

**SUPERIOR COURT OF WASHINGTON
COUNTY OF KITSAP**

In the Matter of:

LARRY DALE CHRISTENSEN

Vulnerable Adult/Plaintiff,

and

JENNIFER ROACH

Respondent.

NO. 12 2 02397 4

DECLARATION OF

Patricia McLain

Patricia McLain declares as follows:

My name is Patricia McLain. I have been a friend of Larry Christensen and his late wife, Pearl, for 35 years. We shared a love of roller skating artistic dancing and ballroom dancing. Larry was also, a talented boat builder and snow skier. Many of our mutual friends enjoyed a wonderful Christmas party at the Christensen's lovely home every year for several years. They were often at my home- we had many conversations of our hopes and dreams.

I write this to tell you about Larry- the man- the human being.

Declaration of Patricia McLain - 1

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Now, as time wore on, his precious wife passed away and Larry developed Parkinson's disease. But, Larry continued to skate and kept up an active life.

After awhile many of us worried about Larry living alone- and driving. I told him it might be wise to look into assistant living, so that someone would be there 24/7.

Now- please pay attention here. This is Larry's response: "Patty, I am alright. I will not be moving. This is my home, the home I built. This is where my life is. And where I want to be." (as Larry showed up at the dances and other places we continued to observe him.)

Then---Larry meets Jennifer. We could tell that Larry enjoyed Jennifer. Jennifer moved into Larry's home to help. (I do not know if there was any agreement or just a friendship.) But, being with Jennifer certainly perked up Larry. Knowing Larry, I know he was eating much better. His shaking seemed to subside. He was dancing much better. (His musical timing was -and is- always wonderful.) But most noticeable was how his spirits rose.

Jennifer helped him in all ways. She drove him to the dances, skating events, and even to the mountains to ski! (Larry and Jennifer both said they had a good time.) They went on a road trip. Jennifer had him enjoying life to the best of his abilities. As far as I'm concerned, Jennifer is helping Larry live- not die away. Larry was happy.

Declaration of Patricia McLain - 2

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Thank you Jennifer,

Patty McLain

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Mercer Island, ^{Wa.} [City and State] on 11-20-12 [Date].

Patricia McLain

Patricia McLain

Type name here

Declaration of Patricia McLain - 3

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DECLARATION OF
___ Elsie_Miller ___

___ Elsie_Miller ___ declares as follows:

I've known Larry for over 15 years. Larry loves to dance and was a great dancer. He continued taking dance lessons even as his balance deteriorated, a condition that was later diagnosed as Parkinson's disease.

It was sad watching Larry slowly going down hill. He was loosing his ability to drive and as his balance worsened, I worried that he might fall when he danced.

Then Jennifer and Larry met. Jennifer brought him to dances, neatly dressed and ready to visit with old friends and to dance a few steps. His balanced and walking have improved so much. Larry said that that was because Jennifer insisted on lots of exercise. My last

Declaration of ___ Elsie_Miller ___ - 1

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dance with Larry was at the Senior Center was on Sept. 12th. We danced the whole dance. His muscles froze for just a short time as we walked back to his seat.

It's wonderful that Jennifer came into Larry's life. He was able to stay in his own home, a home he built himself and proudly described to me. I hope he will be able to come home.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Seattle, WA [City and State] on Nov. 11, 2012 [Date].



Elsie Miller

Type name here

Declaration of Elsie Miller - 2

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DECLARATION OF ___Lois
Morgensen__

___Lois Morgensen___ declares as follows:

TO WHOM IT MAY CONCERN:

I would like very much to put some input into this problem. I would like to commend Jennifer Roach for her patience with Larry Christensen. Larry was really hardly able to get around. He very faithfully came to our dances on Sunday nights at the Ballard Elks. There was a period where he couldn't dance (which he loved so much) but he kept coming anyway to be with friends and hear the music. Jennifer Roach became a caregiver to Larry, she was really concerned about him. After Jennifer had been with Larry for awhile, we all saw a big change in. He was able to dance again and he walked better. Jennifer explained the routine he was doing and it showed. So please take into

Declaration of ___Lois Morgensen___ - 1

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consideration that Jennifer Roach was the best thing that ever happened to

Larry. Sincerely Lois Morgensen - Lodge Secretary at the Ballard elks #827

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Seattle, WA [City and State] on 11/19/12 [Date].



Lois Morgensen

Type name here

Declaration of Lois Morgensen - 2

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DECLARATION OF
___ Norine ___ Neelands ___

___ Norine Neelands ___ declares as follows:

To Whom It May Concern,

I've only meet these two people (Jennifer Roach and Larry Christensen) through working at Top Foods in Woodinville, where I'm a checker.

They usually would come in 2 - 3 times a week. Larry always walked on his own and they would usually get a salad at the salad bar. They both would talk to me and Larry always seemed happy. They would eat in the Market Street cafe inside the store, Larry would stay

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there while Jennifer got a few things for home.

Larry always had a smile for you. They seemed to get along very well.

Norine Neelands

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Woodinville WA [City and State] on Nov 24, 2012 [Date].



Norine Neelands

Type name here

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DECLARATION OF

Barbara O'Conner

Barbara O'Conner declares as follows:

About Larry Christiansen:

I first met Larry about 9 years ago, at Ballard Elks Dances. He reported that he had once been good at roller skating. I could believe that for he danced very well and fast, around the floor. In fact, I would have to remind him not to dance so fast with me!!

Larry and I were members of the "Pacesetters," a group of active singles who were or had been business and professional people. We had activities planned for most days of the week. However, most of my time with Larry involved dancing two or three times a week.

Declaration of Barbara O'Conner - 1

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Returning from a Cruise Overseas 4 years ago, he was very ill and was diagnosed as have Legionnaires disease. He recovered enough to dance again but not fast and energetic as before. A year after that with the complication of kidney stones, he spent a night or so at my house with other Pacesetter friends while recuperating. He is a very nice person, with many friends. About 6 months after that he was diagnosis with Parkinson's. He continued to come to the dances, but was unable to dance and mostly sat and visited with friends and ate popcorn, which he enjoyed immensely! However, we were all very concerned about him living alone and continuing to drive to the dances! In fact, very concerned, as we could see that he was declining fast, unable to dance and very unstable on his feet, yet continued to come. At this point he had begun to gain weight and had begun to look somewhat disheveled, unable to dance and appearing depressed. It was at this time about three and a half years ago that a young woman, Jennifer Roach, began dancing at the Elks in Ballard. She is a very good dancer and a very kind and like-able person. It was here that Larry met her and about 6 months later she began to working for him, at his home, cleaning house and about 2 years ago she moved into his house to be of further help as his personal assistant, secretary, house keeper and to help with his sleep apnea and most importantly for us, his friends, to see that he now had someone to drive him to the dances! She not only drove him to the dances, but they were able to drive to many other places together, and each time when they returned, Larry was excited to tell about their trip. Larry slowly began to look much better and to tell about how much he was exercising, as Jennifer was helping him. She was very attentive to him at the dances, and he had begun to be able to dance a little again. I continued to have

Declaration of Barbara O'Conner - 2

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conversations with Larry and he said he was very fortunate to have Jennifer to help. It was obvious that his health was improving. That he really enjoyed having Jennifer as his personal assistant.

My last time to see Larry was at the North Shore Senior Center dance on Sept. 12th, 2012. At the time, he looked sooo good!! I looked at him and commented, "Larry, you look so good, you look great!" He had lost some weight, he stood up tall and straight, was very nicely dressed. He had on a nice brown shirt and brown pants and nice tie, so neatly pressed, he looked great!! I was amazed at the change from the last time that I had seen him which had been awhile. But also he was so excited to tell me about the travel that he and Jennifer had been doing, places in the U.S, the East Coast, I believe, Canada and even..... Went to beautiful Norway and Sweden! I was so glad and amazed to see how happy and well he looked on Sept. 12th, 2012. Unbelievable what Jennifer has been able to do for Larry!! Without Jennifer's constant caring concern for him he absolutely would not have been able to progress to this point without her! She, as his personal assistant has been able to meet his needs and encourage him and cajole him into regularly exercising and eating better. Not to mention, safely driving him to and from dances where he met with his friends who are so fond him and he of them!

Larry is so proud of the house that he built! His home! I hope that he will be able to return there. Certainly, Jennifer is capable of continuing to be his personal assistant, secretary, housekeeper, driver and confidant. She so desires to have him back in his

Declaration of Barbara O'Conner - 3

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home that he loves. She has done a great job! I have witnessed the progress of Larry as it has happened through these last three years. I know Larry really enjoys living in his home and for him to recover from this recent illness he needs to be back in his own home where Jennifer can, once again, nurture him back to health!

We miss him and want to see him again back at his home, with Jennifer, and back dancing with the "Pacesetters"!

Sincerely, Personal Friend of Larry Christensen

Barbara O'Conner B.A., B.S.N., Registered Nurse, M.P.H.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Shoreline, Wa. [City and State] on 11/12/12 [Date].

Barbara C. O'Conner

Barbara O'Conner

Type name here

Declaration of Barbara O'Conner - 4

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NO. 12 2 02397 4

DECLARATION OF

Chuck Parke

Chuck Parke declares as follows:

My name is Chuck Parke. I have known Larry for probably 3 years here at the dance on Wednesday afternoon at the North Shore Senior Center.

I have nothing but praise and good words for Jennifer's care and treatment of Larry at these dances.

I am a Parkinson's person myself and I know some of the problems that Larry has.

During the time that I have known him Larry has been afflicted with freezing/stuck feet

Declaration of Chuck Parke - 1

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and stutter step problems.

I feel that Jennifer's concern and tutelage has resulted in a stale mate and some increased abilities in the fight against the progression of Parkinson's for Larry.

Chuck Parke

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Bethel Wa [City and State] on Nov. 23/2012 [Date].



Chuck Parke

Type name here

Declaration of Chuck Parke -2

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DECLARATION OF John
and Judy Postforoosh

John and Judy Postforoosh declares as follows:

My husband and I have lived in the neighborhood of Larry Christensen for almost 40 years. The last couple of years we have seen Jennifer Roach with Larry on walks in the neighborhood. When they need to rest, they stop, and there's a bench that they use once in awhile. We have stopped to talk to them several times, and Larry seems to really enjoy going for walks and seeing the scenery and meeting neighbors. Jennifer seems very patient and always has a nice smile on her face! I'm sure Larry has benefited greatly in the care of Jennifer.

Declaration of John and Judy Postforoosh - 1

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John Postforoosh
Judy Postforoosh
11-9-2012

John and Judy Postforoosh

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Woodinville, WA [City and State] on 11-9-2012 [Date].

Page 1 is also signed

Judy Postforoosh John Postforoosh

John and Judy Postforoosh

Type name here

Declaration of John and Judy Postforoosh - 2

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NO. 12 2 02397 4

DECLARATION OF
___Carol_ Robertson__

___Carol Robertson___ declares as follows:

My name is Carol Robertson and I work at Top Foods in Woodinville.

I would like to make a statement for Larry and Jennifer.

I have observed them eating, shopping and interacting together for the last few years here at the store.

They are close.

Jennifer is a supportive, positive and loving companion.

She only looks after Larry's best well being and encourages his independence.

We should all be blessed to have someone like Jennifer in the later years of our life.

Declaration of ___ Carol Robertson___ - 1

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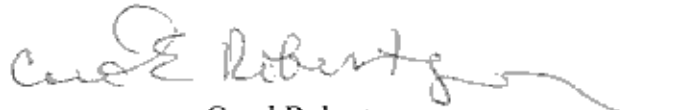
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Carol Robertson

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Woodinville WA [City and State] on Nov 23, 2012 [Date].



Carol Robertson

Type name here

Declaration of Carol Robertson - 2

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DECLARATION OF ___
Rikke _ Rytter__

___ Rikke Rytter ___ declares as follows:

To Whom it May Concern:

Re: Rikke Rytter's participation in Jennifer and Larry's trip to Norway and Sweden
summer 2012

I consider myself very fortunate to be invited on this trip by Jennifer. I have been a Scandinavian dancer for over 30 years, and was pleased to have the opportunity to go back to Scandinavia (where I am from) and participate as Jennifer's partner for Polska Testing in Sweden.

Declaration of ___ Rikke Rytter ___ - 1

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Jennifer booked our flights, as we were to travel together, and they were possibly booked with Larry's credit card. I paid them back fully for those fares (\$2016.53USD), long before we even left. All other expenses were shared fully, and we traveled as inexpensively as we could. Instead of flights and trains, we rented a car and Jennifer and I both drove, with Larry mostly in the front seat where he could enjoy the view the most. These car rentals and gas were also shared fully. Jennifer did a great deal of work trying to organize the least expensive accommodation possible for us. We often stayed with SERVAS hosts, which does not cost anything, and when not possible we stayed at Hostels or Summer Hotels, often sharing a room for all three of us. When a kitchen was available, I often cooked dinner for us and mostly we made out own breakfast and lunch, from supplies we carried in the trunk of the car. When that was not possible, we sometimes had salad bar takeout from the grocery store. Only once did we go out for a "nice meal", and that was my treat.

It was my expectation that I would be helping with Larry along the trip, and I did my best to be useful in every way I could find. On many occasions, I would help Larry to get a snack if we stopped for a gas and bathroom break, and often these treats also came out of my own pocket. Just seeing him enjoy a snack was reward enough, and I didn't need to be reimbursed for such small details.

Declaration of ___ Rikke Rytter ___ - 2

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Throughout the trip Jennifer (with occasionally my assistance) did her best to keep up Larry's exercise program, and certainly a lot of effort went into making sure the sleep apnea mask was functioning properly. Even I, who am not trained in Parkinson's care, could see how important a good night's sleep was to Larry, especially with memory and cognitive functions

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at North Vancouver, BC [City and State]
Canada

on Nov 23 / 2012 [Date].



Rikke Rytter

Type name here

Declaration of Rikke Rytter - 3

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DECLARATION OF

Kathryn Little

 Kathryn Little declares as follows:

To Whom I May Concern: Re: Larry Christensen

My name is Kathryn "Nan" Little. I have my PhD in anthropology and retired from the University of Washington in the fall of 2003. I am married to Douglas Little, a retired partner from the Perkins Coie law firm. I am 67 years old. Years ago I served as the chair of the King County Guardian ad Litem program and was treasurer of the national Court Appointed Special Advocates program, which gave me insight into issues of child abuse and neglect.

I was diagnosed with Parkinson's disease in February 2008. As with most Parkinson's patients, I suffered from tremor, rigidity, loss of balance, depression and a host of other

Declaration of Kathryn Little - 1

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physical and psychological conditions that go along with the disease. I also suffered from REM sleep behavior disorder, which sometimes accompanies Parkinson's disease. I felt like I was on a slippery slope with no way to arrest the disease. I expected that within a few short years I would be reduced to shaking away my days in a wheelchair.

In the fall of 2008 I learned of the work of Dr. J. Alberts, a neuroscientist from the Cleveland Clinic, who had discovered a correlation between forced pace cycling and reduction of Parkinson's symptoms. His research study found that Parkinson's patients who pedaled at 80 to 90 RPM for at least three hours per week on the back of a tandem bike reduced their symptoms by an average of 35% over an eight week period. (See Appendices 1 and 2.) I contacted Dr. Alberts to ask about participating in one of his studies or joining his research. He invited my husband and me to join his group called Pedaling For Parkinson's in the ride across Iowa called RAGBRAI in July of 2009. I immediately agreed although I was not by any stretch of imagination an athlete and the idea of riding my bicycle 450 miles in a week had never crossed my mind. Terrified that I would not be able to make the ride, I began an intensive training program, cycling 1.5 to 4 hours a day 4 to 6 days a week. At first it was difficult, particularly because my hands and feet would cramp painfully as I rode. However, after a month of training at this intense level, one day as I was walking my dogs I realized that my arms were both swinging freely at my side; I was able to turn my head more than 180°; there was no cramping and there was no pain. It was as though my Parkinson's had disappeared. Within a few days I was able to see my Parkinson's doctor at Virginia Mason and he told me that if he didn't know I had Parkinson's disease, he would not diagnose it. I continued with the training and in 2009 and 2010 my husband and I rode our bicycles across Iowa, over 450 miles each time. Subsequent to the rides I was invited to climb Mt. Kilimanjaro with a group of people who have Multiple Sclerosis and Parkinson's disease in an effort

Declaration of ___ Kathryn Little ___ - 2

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to illustrate to the world that having neurodegenerative diseases does not mean the end of an active life and that through intensive exercise, particularly on a bicycle, a person can reverse or at least mitigate the course of the disease. In May 2012 my husband and I joined another group and climbed to Annapurna base camp in Nepal. Following that we cycled in Colorado and once again crossed Iowa. Over the course of this time I've been able to reduce my Parkinson's medication by half. My symptoms have progressed, but at a glacial pace.

Dr. Alberts had started a program called Pedaling For Parkinson's in an effort to share the benefits of his discovery with other patients. I decided to put forth a great deal of energy to help make this program available to other PD patients. With my background with the YMCA, I was able to help initiate Pedaling For Parkinson's at the Y, a program that was subsequently approved by the YMCA of the USA. We are in the process of licensing YMCAs and other exercise facilities throughout the country to run the program.

In November 2010 Dr. Alberts was invited to be the keynote speaker at the Hope Conference here in Seattle, the largest Parkinson's conference in the nation. It was at that conference that I met Larry Christensen, an indefatigable spirit who was determined to be part of the pedaling program at the YMCA. He was accompanied by Jennifer Roach. Both my husband and I were immediately taken by Larry's enthusiasm and attitude and Jennifer's clear dedication to finding something that would help him out. Although he was above the usual age limit for the Pedaling For Parkinson's at the Y program, Jennifer persisted in finding a doctor who would approve of his participation in the Mill Creek YMCA program. Before joining the program Larry and Jennifer visited my husband and me at our home in Seattle. I clearly remember him dragging himself up our steps, hanging on tightly to both Jennifer and the railing and eagerly seeking a chair once he

Declaration of ___ Kathryn Little ___ - 3

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was inside. I must admit that I was dubious about his ability to be part of the program, but both my husband and I were totally impressed at her dedication to him and his dedication to finding something that would work for him. I knew from my own experience how miserable it was to feel that there was no light at the end of the tunnel. He enrolled in the cycling program at Mill Creek.

The next time I saw Larry was several months later at the Mill Creek YMCA. I had just finished giving a talk to their Board of Directors when the head of the wellness program asked me to wait a minute because someone was coming who I would probably like to see. I turned around and saw Larry and Jennifer walking through the door of the YMCA. Larry was walking unassisted with a nearly stable gait and a giant smile on his face. He walked right over and gave me a bear hug. As with my own experience, I really couldn't believe my eyes. Jennifer explained enthusiastically all the types of exercise that Larry had been doing with her assistance. When they ran into a barrier, she figured out a way to get around that barrier. Her dedication to him and her joy at his progress was clear for anyone to see. He was proud and happy. It was truly like looking at a brand-new person.

I have not seen Larry since then, but have only heard from Jennifer about Larry's current state of affairs. She called to explain that she and Larry were staying with Rick and Loretta Sutherland and she was to stay there until the end of the year at which time Rick was going to quit his job, Jennifer was to move out, and Rick and Loretta would take over full-time care of Larry. She said that Rick had explained to her that he was going to pay himself and Loretta out of Larry's savings. Jennifer asked me to call Rick and Loretta to explain the importance of exercise for Larry, particularly the Pedaling For Parkinson's cycling. She also wanted me to talk to Larry to encourage him to keep cycling and to cheer him up. She explained that he was a little confused and that his fall and subsequent

Declaration of Kathryn Little - 4

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move had definitely impacted his cognitive abilities as well as his physical self. According to Jennifer, Larry has not cycled or exercised in any significant manner since his fall and his moving in with the Sutherlands.

Expecting to be well received, I called Loretta and Rick's home. Loretta answered the phone, and when she realized she was talking with me, she became extremely flustered and told me that she couldn't talk on the phone because Larry was falling. Her voice became loud and frantic as she repeatedly told me that he was falling and this was not a good time to call. I asked if they could just put Larry in a chair and let me speak with him on the speaker-phone. She and her husband did that, allowing me to have a brief innocuous conversation with Larry. After less than a minute, Loretta interrupted, again saying this was not a good time and she was getting off the phone. She hung up on me. I have not spoken with her since.

Although I'm not a medical doctor, I can attest to the physical and cognitive benefits of fast paced cycling (80-90 rpms) for Parkinson's patients. Dr. Alberts has referred people to me for help and encouragement from all over the nation. I don't know of anyone who has failed to benefit from this exercise, although not all experience benefits to the extent that I have had.

I am concerned over the health and well-being of Larry Christensen. My experiences with Jennifer Roach have been entirely positive in terms of her commitment to and concern for Larry. My one encounter on the phone with Loretta Sutherland raised all sorts of red flags about his Parkinson's disease and also his financial security.

Included (Appendix 3) is a recent article on the benefits of exercise for PD patients.

Declaration of ___ Kathryn Little ___ - 5

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The pedalingforparkinsons.org website will give you information and references to the benefits of fast paced cycling for Parkinson's patients. Included with this letter is a brochure for the Pedaling for Parkinson's program (Appendix 4).

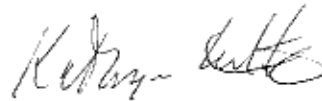
Please do not hesitate to contact me with any questions.

Sincerely,

Kathryn "Nan" Little

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Seattle, WA [City and State] on 11/08/12 [Date].



Kathryn Little

Type name here

Declaration of Kathryn Little - 6

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Appendix 3

Physical exercise improves gait speed, muscle strength, fitness in patients with Parkinson's Disease

<http://www.sciencecodex.com/physical...disease-101497>

CHICAGO – Physical exercise, including treadmill, stretching and resistance exercises, appears to improve gait speed, muscle strength and fitness for patients with Parkinson disease (PD), according to a report of a randomized clinical trial published Online First by Archives of Neurology, a JAMA Network publication.

Gait impairment is associated with functional decline in patients with PD and current therapies are inadequate at preserving mobility as PD progresses. There is growing interest in the use of exercise to improve mobility and function, the authors write in the study background.

Lisa M. Shulman, M.D., of the University of Maryland School of Medicine, Baltimore, and colleagues conducted a randomized clinical trial of three types of physical exercise to compare the effectiveness of treadmill, stretching and resistance exercises in improving gait speed, strength and fitness for patients with PD.

The study included 67 patients with PD who had gait impairment and were randomly assigned to one of three groups in the trial: a higher intensity treadmill exercise (30 minutes at 70 percent to 80 percent of heart rate reserve); a lower-intensity treadmill exercise (50 minutes at 40 percent to 50 percent of heart rate reserve); and stretching and resistance exercises (two sets of 10 repetitions on each leg on three resistance machines). Patients performed the exercises three times a week for three months.

"The effects of exercise were seen across all three exercise groups. The lower-intensity treadmill exercise resulted in the greatest improvement in gait speed. Both the higher- and lower-intensity treadmill exercises improved cardiovascular fitness. Only the stretching and resistance exercises improved muscle strength. Therefore, exercise can improve gait speed, muscle strength and fitness for patients with Parkinson disease," the study notes.

According to the study results, all three types of exercise improved distance on the 6-minute walk: lower-intensity treadmill exercise (12 percent increase), stretching and resistance exercises (9 percent increase), and higher-intensity treadmill exercises (6 percent increase). Both types of treadmill training improved cardiovascular fitness, whereas stretching and resistance had no effect. Only stretching and resistance improved muscle strength (16 percent increase).

"The fact that the lower-intensity treadmill exercise is the most feasible exercise for most patients with PD has important implications for clinical practice. Although treadmill and resistance training are beneficial for gait, fitness and muscle strength, these benefits were

not accompanied by improvements in disability and quality of life," the authors conclude. "Future directions for study include trials of combinations of exercise types, longer training periods and investigation of the potential for exercise to modify the trajectory of disease progression over time."

It Is Not About the Bike, It Is About the Pedaling: Forced Exercise and Parkinson's Disease

Jay L. Alberts^{1,2,4}, Susan M. Linder^{1,2,4}, Amanda L. Penko^{1,2,4}, Mark J. Lowe^{1,3}, and Micheal Phillips^{1,3}

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ALBERTS, J.L., S.M. LINDER, A.L. PENKO, M.J. LOWE, and M. PHILLIPS. It is not about the bike, it is about the pedaling: forced exercise and parkinson's disease. *Exerc. Sport Sci. Rev.*, Vol. 39, No. 4, pp. 177-186, 2011. *Forced exercise has resulted in neuroprotective effects and improved motor function in animal studies. These promising results have not yet been translated fully to humans with Parkinson's disease (PD), as traditional exercise interventions have not yielded global improvements in function.*

A novel forced exercise intervention is described that has resulted in improved motor function and central nervous system function in PD patients. **Key Words:** forced exercise, aerobic exercise, fMRI, motor function, neuroprotection, rehabilitation

INTRODUCTION

The aim of this review is to provide a brief overview of what is known about the effects of aerobic exercise training on the symptoms and motor function in patients with Parkinson's disease (PD) and to detail the impact of a relatively new approach to exercise in human patients with PD, forced exercise (FE). FE, in this case, is defined operationally as a mode of aerobic exercise in which exercise rate is augmented mechanically to assist the participant in achieving and maintaining an exercise rate that is greater than their preferred voluntary rate of exercise. It is important to note that during FE, the participant is contributing actively to the exercise; they are not being moved through the motion passively. Our data indicate that FE leads to a global improvement in PD motor function and an alteration in the CNS function (22). These global changes in motor function and altered activation patterns provide strong evidence for the hypothesis that for patients with PD to derive motor benefits from exercise, assistance is required to achieve a rate of exercise that triggers the release of neurotrophic factors or possibly dopamine.

PD is a progressive neurodegenerative disorder affecting nearly 1.5 million Americans, with annual treatment costs approaching \$25 billion. It is caused by selective neuronal loss in the substantia nigra and resultant degeneration of dopaminergic pathways in the basal ganglia. This loss of dopamine alters both inhibitory and excitatory pathways, resulting in its cardinal motor signs: bradykinesia (slowness of movement), tremor, rigidity, and postural instability (12). PD impacts movement ability, function, cognition, and quality of life (QOL), all to varying degrees on an individual patient basis. Traditional medical and surgical approaches to managing PD are expensive and associated with a variety of side effects that may further compromise QOL. Utilization of a non-drug, non-surgical therapeutic approach, such as exercise, to improve motor function would provide an attractive adjunct to current PD treatment approaches.

FE and Motor Function in Animal Models of PD

The effects of FE on motor and behavioral function using the 6-OHDA or 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP) rodent model of PD has been studied extensively (11,27,31,32). A typical FE paradigm is motorized treadmill running that requires the animal to maintain a running velocity that is greater than its preferred running velocity (19-21,27,32). Failure to keep pace with the motorized treadmill results in a noxious stimulus (contact wire brush or electric current).

Recent data indicate that FE has neuroprotective properties (27,32) and improves motor function in MPTP-treated mice (19-21). FE has been proposed to support angiogenesis and synaptogenesis, increase defense from oxidative stress, and

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Forced, Not Voluntary, Exercise Improves Motor Function in Parkinson's Disease Patients

Angela L. Ridgel, PhD, Jerrold L. Vitek, MD, PhD, and Jay L. Alberts, PhD

Background. Animal studies indicate forced exercise (FE) improves overall motor function in Parkinsonian rodents. Global improvements in motor function following voluntary exercise (VE) are not widely reported in human Parkinson's disease (PD) patients. **Objective.** The aim of this study was to compare the effects of VE and FE on PD symptoms, motor function, and bimanual dexterity. **Methods.** Ten patients with mild to moderate PD were randomly assigned to complete 8 weeks of FE or VE. With the assistance of a trainer, patients in the FE group pedaled at a rate 30% greater than their preferred voluntary rate, whereas patients in the VE group pedaled at their preferred rate. Aerobic intensity for both groups was identical, 60% to 80% of their individualized training heart rate. **Results.** Aerobic fitness improved for both groups. Following FE, Unified Parkinson's Disease Rating Scale (UPDRS) motor scores improved 35%, whereas patients completing VE did not exhibit any improvement. The control and coordination of grasping forces during the performance of a functional bimanual dexterity task improved significantly for patients in the FE group, whereas no changes in motor performance were observed following VE. Improvements in clinical measures of rigidity and bradykinesia and biomechanical measures of bimanual dexterity were maintained 4 weeks after FE cessation. **Conclusions.** Aerobic fitness can be improved in PD patients following both VE and FE interventions. However, only FE results in significant improvements in motor function and bimanual dexterity. Biomechanical data indicate that FE leads to a shift in motor control strategy, from feedback to a greater reliance on feedforward processes, which suggests FE may be altering central motor control processes.

Key Words: Parkinson's disease; Exercise; Manual dexterity; Motor control; Grasping forces; Movement disorder

Forced exercise (FE), an intervention in which the animal is forced to maintain a running speed greater than its preferred pace, improves motor function and is neuroprotective in Parkinsonian-treated animals.^{1,2} Data indicate that the rate of FE may be an important factor in global motor improvements.² Dramatic effects of exercise have not been reported in human PD exercise trials. Variation in exercise rate may underlie differences in animal and human results. Unlike the effective FE paradigms used in animal studies, interventions for PD patients involve exercise that is under voluntary control and self-paced.^{3,4}

Neurophysiological,⁵ functional magnetic resonance imaging (fMRI),⁶ and positron emission tomography (PET)⁷ data indicate that PD results in an overall decrease in the level of neural activation of cortical motor areas, which likely contributes to the general poverty of movement in PD patients and limits their ability to consistently exercise at a high frequency or rate. To compensate for diminished voluntary neural activity, exercise rate may need to be augmented externally if PD patients are to fully realize the benefits of exercise described in the animal literature. Motor cortex function and excitability can be modulated by augmenting proprioceptive sensory signals in healthy human subjects.^{8,9} Peripheral nerve stimulation

increases excitability in the motor cortex, as measured by transcranial magnetic stimulation (TMS), and has been useful as a neurorehabilitation method in individuals with stroke. Takahashi and colleagues examined the effectiveness of a hand-wrist robot in improving motor function and brain reorganization in individuals with chronic stroke.¹⁰ They showed that active robotic assistance resulted in significantly greater gains in motor function than in individuals who received passive robotic assistance. The authors suggest that the active assist mode results in greater proprioceptive sensory signals to the brain and that this afferent feedback is responsible for improvements in motor function and increased motor cortical activation.¹⁰

Based on these findings, we hypothesize that to maximize the benefits of physical exercise on motor function in Parkinson's patients, a forced or augmented rate of exercise may be necessary. To test this hypothesis, a lower extremity FE intervention was developed for PD patients using a stationary tandem bicycle. Patients' pedaling rate was increased to approximately 30% more than their preferred rate. If FE leads to changes in central motor processing, improved motor function in the nonexercised effectors (upper extremity) was expected for the FE, but not the voluntary exercise (VE) group.

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