



# ACCELERATING THE CURE

The newsletter for friends and supporters of  
The Michael J. Fox Foundation for Parkinson's Research

Summer 2007

## FOUNDATION COMMITS UP TO \$2 MILLION TO ADDRESS "CRITICAL CHALLENGES" IN PD

This spring The Michael J. Fox Foundation launched *Critical Challenges in PD*, its most directive funding initiative to date. The program addresses specific questions whose answers are critical to accelerating the development of improved treatments for Parkinson's disease. In its inaugural year, the program seeks strategic proposals to shed increased light on two genes — LRRK2 and alpha-synuclein — that play a major, but only partially understood, role in PD onset and pathology.

"LRRK2 and alpha-synuclein are only two of multiple therapeutic targets that researchers have identified as holding potential to yield improved treatments for PD, possibly by slowing or stopping disease progression," said Sarah Orsay, the Foundation's CEO. "Yet each is limited by distinct challenges that severely impede progress. *Critical Challenges* aims to move the entire field forward by encouraging scientists to tackle the difficult studies required to translate these genetic laboratory discoveries into new treatments."

Gene Johnson, PhD, the Foundation's chief scientific advisor, said: "The concept of the *Critical Challenges* program is a natural evolution of previous MJFF programs seeking a broad range of investigator-initiated projects in particular topic areas of interest. *Critical Challenges*, however, differs in that the Foundation is asking researchers to focus specifically on a key question hindering progress in a given field in order to help move research more effectively to the next stage."

MJFF has focused the inaugural *Challenges* RFA on genetic contributions to PD, as these may provide insight not only into underlying disease etiology and pathogenesis, but also potential therapeutic targets.

**LRRK2** Recent discoveries show that mutations in the LRRK2 gene may account for as much as six percent of all familial PD cases and may underlie one to two percent of cases previously thought to be sporadic in nature, suggesting that it is a very important target for PD research. The LRRK2 protein appears to have kinase activity. Kinases regulate the function of other proteins, and can be attractive targets for drug development. Intriguingly, certain PD-associated changes cause an increase in LRRK2 kinase activity, suggesting that this activity may play a central role in Parkinson's pathogenesis.

The first challenge is to conclusively demonstrate that altered LRRK2 kinase activity causes PD-related neurodegeneration in an intact animal brain. If confirmed, these findings would greatly accelerate efforts to identify compounds that can modify LRRK2 kinase activity.

**Alpha-synuclein** Alpha-synuclein is a major constituent of Lewy bodies, protein clumps that are the pathological hallmark of PD. Furthermore, genetic studies have shown that in rare cases, mutations in the alpha-synuclein gene, or having extra copies of the normal gene, can lead to PD. A critical debate in therapeutics development concerns whether PD progression could be prevented by blocking the protein's aggregation, simply lowering its levels in the brain or modulating the protein in some other way.

The alpha-synuclein challenge requires researchers to design experiments to definitively test in an intact animal brain a specific hypothesis-driven mechanism for how alpha-synuclein leads to neuronal dysfunction.

The Foundation has committed up to a total of \$2 million — \$1 million for each challenge — to fund projects under this RFA.

## NEWS FROM THE CEO



It's been a busy spring at the Foundation as we've continued working aggressively to drive translational research in Parkinson's.

One highlight was our presence at BIO, the annual global convention for biotech and pharmaceutical industry leaders. MJFF staff participated on panels and seminars, and met one-on-one with industry executives, to pursue opportunities for engaging industry in therapeutic solutions for PD. Michael J. Fox gave a stirring keynote address, citing the need for increased focus on translation and the ways in which MJFF and a handful of like-minded organizations are working to reduce industry's risk around investing in novel therapeutics. Based on interest at BIO and elsewhere, we have accelerated the relaunch of the *Therapeutics Development Initiative*, our industry-exclusive funding program. (Read more on page 2.)

We've announced several other initiatives as well, including *Critical Challenges in PD*. It is our most directive RFA to date, designed to encourage the highly specialized studies needed to translate basic discoveries into new treatments. You can find more information on our newly redesigned Web site, [www.michaeljfox.org](http://www.michaeljfox.org).

Thank you for your staunch support of our efforts. We are grateful for your continued dedication. Together, I am confident we are going to find the cure.

Sarah Orsay  
Chief Executive Officer

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## “NEWFOUND INTEREST” FROM COMPANIES AT BIO LEADS MJFF TO REOPEN THERAPEUTICS DEVELOPMENT INITIATIVE SOONER THAN PLANNED

The Michael J. Fox Foundation put forward an expanded presence at this year’s BIO (Biotechnology Industry Organization) International Convention, held from May 6–10 in Boston. Billed as “the global event for biotechnology,” BIO is the largest conference of the year for stakeholders in the drug development process. Over 20,000 attendees descended on Beantown for four days of seminars, panel discussions and exhibits on applying biotech advances to the improvement of human health.

Michael J. Fox delivered a keynote address to a standing-room-only crowd of 4,000. He emphasized the role of MJFF and a handful of like-minded organizations working to “de-risk” pre-clinical ideas and overcome the delays that too often mire progress along the translational pipeline.

“The tough truth,” said Mr. Fox, “is that the therapeutics development system breaks down in the exact spot where we need it to work the hardest: the place where it should be strategically driving the higher-risk, higher-reward work of converting basic discoveries into new therapies.” (To read the talk in its entirety, visit [www.michaeljfox.org](http://www.michaeljfox.org).)

President and Co-Founder Debi Brooks participated in the “Medical Foundation and NIH Translational Research Forum.” Sponsored by the Kauffman Foundation, the forum explored how pharmaceutical and biotechnology companies and academic centers can maximize opportunities for

foundation funding and NIH-driven translational research. Ms. Brooks’s panel, “Philanthropic-driven Drug Discovery,” delved into business models and strategic directions, novel funding mechanisms, and partnering opportunities and challenges.

As part of BIO’s Business Development Forum, CEO Sarah Orsay and Associate Director of Research Programs Sohini Chowdhury offered a formal presentation to company representatives on MJFF industry funding opportunities. The forum, which historically has been open only to company representatives highlighting business-to-business partnering opportunities, was opened to a select group of nonprofits on a pilot basis this year as an opportunity to publicize foundation funding available to industry.

MJFF also held 17 one-on-one partnering meetings with company representatives in attendance to discuss potential alliances. These meetings furnished the opportunity to learn about various companies’ efforts in Parkinson’s disease therapeutics and to provide tailored information about MJFF’s funding programs to forward this work. Additionally, about 15 industry CEOs attended a “meet and greet” organized by the Foundation following Michael J. Fox’s keynote.

“BIO offered an important chance to forge new connections with companies who may not have been familiar with the funding opportunities we offer to industry, as well as to strengthen existing

relationships,” said Ms. Chowdhury. “There was newfound interest in the Foundation and in our work to expand industry investment in PD.”

To capitalize on this interest, the Foundation will accelerate the relaunch of its industry-exclusive funding program, the *Therapeutics Development Initiative (TDI)*. The program will be reopened this month rather than in 2008 as originally planned.

“Being nimble and responsive is something the scientific community has come to expect of us and appreciates about working with us,” said Ms. Orsay. “Our sense of urgency is served well by our flexibility, which enables us to act quickly to provide expanded opportunities and resources to burgeoning Parkinson’s research programs. We’re confident that by reopening *TDI* now, we can increase the potential of the program to support a high number of quality applications.”

While the Foundation welcomes proposals from industry applicants under all its funding programs, *TDI* is its only program open exclusively to researchers at biotech and pharma companies. The program is open both to companies currently working in PD, as well as to those new to PD research who wish to explore a potential Parkinson’s application of a compound or technology developed for another indication. Under *TDI*’s inaugural funding round in 2006, MJFF awarded \$4.6 million in funding to 10 industry teams last December.

## FOUNDATION TO LAUNCH COGNITION & DEPRESSION RFA

Later this month, the Foundation will launch *Cognition and Depression in Parkinson’s Disease*, a \$2-million funding initiative open exclusively to research projects addressing cognitive dysfunction and depression in Parkinson’s disease. These symptoms, which extend beyond the dopaminergic system and do not respond to dopamine replacement, are among the disease’s most debilitating. Yet there are few therapies to alleviate them.

Additionally, depression associated with Parkinson’s disease reflects an underlying change in the circuitry of the brain distinct from the depression seen outside of PD. For this reason, existing marketed medications

addressing cognitive deficits and depression have limited beneficial effect for PD patients.

“Cognitive issues and depression in Parkinson’s remain poorly understood, which limits researchers’ ability to develop new therapies addressing them,” said Mark Frasier, PhD, MJFF’s associate director of research programs. “As a result, patients suffering from these aspects of PD find few available treatment options.”

To improve understanding of PD-associated cognitive dysfunction and behavioral abnormalities, and to develop improved treatments for these symptoms, *Cognition and Depression* will encourage researchers to develop innova-

tive approaches to these symptoms as well as leverage and apply existing information from areas of cognition and mood diseases to the Parkinson’s arena.

“There is opportunity to apply research conducted in the cognition and depression fields to PD, as well as encourage innovative research in these areas,” said Dr. Frasier. “Our aim is to drive research focused on understanding these troubling symptoms and to accelerate delivery of improved interventions to address them.”

To read more on PD-related depression, see our Q&A with Irene Richard, MD, a member of the Foundation’s Scientific Advisory Board, on page 3.



## IRENE RICHARD, MD, TALKS TO MJFF ABOUT DEPRESSION IN PARKINSON'S DISEASE

It is estimated that as many as half of all people with Parkinson's disease suffer from depression. It is a clinical feature of PD that is under-diagnosed, does not respond to dopamine replacement therapy, and that if left untreated can result in significant distress and disability. The good news is that, like PD's other symptoms, depression can be treated.

To gain a better understanding of depression in PD, as well as current thinking on the best ways to diagnose and treat it, the Foundation talked to Irene Richard, MD, a member of the MJFF Scientific Advisory Board. Dr. Richard runs a research program and clinical practice at the University of Rochester focusing on the psychiatric aspects of Parkinson's. She also is currently leading SAD-PD, a multi-center clinical trial evaluating the treatment of depression in PD. Her efforts have brought new clinical and research attention to the previously overlooked area of mood disturbances in PD.

### Isn't it normal to feel depressed after being diagnosed with a degenerative disease?



Irene Richard, MD

This is a crucial point. The clinical depression we see in Parkinson's disease is not simply an emotional reaction to the diagnosis of Parkinson's or the limitations it may cause — it's a clinical feature of PD itself. Changes in the brain's structure and function underlie the symptoms of depression. And it's extremely important to distinguish the concept of depression from that of sadness or other "normal" emotions such as disappointment or frustration. Depression is a medical illness with an entire constellation of symptoms.

### What are the symptoms?

To make a diagnosis of depression, a clinician must observe at least one of two cardinal symptoms. The first is called "disordered mood." This is not necessarily a feeling of sadness, but it is inevitably characterized by negative feelings. Some people describe it as emotional pain or emptiness, while others lose their feeling of connection to other people.

The second cardinal symptom is called "anhedo-

nia," which means the inability to experience pleasure. You stop deriving enjoyment from activities you once looked forward to, such as reading a book or seeing a movie.

Beyond these, we see an entire range of other clinical features. Not all are related to emotional functioning. They may also involve thinking — such as an inability to concentrate — or they may be what we call "somatic" or "vegetative," which can include changes in sleeping or eating habits (sleeping or eating too much or, conversely, not enough) or a diminished sexual drive. Additionally, there may be "ideational" symptoms, which have to do with both thoughts and feelings. The depression can have such a strong effect on your perspective that you have thoughts and feelings of worthlessness or suicide, and/or an inability to feel hope for your own future.

### Why do you think the idea persists that depression can be cured by a positive attitude?

This is another crucial point: You cannot "buck up" from clinical depression. It robs you of the ability to comfort yourself. When you are suffering from depression, numerous brain functions are affected. It is not something that you can simply "get over" or talk yourself out of.

Unfortunately, a stigma still exists that depression is somehow the fault of the victim — a sign of weakness, failure or pessimism. It's self-perpetuating: as long as this attitude exists, people understandably don't want to talk about their depression, the actual experience of depression remains hidden, and the stigma grows.

One of the best ways to counter the stigma is to talk openly about depression with your doctor, your family and friends. There is nothing to be ashamed of and there is no blame to be assigned. Yet people do tend to blame themselves. I tell my own patients: You wouldn't blame yourself for your tremor; you shouldn't blame yourself for depression.

### Are there any special difficulties associated with diagnosing depression in PD?

Yes, the primary one being that several of the symptoms we associate with depression are already associated with Parkinson's. When people are depressed, they tend to move more slowly than they used to, have problems sleeping, and feel tired — these are all features of Parkinson's disease. So it can unfortunately be all too possible to overlook obvious signs of depression in a person with PD.

### How can patients and doctors overcome this problem?

Doctors should ask patients if they are experiencing any of the cardinal features of clinical depression. But doctors aren't perfect, and they don't always do this. If you're worried you may be suffering from depression, and your doctor doesn't ask you about it, it's critical that you bring it up yourself.

Like so many other aspects of Parkinson's disease, this is one where the doctor-patient relationship is absolutely key. If you don't feel comfortable talking about any part of your experience of PD, it may be a sign that you should consider seeking out another physician.

### What treatments are commonly used to treat depression in Parkinson's?

If someone with PD is diagnosed with depression, an anti-depressant will usually be prescribed. But the truth is that we don't have any solid evidence that treatments for classic depression will work for PD-related depression.

### Why wouldn't they work?

Well, if you think about it, it's a stretch to think that treatments for depression would work the same in people with and without Parkinson's. After all, there are significant differences between a healthy brain and one that is undergoing the changes associated with PD.

And there's a great deal of other information we just don't have. We don't know whether people with PD are more vulnerable to side effects of antidepressants. We don't know what interactions are likely with their PD medications. And we don't know if antidepressants have any effect on other aspects of Parkinson's, like motor function.

### How close are we to having answers for these questions?

That's where clinical trials come in. I'm currently leading a multi-site study on the effects of two antidepressants, Paxil and Effexor-XR, on PD-related depression. The trial is called SAD-PD, which stands for Study of Antidepressants in Parkinson's Disease. We're conducting research in 18 sites throughout the United States, and we're still enrolling patients. Anyone who's interested in learning more should visit our Web site for details: <http://www.urmc.rochester.edu/sadpd/index.cfm>.

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## MJFF AWARDS \$710,000 TO ADVANCE UNDERSTANDING OF PARKINSON'S DISEASE SUBTYPES

In May The Michael J. Fox Foundation for Parkinson's Research announced \$710,000 in total funding to seven research teams for projects leveraging existing data and patient populations to initially characterize Parkinson's disease subtypes — distinct forms of the disease that may differ in onset, progression and response to treatment.

"One of the most frustrating aspects of Parkinson's disease — for patients, researchers and clinicians alike — is the significant variability in how it manifests itself from patient to patient," said Sarah Orsay, chief executive officer of the Foundation. "The retrospective studies funded under *PD Subtypes* aim to analyze data already gathered on different forms of the disease. This analysis could yield valuable information with potential to improve clinicians' ability to treat patients with existing therapies. It could also advance development of new treatments and enable better design of future clinical trials."

Applicants under *PD Subtypes* were required to propose research that would make use of existing data from well-characterized populations of Parkinson's patients. Several researchers will mine specific databases established by their own institutions for various purposes. Others will work from some of the most important clinical research populations in the Parkinson's field, including the DATATOP (Deprenyl and Tocopherol Antioxidative Therapy of Parkinsonism) study population of 800 early-stage Parkinson's patients and the PRECEPT (Parkinson Research Examination of CEP-1347 Trial) population of 800 patients.

Funded studies will examine aspects of PD including whether it is possible to identify PD subgroups based on areas of disability (cognitive, balance, motor function) seen at the last available clinical visit; and factors (such as mood analysis, sleep, cognitive function and pain) that may contribute to the identification of novel PD subtypes.

A full list of awardees, including grant abstracts and researcher bios, is available at the Foundation's Web site, [www.michaeljfox.org](http://www.michaeljfox.org).

## FOUNDATION AWARDS \$1 MILLION FOR CRITICAL NEXT STEPS ON PROJECTS INITIATED UNDER *COMMUNITY FAST TRACK 2005*

The Michael J. Fox Foundation for Parkinson's Research recently announced \$1 million in supplemental funding to five investigators to push forward promising results of work funded under the Foundation's *Community Fast Track 2005* program.

"*Community Fast Track* allows the Foundation to quickly and effectively vet 'out-of-the-box' strategies for improving the treatment or diagnosis of Parkinson's disease," said Sarah Orsay, the Foundation's CEO. "The program was designed to serve some of MJFF's most deeply held values: the exploration of promising but untested approaches to Parkinson's disease, our emphasis on accountability, and our commitment to keeping promising science moving forward quickly."

*Community Fast Track* was structured to fund one-year projects exploring novel approaches to PD research, with supplemental funding available if researchers met specific predetermined milestones and outlined a practical plan to address the next steps. To receive continued funding, researchers who met their milestones were also required to demonstrate an emphasis on translating their initial findings into potentially meaningful approaches for improving available Parkinson's treatments.

Two separate research teams at Lund University in Sweden are continuing investigations into novel aspects of the development of dyskinesias (the disruptive movements that are one of the most disabling complications of long-term dopamine replacement therapies):

- A team led by Anders Björklund, MD, PhD, previously found that serotonin neurons play a role in dyskinesia. Dr. Björklund now seeks to show that these neurons may underlie a special kind of dyskinesia, also seen in some patients who received transplants of fetal brain tissue in trials conducted some years ago; occurrence of these so-called graft-induced dyskinesias were a major factor that halted the trials.
- Another team, led by Angela Cenci-Nilsson, MD, PhD, is following up on initial observations that levodopa-induced dyskinesia results in part from alterations in brain blood vessel growth and integrity. She is receiving a grant supplement to directly test her hypothesis by using drugs that alter

blood vessel growth and investigating how this impacts development of dyskinesias.

Two projects seek to obtain data that can help translate understanding of Parkinson's disease-associated proteins alpha-synuclein and LRRK2 into novel neuroprotective strategies. Both of these molecules' roles in the onset and progression of Parkinson's disease are the subject of intense study, but neither's is fully understood:

- Gregory Petsko, PhD, of Brandeis University, working in yeast, previously found several enzymes that chop up alpha-synuclein into smaller toxic fragments; his next steps are to seek to identify the human versions of these enzymes.
- Chenjian Li, PhD, of Weill Medical College of Cornell University has generated a mouse model of LRRK2. He will use his supplemental funding to examine specific cellular pathways that might be affected by the protein, with implications for the onset and/or progression of PD.

A team led by Stephen Traynelis, PhD, of Emory University developed a screening test for identifying compounds that act at the NR2D subtype of the NMDA receptor, which has shown promise as a target for the development of a new symptomatic therapy for Parkinson's disease. With his screen now up and running, Dr. Traynelis will look for potential compounds worth developing further into possible drugs.

Close To A Cure, a Charlotte-based fund within the Foundation for the Carolinas, donated \$125,000 to the Foundation to support Dr. Traynelis's research. Close To A Cure is committed to finding a cure for Parkinson's disease by funding specific research initiatives at Duke, Emory, and other leading medical centers. For information about Close To A Cure, please visit [www.close-to-a-cure.org](http://www.close-to-a-cure.org).

Grant abstracts and researcher bios are available on the Foundation's Web site, [www.michaeljfox.org](http://www.michaeljfox.org).

## A PARADIGM SHIFT FOR MEDICAL RESEARCH

BY MICHAEL J. FOX

The United States was founded on the radical notion that by independently pursuing our dreams we can build a future that's better for everyone. That's why it's always been home to great thinkers and doers, risk-takers and entrepreneurs — people who insist on questioning the status quo and finding a better path forward. That insistence, individual and collective, has made this country a world leader in many fields, including science and technology.

Yet when it comes to the vast enterprise of biomedical research, there's room to question how well the system we've created serves our needs. Do we put enough emphasis on producing new therapies and cures for disease? Are we making progress fast enough in the eyes of the millions touched by illness or injury?

Over \$100 billion is spent on biomedical research each year. Roughly a third of that money goes toward expanding our understanding of the basic mechanisms of life. That seems reasonable: Basic research is vital to advancement over the long haul. The other two-thirds goes to the business end of things, where venture capitalists and the pharmaceutical industry are mostly concerned with making a profit for their shareholders.

To patients observing from the sidelines, it can feel — on our cynical days — as if the lion's share of today's commercial investment focuses

on tweaking innovations from a decade ago.

So we burn through this pile of cash, yet we're left with a major problem: Who's investing in innovation right now? Only a minuscule fraction of our current efforts are strategically allocated to converting basic discoveries into truly new therapies. This is a higher-risk and higher-reward investment arena — for my money, a classic challenge for American ingenuity. Bold action today will pay off for years to come in the form of improved, practical treatments with a chance to benefit people living with disease *now*.

I'm certain we can achieve tangible results faster. In fact, that's the premise on which I set up my Foundation, where we come to work every day to accelerate the best ideas on their path from the labs to the patients. Our goal is to improve the daily lives of people with Parkinson's disease *today* and find a cure within the decade. But this is a complex problem that requires a better strategy than throwing billions more dollars at biomedical research and hoping for the best.

It's time for a broad-based paradigm shift, one that reflects what America is all about: rapid innovation toward practical results that we can feel in our everyday lives. The good news: This actually isn't a question of throwing more money at the problem. (Not hitting up the taxpayers for more money — how's that for a radical notion?)

It is a question of deploying our financial, scientific and intellectual capital differently, creatively and urgently and designing new solutions to complex challenges. Where we go from here is up to all of us.

Through our experience at the Foundation, we know firsthand that America is home not only to many of the most talented and innovative people in the world, but also to some of its most generous. We must figure out how to hold onto the best of what we have — infrastructure and resources that attract the best and brightest scientists; the benefits that accrue from basic research — while pushing ourselves to go still further. Let's think big about new ways to stimulate innovation and seed the drug development pipeline with the next generation of therapies assuring investors of transformative results — high returns on financial capital, yes, but also on human health.

It may be a tall order, but I'm optimistic. When we work together and use our talents and resources for the collective good, everything is possible. To me, that's the core of the American Dream.

*This commentary originally appeared on Forbes.com on May 7, 2007, to coincide with Michael J. Fox's keynote address at BIO. It is reprinted here with permission.*

### SAB MEMBER TIM GREENAMYRE RECEIVES 2006–2007 LANGSTON AWARD



Tim Greenamyre

At the February 2007 meeting of its full Scientific Advisory Board (SAB), The Michael J. Fox Foundation presented the 2006-2007 Langston Award to J. Timothy Greenamyre, MD, PhD.

Dr. Greenamyre is director of the Pittsburgh Institute for Neurodegenerative Diseases and chief of the Division of Movement Disorders at the University of Pittsburgh.

The Langston Award is an annual \$25,000 unrestricted research grant recognizing a member of the SAB whose commitment to the

Foundation goes above and beyond the expected. It is named for founding SAB member Bill Langston, MD.

"It was an honor to receive this year's Langston Award," said Dr. Greenamyre. "I believe strongly in MJFF's mission to cure Parkinson's disease in this lifetime, and it's a pleasure working with the Foundation and its advisors toward making this goal a reality."

Dr. Greenamyre was a founding member of the Foundation's SAB and has made important contributions across the board including chairing the *Therapeutics Development Initiative* in 2006 and the *LEAPS* program in 2003, 2005 and 2007.

"Whenever called upon, Tim has made himself available to the Foundation," said Todd Sherer, PhD, the Foundation's vice president of research programs. "He gives generously and enthusiastically of his time and expertise. We are pleased to give him the Langston Award in recognition of his extraordinary dedication."

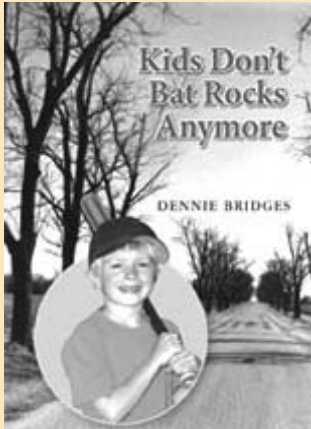
The Langston Award was created by MJFF in 2005 in recognition of the exemplary leadership of Bill Langston, CEO and chief scientific officer of The Parkinson's Institute. Dr. Langston served as the Foundation's first chief scientific advisor and was founding chairman of its Scientific Advisory Board. He set the course for the Foundation's scientific efforts, helping to establish what is today recognized as a model for funding high-impact research.



# TEAM FOX

FOR PARKINSON'S RESEARCH

## AUTHOR! AUTHOR!



Dennie's book is available for sale on his Team Fox page.

Dennie Bridges of Bloomington, Illinois, spent his career coaching professional basketball. He is retired now, but he hasn't slowed down. Dennie is both an athletic director at his alma mater, Illinois Wesleyan University, and the author of two memoirs — one recounting his basketball coaching days and a second, *Kids Don't Bat Rocks Anymore*, that offers a light and humorous look at childhood in rural Illinois in the 1940s and 1950s.

When Dennie began selling *Kids Don't Bat*

*Rocks Anymore* in September 2006, he spent some time researching organizations to which he could donate the proceeds of his book. Watching an interview with Michael J. Fox on television, he was inspired by Michael's optimistic attitude and commitment to finding a cure for PD. He immediately decided to join Team Fox and donate all the proceeds of his book to MJFF.

"People always ask me if a friend or family member has PD," Dennie said. "The answer is no. But I was inspired by someone who does. I am happy to be a part of the fight."

To date, Dennie has sold over 1,000 copies of *Kids Don't Bat Rocks Anymore*, raising \$6,000 for Team Fox. Visit Dennie's Team Fox page at [www.teamfox.org](http://www.teamfox.org) for details on ordering a copy for yourself or as a gift.

## RACHAEL RAY COOKS UP SOME EXCITEMENT WITH TEAM FOX

**O**n April 27, a segment of the nationally syndicated "Rachael Ray Show" was dedicated to Team Fox. Everybody's favorite down-to-earth diva invited Team Fox member Mary McNaught to talk about Pancakes for Parkinson's, the unique fundraiser she started while a student at the University of Virginia. This seemingly simple event — a pancake breakfast on the UVA campus — has raised an incredible \$60,000 for PD research in the three years since Mary launched it.

Pancakes for Parkinson's brings together everyone in the community — teachers, students, alumni, parents and kids. It has become a campus tradition each fall at UVA and has been so successful that students from other colleges are now following Mary's lead and starting Pancakes events on their own campuses.

There wasn't a dry eye in the house when a very surprised Mary — who thought she was being featured on Rachael's "How Cool Is She?" seg-



Rachael Ray, Michael J. Fox and Mary McNaught on the set of The Rachael Ray Show.

David Russell: Courtesy of Rachael Ray

ment — found Michael J. Fox awaiting her at Rachael's kitchen table! Michael gave Mary a bear hug to thank her for her commitment, enthusiasm and creativity and then spent some quality time catching up with Rach.

It was a great day, and the Foundation thanks Rachael Ray for helping us spread the word about Team Fox.

## MICHAEL J. FOX HONORS TEAM FOX MOST VALUABLE PEOPLE



Team Fox member Josie Poehlman and her son Brian with Michael J. Fox.

**T**he inaugural Team Fox MVP ("Most Valuable People") Awards were held Friday, April 27, in New York City. Coming near the end of Parkinson's Awareness Month, the event honored Team Fox members, students and athletes for their outstanding fundraising efforts in 2006, raising over \$1 million for Parkinson's research in the program's inaugural year. Michael J. Fox and MJFF staff were in attendance to offer deepest thanks to these dedicated team members whose efforts allow the Foundation's vital work toward a PD cure to continue and grow.

Guests were treated to dinner and cocktails generously provided by Tiffany & Co. at their flagship Fifth Avenue store. A special cocktail reception was also held for supporters who raised over \$25,000.

During the evening, Gary and Jill Leith were honored for their outstanding achievements as the top Team Fox fundraisers in 2006, contributing an incredible \$95,000 to The Michael J. Fox Foundation through the efforts of their own Gary D. Leith Foundation. Guests also enjoyed a viewing of "The Rachael Ray Show" segment that had aired earlier that day spotlighting Team Fox members and their outstanding work. (Read more about Rachael Ray's tribute to Team Fox at left!)

The Foundation is sincerely grateful to Tiffany & Co. Chairman Michael J. Kowalski and his staff, whose invaluable contributions allowed us to thank our incredible Team Fox members in proper style.

## TALENTED SISTERS RAISE FUNDS FOR PD RESEARCH

Sisters Ruth Grant and Margot Grant Evans have enlisted their respective passions for baking and writing to raise funds for PD research in memory of their father, who had Parkinson's for 10 years. Motivated by MJFF's commitment to funding high-impact research toward a cure, both sisters made the decision to direct the proceeds of their efforts to the Foundation.

Inspired by her grandmother's strudel, Ruth started her own pastry company, Simply Strudel & Co., and baked and sold pastry handmade from family recipes. Ruth used tastings

as an opportunity to spread the word about MJFF and the urgency of finding a cure for PD. Over the course of three years, Ruth's delectable treats raised nearly \$4,000 for Parkinson's research.

Margot wrote a children's book, *My Grandfather Has Parkinson's*, in an effort to help other families tell children the news of a loved one's diagnosis. The heartwarming book was published in April; in just two months its sales have generated over \$500 for PD research. To purchase a copy, visit [www.amazon.com](http://www.amazon.com) or Margot's Team Fox page at [www.teamfox.org](http://www.teamfox.org).

## MJFF LAUNCHES REDESIGNED WEB SITE

Last month the Foundation unveiled its new Web site, which has been redesigned to better serve patients, caregivers, researchers and supporters. New features and tools include a searchable database of all MJFF-funded grants, position papers outlining the Foundation's viewpoint on critical areas of PD science and, coming soon, "Five Minutes with Michael" — hear directly from Michael J. Fox about PD, MJFF's funding philosophy, the current status of progress toward a cure, and how you can help. Visit

[www.michaeljfox.org](http://www.michaeljfox.org) to check out these features and many others for yourself!



## PUW KEEPS THE "UNITY" IN COMMUNITY



Michael J. Fox addresses the crowd at the 13th annual Parkinson's Unity Walk in New York City

On April 28, an estimated 11,000 people gathered in New York City's Central Park for the thirteenth Parkinson's Unity Walk. This annual gathering of Parkinson's patients, caregivers, families,

friends and advocates is an opportunity every spring for the PD community to come together, learn and share experiences, and show the wider public the "face" of Parkinson's.

After thousands walked through "Find The Cure Boulevard" collecting educational materials from various organizations, the audience gathered to hear talks by participants including Michael J. Fox. The crowd was buoyed by the optimistic remarks as speakers looked to the future and thanked the community for its ongoing commitment and dedication to the cause of Parkinson's research.

To date, this year's event has generated a whopping \$1.6 million to benefit The Michael J. Fox Foundation, the American Parkinson Disease Association, The National Parkinson Foundation, The Parkinson Alliance, Parkinson's Disease Foundation, The Parkinson's Institute and Parkinson's Action Network.

## GOOD, HOT FUN IN THE SUMMERTIME!

Organizing a fundraising event is a great way to have fun and support the Foundation while raising awareness and funds for Parkinson's research. Consider these ideas for some good, hot fun in the summertime:

**"At the Car Wash"** Offer to wash your friends' and family members' cars and donate the fee to MJFF. Host a larger car wash in your company lot or see if a local organization will let you use their property.

**Dog Wash** Pretty up the pups for Parkinson's research.

**"Take Me Out to the Ball Game"** Coordinate with a local sports team to purchase a large group of seats at a discounted or donated rate, then sell the tickets and charge more. Contact the stadium to have your name and the Foundation in lights!

**Travel Agencies** Contact your travel agent and ask them to donate a travel voucher. Auction the vacation prize.

**Chili Cook Off** Contestants enter to win a prize. Supply your own judges and have guests pay for the tasting.

**Movie Night** Movie nights with friends are a fun and easy way to raise money. So pop the popcorn and bust open the Junior Mints! Find access to a screening room or local drive-in and you can invite even more guests. "Back to the Future," anyone?

For more creative fundraising ideas or to learn more about Team Fox, the Foundation's grassroots community fundraising program, please visit [www.teamfox.org](http://www.teamfox.org).

## FIND WHAT YOU'RE LOOKING FOR AND SUPPORT MJFF

Did you know that MJFF can earn a penny every time you search the Internet? GoodSearch.com is a search engine that donates half its revenue to the charities its users designate. It's powered by Yahoo!, so you get great results. Visit [www.goodsearch.com](http://www.goodsearch.com), download the toolbar and be sure to enter The Michael J. Fox Foundation as the charity you want to support. With the click of a button, you can help fund promising Parkinson's research and accelerate the development of new treatments.





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## Summer 2007 Newsletter

### RECOGNIZING AND TREATING DEPRESSION IN PD, Continued from Page 3

#### Are there any other treatment options?

Counseling, or therapy, is effective for some people. You can actually change the way the brain works through cognitive behavioral therapy — a form of psychotherapy based on modifying thoughts and behaviors, with the aim of positively influencing emotions.

Another course of action that may be beneficial is to seek out and participate in clinical trials. We often see improvement even in control groups in these trials — that is, in the group of participants

who are not receiving any active therapy. This so-called “placebo effect” is particularly high in depression, probably because of the overall effects of simply taking action on your own behalf, coupled with some of the general effects of participation, such as having an interested party to talk to regularly about what you’re experiencing.

People can also try exercise. While it hasn’t been tested for its ability to help depression specifically, more and more evidence is accumulating that exercise may have a general effect of improving overall physical and mental health — it’s kind

of a catch-all prescription at this point. There’s also some preliminary evidence that it may protect nerve cells, so it makes sense for people with PD to remain as physically active as possible, whether or not they suffer from depression.

*Dr. Richard is Associate Professor of Neurology and Psychiatry at the University of Rochester School of Medicine and Dentistry, Rochester, New York. You can read more about her and her research at [www.michaeljfox.org](http://www.michaeljfox.org).*

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