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Getting his groove back

SARAH HAMPSON > PUBLISHED MARCH 3, 2008

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When Andy Barrie met Sarah Robichaud in the spring last year, the CBC Radio personality had not yet gone public with his Parkinson's disease. He and his wife, Mary, had moved into a downtown Toronto loft, and he had inquired if there was a personal trainer who worked in the building's gym.

"I am totally pathetic at exercise," says the 63-year-old journalist with a laugh. But he had been told that some physical therapy would help with the progressive neurodegenerative disease that presents a variety of symptoms, but most commonly affects mobility. Ms. Robichaud's name was suggested.

They set up an appointment to meet in the gym a few days later. He asked if she knew very much about the disease. She said she was aware that actor Michael J. Fox has it; that Muhammad Ali does as well. But that was all. Mr. Barrie then handed her some books on the subject. "I started researching," she says. A former dancer and choreographer, Ms. Robichaud

suggested regular exercises to help with core stability and overall muscle strengthening, but soon introduced Mr. Barrie to ballroom dancing - everything from the tango to the waltz - in an effort to increase the fluidity of his movement. At first, he was skeptical.

find out more about how to help her client, and why dancing is beneficial, she travelled to New York to attend a workshop at the Mark Morris Dance Group in which trained dancers develop customized routines for patients with Parkinson's. "It was the most moving weekend of my life," she says, noting the happiness of the

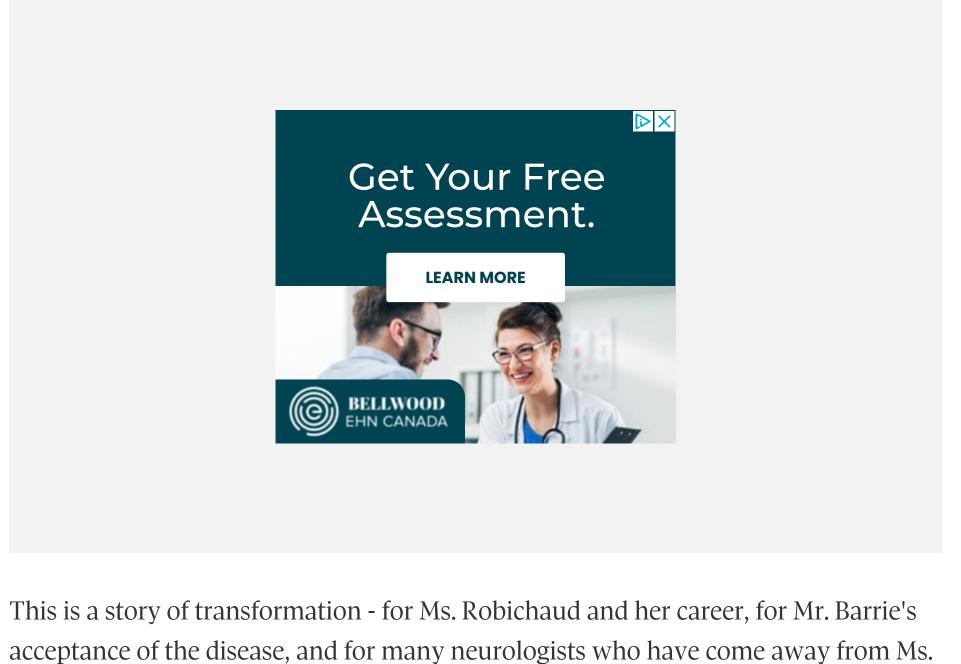
participants, some of whom used walkers. "Dance is about joy and emotions. It's

Ms. Robichaud, however, is not a person who is easily discouraged. Determined to

social. This is a disease that can make you feel undignified and often causes people to stay indoors." Mr. Barrie acquiesced to her enthusiasm. Now, he is a passionate convert. His weekly one-hour dance therapy sessions with Ms. Robichaud are the "only time I am

unaware of my Parkinson's limitations." In addition to her work with individual clients, Ms. Robichaud is starting a free weekly dance session in Toronto for Parkinson's patients. "This is my chance to give

back," says the 32-year-old mother of one. "It's charity. I've always wanted to help people, and I'm realizing more and more that there is a real need for this." STORY CONTINUES BELOW ADVERTISEMENT



patients. "It is a revelation," says Keith Meloff, a neurologist at Toronto's Baycrest centre, who watched Ms. Robichaud discuss the merits of dance therapy and show clips of sessions at an international video-teleconference in Toronto last week. "There's

Robichaud's presentations with new insights about how to help their Parkinson's

almost a transcendence that comes over these [patients] and they become startled and surprised by their capacities that she releases through dance and music. There is more going on here than merely entertainment," Dr. Meloff says. "Not all solutions to Parkinson's reside in a bottle of pills." Parkinson's affects about 100,000 people in Canada, according to Parkinson Society Canada. But that number is only an estimate as the disease, which is caused by a decline in dopamine, a chemical that carries signals between the nerves in the brain,

freezing (or difficulty initiating movement), depression, slowness of speech, constipation and handwriting problems are some of the effects, but there is no test for the disease, and each patient can exhibit different combinations of the symptoms, which can come and go. Mr. Barrie says he was in denial for a long time. "For me, at this stage, the main problem is just walking. I do what is called the Parkinson's shuffle, taking shorter steps than I used to. And my writing was getting scribbled. But I was going to work. I

is notoriously difficult to diagnose. Tremors, lack of balance, fatigue, stiffness,

was functioning. If I couldn't walk as fast, I thought, 'Well, that's okay.' People

probably thought I had a back problem."

movement. So does rhythm.

explains that Parkinson's "makes you feel like you have fallen into a vat of slippery mud. You're falling slowly. You can't go anywhere fast. You have difficulty initiating movement. There's a sense that you are going faster than your body." Dancing to music helps Parkinson's patients on several levels, "getting movement

going through the back door of the brain," Dr. Chow explains. There are several

Tiffany Chow, a neurologist at Baycrest who has worked closely with Ms. Robichaud,

triggers that can initiate movement and bypass the pathways in the brain affected by the lack of dopamine, she explains. The emotional memory of music can help. Ms. Robichaud also uses images, asking patients to grab an imaginary butterfly rather than simply commanding them to raise their arms. The mirroring effect of dancing with a partner allows for easier

walking to facilitate smooth movement. "Sometimes I sing O Canada to myself," he says jovially. "That helps. It has a perfect rhythm," he offers as he sings a few bars to demonstrate. Doctors are aware that exercise can help, but as Dr. Meloff says, "particularly in the

case of neurologists, they are so overwhelmed with the basic medical needs [of

Mr. Barrie often counts out military-like rhythms silently to himself when he is

Parkinson's patients] the complications of their medications and other issues, that they rarely have time to consider what goes on in their outside lives." A suitable recreational activity is often difficult for many patients to find because they are afraid of falling. Gyms can be intimidating for the elderly. But none of this enthusiasm for Parkinson's dance therapy would be present without

Ms. Robichaud, many of the neurologists say. Her free community-outreach dance

session is the first of its kind in Canada, according to Parkinson Society Canada.

"If anyone can do this, Sarah can," Dr. Chow says. "She is mesmerizing. She has that golden light. You want to be in the room with her. Patients focus on her and start to think, 'I'm moving like her.' "

Dr. Meloff adds: "She's like Barack Obama. She is charismatic. People follow her. She

has a gifted way of engaging people and teaching them and motivating them."

Ms. Robichaud says she just feels lucky to be able to make others feel good about themselves, which is the goal of any personal trainer. "I had no idea I would be generating this kind of attention from the medical world."

Several doctors believe that research into the effects of dance therapy should get under way. But even without medical proof of its benefits, patients know that dance is a vacation from the disease, which is a constant companion. "I haven't been depressed," says Mr. Barrie, who has written about his struggles with

depression in the past. "I would call it a distraction. It's hard to stop thinking about. I'm not thinking about it when I am working or out to dinner with friends, but as soon as I get up it's there," he says. "I don't know what's in my future. There are people who lose their speech. What I do is talk. "Parkinson's is not a pleasure trip," he continues. "So it's nice to be involved in

something as a result of the disease that is fun. [Dancing]loosens you up in your

body and in your brain. You can get tight in both places."

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For information, go to SarahRobichaud.com. On April 17 at the Gladstone Hotel in Toronto she is holding a fundraiser, Dancing with Canadian Celebs, in support of her charitable work.

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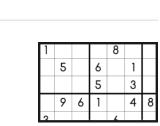
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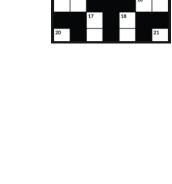
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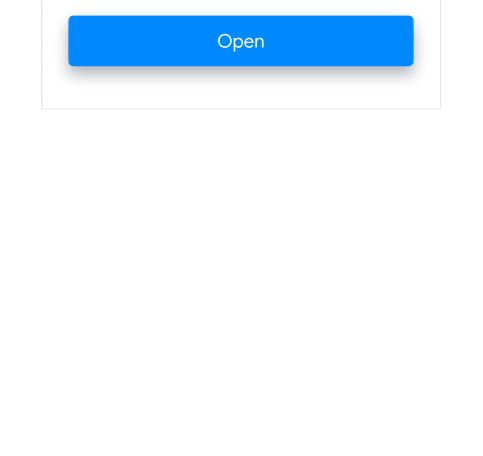


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