medications for safe disposal. To find a collection site near you call 713-693-3970 or go online to [www.deadiversion.usdoj.gov](http://www.deadiversion.usdoj.gov) and click on the "got drugs" image.

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For the third consecutive year, Wartsila has supported HAPS as a Side Walk Squad Sponsor in the Chevron Houston Marathon. As a *Record Holder* sponsor, Wartsila is one of the top sponsors for the 2012 *Run for a Reason* program.

# Houston Area Parkinson society

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