A Publication of the Myasthenia Gravis Foundation of California

51st Founder's Dinner

By Dinesh R. Patel, Chairman

I'm excited to report that on April 2, 2016, we celebrated the 51st Annual Myasthenia Gravis Foundation of California's annual fundraising gala at the elegant Beverly Wilshire Hotel. It was a lovely evening, spent with our MG family, good friends and associates. We listened to music, danced, enjoyed a lovely meal and were happily entertained by a charming and talented comedic magician, Karl Koppertop. Bet you can't guess his hair color.

It was a great honor and pleasure to be the Chairman of the special gathering this year; yet another opportunity to meet so many wonderful people who give of their time and talents in support of the Myasthenia Gravis Foundation. This gala plays an important role in raising funds to continue the crucial research being done towards finding the cause and cure of myasthenia gravis. Also, we appreciate our president, David Kohn, treasurer, Alice DeKoven, staff member, Melisa Pangilinan, and all the volunteers who coordinate the many activities that made this event a success.

Of course, we can't let another moment pass without mentioning the inspiring lady who started it all, Mathilda Karel Spak. As many of you know, Mathilda organized this foundation and, for over 60 years, dedicated its pursuit to her beloved mother, a very brave woman who battled MG during a time when little was known about this illness. We are all so grateful to Mathilda for her determination to help others challenged by MG and her perseverance in raising funds for medical research to find its cure. From the moment I met Mathilda, I was hooked and I'm sure that's the effect she has had on everyone who has ever had the privilege to meet this great lady.

Each year, as we prepare for this gala, we look to our community for support and we thank those whose efforts have made significant strides to improve the quality of life for people with MG. This year we

were delighted to recognize and honor the Physicians, Staff and Volunteers of the clinics at the University of Southern California, the University of California, Los Angeles and the University of California, Irvine.

Representing USC was Dr. Said Beydoun, representing UCLA was Dr. Perry Shieh and

representing UCI was Dr. Tahseen Mozzafar. As the physicians accepted their award for service of excellence, they provided the audience with encouraging stories about MG patients and the progress being made in treating this illness. Each spoke from the heart and touched all of us as we listened to them.

Their dedication, the love they feel for their work and their concern for their patients was evident to all of us.

Editor: Lois Pedersen-Allen

To all of you who attended the event or contributed in some way, thank you for joining us, and we hope to see you at our 2017 annual dinner in support of this great cause.









A MESSAGE FROM THE PRESIDENT

Dear Friends:

As we move into the holiday season, our foundation is changing, like the leaves in autumn. Part of this transition includes adding new board members (welcome Neil Ross!!), making further improvements to our website, adding a new employee (congratulations Dova Levin!!) and even saving our data in the "cloud." When it comes to the website, we have several goals including:

- Improving and adding more information (written and pictures) about our founder, Mathilda Karel Spak.
- Ensuring that our patient newsletters will be accessible online.
- Adding pictures and biographies of our board members.
- Posting the invitation for our annual fundraising gala dinner online.
- Enhancing the information about our recommended doctors, specializing in the treatment of myasthenia gravis.
- Adding more information about our support clinics.

- Improving our calendar when it comes to posting upcoming events, and events related to our support groups.
- Adding more email addresses to the website so our patients and doctors can contact MGFC during off hours.

The aforementioned will take time; however, I am confident that our staff can complete these tasks in a timely manner.

It is hard to believe, but MGFC has had 51 consecutive Founder's Dinners. You would think that after 51 years, MGFC would have our "business down." We do not. We have done many wonderful things for our patients and raised a significant sum for researching the cure of myasthenia gravis, but, like a tadpole turning into a frog (probably not the best example) or a caterpillar developing into a butterfly (much better), we must transition our organization into a more modern foundation. metamorphosis will take time. However, our board is committed to making this transition. With the assistance of our incredible doctors and patients, I am confident that our foundation will not only change into a butterfly, it will be the most beautiful variety—the monarch.

Thank you for subscribing to our newsletter and for your continued interest and input related to Myasthenia Gravis Foundation of California. Please continue to reach out to our organization with suggestions for improvements. Remember, our foundation's mission is to support our patients and doctors, so we look to you for suggestions and areas for improvement.

Have a wonderful, healthy and happy holiday season.

Warm regards, David Kohn, President

ANNUAL MEETING

Eighty MG patients and family members gathered at the Westin Hotel in Pasadena for the Annual Meeting held on Sunday, June 26, 2016. Dr. Jeffrey Rosenfeld, Professor and Associate Chairman of the Department of Neurology at Loma Linda University's School of Medicine led the talk on Clinical Variability and Pathological Stability. He began by discussing research updates and challenges doctors are facing when diagnosing the disease. Of interest, 60-70% of the time doctors can immediately diagnose a patient before even talking to them by observing these common signs: double vision, droopy eyes, "fatiguable weakness," difficulty breathing and/or speaking.

Dr. Rosenfeld explained, how in MG patients, receptors are blocked by antibodies and in other cases, the receptors that are not blocked, are not being sufficiently rested, thus resulting in a weaker contraction each time due to the lessening of receptors. Also, the fatigue patients experience can be attributed to the fact that the muscle is unable to send feedback information back to the central nervous system, which causes it to constantly signal the muscle to contract.

Dr. Rosenfeld briefly talked about medications, specifically Mestinon, tensilon, prednisone and their effects on the body. Mestinon inactivates the inactivation enzyme clearing the Ach receptor connection allowing the receptors to reset. In turn, it maximizes the potential for Ach to bind to the receptor to cause the muscle to contract. Tensilon acts like Mestinon but takes effect more quickly, however, its effects are short-lived. Another point he made was showing the good and bad

sides of MG, calling MG a "good" disorder, remarking that a complete remission is possible.

Dr. Rosenfeld wrapped up his presentation touching on the ongoing research with stem cells and how they can help in the treatment of MG.

In addition to the educational component, this event served as the foundation's Annual Meeting. Board members elected for terms of service include Neil Ross, Ed Cholakian, Fay Greenberg, Yair Greenberg, and Dinesh Patel. Officers include David Kohn, President, Jonathan Macy, M.D., Vice President, Alice DeKoven, Treasurer and Cynthia Woo, Secretary.

In keeping with tradition, the meeting ended with a raffle drawing and refreshments were served.

MYASTHENIA GRAVIS NEWS

The views expressed in this newsletter are those of the authors and do not reflect any official position of the Myasthenia Gravis
Foundation of California or the Medical Advisory Board.

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A Story of Myasthenia and Cancer

By Emmanuel Paul

Before taking part in the series of shared experiences with MG, I'd like to express my gratitude to the people at Pacific Eye Institute, City of Hope, Huntington Memorial and Dr. Sharon Yegiaian.

"I think I know what it is." That statement I heard from an ophthalmologist two years ago left me perplexed. It was not followed by much explanation. The reason for the visit was the increasing difficulty to keep my right eye open. I was also exhausted. First, I had checked at urgent care the previous night when returning to the truck terminal in Rancho, after two weeks on the road.

Leaving the clinic with a prescription for a scan, I headed to an imaging center where they found the order suspicious. "A CT chest from an ophthalmologist?" "It had to be doublechecked."

Back on the road, I received an alarming message on my voicemail from the nurse. "Call me even at midnight, we have the result, it's serious.

Soon I was again listening to the doctor at his office. He was dramatizing. "I can do nothing for you."

What the scan had revealed was a mass in the middle of my chest that should not be there. No, I did not feel anything. As the doctor kept on talking, I was thinking of a sci-fi movie with aliens. I heard things like ...biopsy...City of Hope...and a referral for another physician. Before leaving, I asked for the diagnosis. On the stationery card was written: myasthenia gravis-thymoma.

In retrospect, it was right from the start. At the moment, however, it was plain Greek to me.

What to do next? I decided to check the place mentioned. The address was City of Hope, an elegant four-story building that does not say much about what it is from the outside.

"Do you have cancer?" The stance from the smiling lady at the desk took me by surprise. ... "Maybe," I answered, trying to appear cool.

Then things unraveled quickly. In no time I had a biopsy, complete body scan, multiple cancers found and an action plan with three

Fast or maybe not so.

On top of the list was the thymectomy. It was delayed to address the myasthenia which seemed to be a concern for the surgeon. After

some blood lab and a brain MRI, I started a treatment of anticholinesterase and corticosteroid. At the time. I didn't know much about MG, and erroneously, I thought it might be a byproduct of cancer, but with an exotic name.

Six weeks passed, I was off the steroids, doing fine and ready for the thymus removal which should improve myasthenia. So, about two months after my visit to the ophthalmologist, entered Huntington

Hospital in Pasadena for a robotic state-of-theart chest surgery. A great job, no complications, I walked away the following day.

Another operation was scheduled for my thyroid the following month. I was going to hear again about this autoimmune disease. During that time, alternating work and medical leave, I joined a support group for cancer.

The day of the thyroidectomy, my new surgeon was teaming with her favorite anesthesiologist. He entered the room where I was waiting nervously, "You didn't take your Mestinon?" "He skipped the tablets" the nurse said. "The last thing I want is a crisis right now."

A crisis? It did not happen, but the surgery turned my voice into a low key. That was expected. I drove back home in Las Vegas and two days later, new development were to begin.

"Gradually and then suddenly."

A previous issue of the MG News referred to a New Yorker article related to autoimmune diseases in which that quote was used and attributed to a famous American novelist. It describes exactly the process by which in six weeks, I ended up in the CCU at Huntington. All started with warning signs: difficulty speaking, swallowing, double vision and constant exhaustion. Day after day, it gets worse and I didn't know what was going on. I was back on steroids with an immunosuppressant and a thyroid hormone.

Undergoing various treatments in Pasadena, I happened to be at the Cancer Community

Center one evening, when I became unable to breathe. Some people there had knowledge of MG. Being a few blocks away from the hospital also was my luck. Rushed to the ER in minutes, I was greeted by a "You again?" from a nurse who assured me that she removed some tubing from my chest previously. Not sure how to take it, I decided it was sort of a

Huntington was not so

much fun. Placed on respiratory assistance and a feeding tube, I saw what myasthenia was about. I still knew little about the condition. By way of a dietician who was trying unsuccessfully to have me swallow tiny ice cubes, I came into contact with a clinician specializing in MG. I learned about the MG Foundation. This generated a lot of information and gave me a better idea of the situation.

The crisis was treated with prednisone and IV-IG. It worked. After a month, I came back to work, on the road that is. During that time, a series of tests were performed--pulmonary was good but sleep was bad, not a surprise.

The neurologist had a plan to continue the infusion. She was able to set up six months of IV-IG. Some people have great stories about the help they get. However, stress better being avoided, when becoming eligible for Medicare, I choose to work part-time.

On the cancer side, I was not done yet. There was a tumor in the right kidney. Another surgeon took care of that--same place, same video-assisted technique, same success. Since only two months had passed since the myasthenia flare up. The consequence was a difficult recovery.

All things were improving. I came to believe that remission was in sight. Labs and test results were good, medication reduced, visits less frequent. Thinking back at what happened to me, without the myasthenia symptoms, the cancers would not have been detected at an early stage.

welcome back. That third stay at

The Mathilda Karel Spak MG Clinic

Will these diseases disappear over time?

remind me of the reality of my condition: it's

interesting approach in an article: is it still

and cancer is unusual. According to our

Medical Advisory Board, 90% of the time,

a thymoma is a benign tumor (i.e., not

cancer). 10% of them are malignant (i.e., cancer), however. If someone has MG, they

do not have an increased risk of developing

cancer, but there have not been really good

not all over, it's different.

possible to have a good life?

studies of this question.

Two recent sporty excursions were to

In the last MG News, there was an

Emmanuel's experience with both MG

The Mathilda Karel Spak MG Clinic is held on first Friday afternoon of each month at

UC-Irvine Neuromuscular Center 200 S. Manchester Avenue, #110 Orange, CA 92868.

Please call (714) 456-2332 for an appointment and identify yourself as a patient of the Mathilda K. Spak MG Clinic.

Patients with insurance can make an appointment Tuesdays of each week.

THE JELLY ROLL BLUES

By Gerry Furth-Sides

"You probably aren't doing as well as you think you are," said my dear neurologist last summer in answer to my euphoria after a pretty much symptom- free couple of years. The chair of my MG support group echoed his sentiments shortly after. But he, along with me, was mighty impressed that I walked briskly and with a bounce even in the 100 degree-plus valley heat.

They did, however, turn out to be right in a different sense. I was doing well because I wasn't over-doing it. And just as a Marina Ritz-Carlton masseuse after my initial diagnosis reminded me of my muscle sense memory that could right me to strength again, the opposite could be true as well with a more recent sense memory. This new MG repertoire starts off with the "jelly" feeling that rolls over me when I am anxious or over-tired or both, freezing me to the spot more quickly than Lot's wife.

Put this in context with my MG history: a decade-old diagnosis by the dedicated Dr. Kasamiroff, at Kaiser, after three years of me making the rounds of one doc after another. His prescription of 60 mg of pyridostigmine bromide daily and an insistence on a thymectomy he instigated with the brilliant Dr. David Tse made me thrilled to be 92% better almost immediately.

Wind back to four torrid summers ago when I sat on my couch most days, dressed in shirt and pants, staring into space, deliberating whether I could make it down to my carport - sure I could not survive the weather. A visit by an old boyfriend's sister and ski buddy, made me realize how passive I'd become. I vowed to change, whatever the weather.

Two summers later, I happened to reconnect with a former Washington D.C. acquaintance. For me anyway, it was a politically heady, hopeful time that I soon began reliving. He acted as a catalyst that triggered a sense memory so buoyant that I ate and slept very little; I danced and moved about – (the best therapy for me).

Last year, I was also recruited for a startup writing job, the first company in 15 years that treated me well... even though it involved more passive computer work and eating out! I was so impressed by the owners' East Indian background; I sewed 8 breezy summer dresses and put my hair up - very cool in every way! How far, I had traveled, from my stint on the couch. Often when I arrived at my couch in the evening, I marveled not that "I made it home" but that I no longer even pondered the distance or steps along the way.

And then came this summer and by my own doing, a return to moments of the "Jelly Roll Blues." I put in BOLD: my own doing. The corollary: once the extreme A-type personality activities started, activities I was not asked or required to do (!) it was like being at the top of a roller coaster that accelerated down on its own

I kept at it even without enjoyment: addiction. And I laugh when I make the distinction between "addiction" and "obsession." My dear dad used to chuckle that when he introduced me to ice cream he didn't realize he was creating "an addict." But I was not an (ice cream – or espresso or film or fashion) addict. Any amount is just fine and no amount becomes "so much" I stop enjoying it!.

Not so with the hyper-activity. I strain on and on under the burden -- with the unconscious longing that I either finish to never have to repeat, or do a hit-the-wall stop.

And what started this all?

First, I answered a friend's request to host an entertaining 16-pound, celebrity tri-pod hospice cat for three weeks; he's been with us for five months now). Having to do everything on the floor for/with him requires stooping, bending, carrying heavy loads and changing pee pads regularly.

Next came a request to cat-sit for my acquaintance neighbor's equally large "scaredy" cat. Think the same scenario, plus anxiety that "Little" would not run away. Next came my overseeing her sudden monumental move out of her studio when she returned (two actual tons of

The increasing whirlwind activity prompted my mind to race, and I had problems righting. But not even that or tripping over a hose while carrying a heavy tray of potted plants stopped me. I finally did hit the wall after I voluntarily hosted a (pen pal!) family from out of the country. Isn't it the way with all of us MG patients!

With my cat-sitting money I bought a huge patio umbrella that sways in the breeze. I forced myself to meditate at least 3 minutes a day under it, and do yoga afterward. I make Bieler soup (pretty much non-starch greens) every meal I am home. I make myself attend walking events and kept track of steps on my iphone - even when there are food fairs!

Even though the symptoms are gone, I am not back to my previous healthy high. So, please excuse me now. I need to get back to meditating.



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MG INTERVIEW

Joe Llanos, as told by Cece Llanos, R.N., his wife & caregiver

By Joanna H. Kraus



This interview is part of an ongoing series of anecdotal patient experiences with myasthenia gravis.

In April, 2014, Joe Llanos, at age 71, developed bulbar/whole body myasthenia gravis. His first symptoms were double vision and shortness of breath. Ironically enough, the onset occurred when he was at physical therapy for post knee replacement surgery. Initially, his doctors thought that his weakness was simply due to the surgery. But after four or five trips to the Emergency Room and an increasing fear of the unknown, a doctor friend ordered specific blood and respiratory tests, CT scans and ophthalmology appointments.

It was two months before they finally figured out that the problem was MG and as soon as the disorder was diagnosed Joe felt relief.

In the meantime, however, his speech was slurred, his voice hyper-nasal and the respiratory difficulties and upper body weakness continued. He appeared slouched and had difficulty swallowing.

As soon as he began to take Mestinon, there was a significant improvement.

Although life threatening issues lessened, Joe's quality of life deteriorated, impacting his entire family.

Though people were shocked they remained understanding and supportive.

Currently, Joe is on several different medications such as Mestinon, CellCept, Zoloft, Kepra to name a few.

At this point he's had MG for two years, but physicians suspect he may have had it in his system longer and that the knee surgery exacerbated it.

MG has definitely affected Joe's quality of life. Whereas he used to be active and independent, now he is unable to help with daily chores and at times requires a caregiver. Most days he can't leave the house and is not the man he was before. Joe can't read books and magazines and has trouble, when watching television, in paying attention to the story line. Most days he chooses to relax and sleep because of his overall weakness.

JOE'S ADVICE TO OTHERS:

Pray, take one day at a time, have a belief in a higher power, love your family, have a support system, realize your limitations and be open to new procedures and medications.

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GIVING A LITTLE PIECE OF ME TO THE RED CROSS

By Ed Cholakian



My mother gave blood through the Red Cross for years. On one of my trips to visit her she asked me if I wanted to tag along while she did her duty. I walked with her with my head held high. Unfortunately, when we stepped through the front door she looked at me and asked if everything was

I had turned completely white and she had me sit down immediately.

I wasn't even giving blood. I was just going in to support her. That was about 35 years ago.

My middle daughter, Shannon, started giving blood on a regular basis in high school. She asked a couple of times about me donating but I had heard that MG patients were not allowed to do so, and I even looked it up at one time. Also, I kept thinking about my previous experience with my mother.

I was with Shannon while she signed in at the Red Cross for another of her donations. The attendant asked if I was giving blood also. I told her that I would love to but I was not able to give because I have myasthenia gravis. To my shock she said "I don't think there is a restriction for that diagnosis." I asked her to double check. Sure enough she said that there was nothing listed for MG. She added, "Do you want to give today?" I immediately snapped back to being with my mother and softly said "Maybe next time."

I didn't really do anything until Shannon called me to say that she was contacted by "Be The Match" and their bone marrow transplant registry as a possible match. She had signed up about four years ago. There were a lot of other tests that had to be finalized but she had been contacted as a possibility. She was so excited at the opportunity to help.

With that I thought it was worth looking into the Red Cross again for me. I checked online and sure enough no notes about MG. Shortly after that I started taking inventory.

I'd had a thymectomy with tubes running everywhere. I've had series after series of plasmapheresis and IV-IG. Even had a little discussion with one of my daughter's soccer friends about his continuous giving and how I had heard that giving and regenerating blood cells assisted in longterm health.

I have given blood sooooo many times and this should not be any big deal. But I kept slipping back to that fateful day with my mother when I couldn't even walk into the door of a Red Cross office.

Well, while writing this I am getting ready to give blood for the second time at 8:45 in the morning. I have been so fortunate with my MG care, especially the research that has gone into it and the medications that have been tested. There are procedures that have been tried to make my life easier with MG. As well as my friends and their co-workers donating blood, on my behalf, prior to my thymectomy.

My first time was a piece of cake and it felt so good knowing that I can help someone else as so many have helped me.

If you feel inclined to also help I would like to suggest that you talk to your doctors to verify that they feel it is okay and then contact the Red Cross at 1-800-733-2767 or online at RedCross.org.

Oh, and in case you wanted to know, my daughter did end up being the best match for her bone marrow recipient. She was a real over-achiever with the quality and quantity of her cells taken. Her recovery was swift and almost immediate. We wish the patients who received her bone marrow the best in their journey back to health.

SAVE THE DATE

52nd Founder's **Dinner and Dance**

APRIL 1, 2017

BEVERLY WILSHIRE HOTEL

The Officers and Directors of MGFC invite you to join us for a wonderful evening.

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Geoffrey L. Sheean, MBBS, FRACP Perry B. Shieh, M.D.

Annabel Wang, M.D.

Call us today at 323.887.0056 to reserve a ticket in advance or email info@myasthenia-ca.org.

Deadline: March 24, 2017

Our annual membership drive concluded December 31, 2015.

Prizes in various categories were donated by members of the board of directors of the Myasthenia Gravis Foundation of California. Listed below are the lucky winners:

2015 MEMBERSHIP DRIVE WINNERS

\$500 Cash

(Donation *of* \$200 *or more*) Ellen Dreiling

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(Sustaining Membership of \$100 or more) Ed Bradley

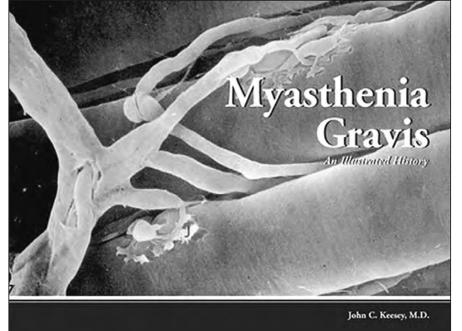
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(Contributing Membership of \$50 or more) Sally Yoshikawa

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You can now purchase this handsomely published and important account of MG's history at the price of \$25.00 (cover price is \$49.95). Sales tax approximately \$2.40 (for California residents only) will be added and \$7.00 for shipping and handling (add \$2.00 for each additional book).

Help publicize MG through the purchase of a book to donate to your library or hospital. Buy a book and give it as a gift to your doctor. We'll ship it to him or her with an enclosed card. It will be a gift much appreciated.

All proceeds from the sale of this publication will be donated to the Myasthenia Gravis Foundation of California for research and patient programs.

Please mail your check to:

Myasthenia Gravis Foundation of California 6055 E. Washington Blvd., Suite 350 Los Angeles, CA 90040

HONOR FUND AND MEMORIALS

Gifts to the Myasthenia Gravis Foundation of California are thoughtful remembrances which give deep satisfaction. Special events such as birthdays, anniversaries or other occasions may be appropriately commemorated through a gift to the Honor Fund. Tributes in memory of a relative or friend serve the living through the advancement of medical research, education and patient care. (This list includes honor and memorial gifts received from January 1, 2016 to October 31, 2016.)

KEY: Tribute/Honoree

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YOUR SUPPORT AUXILIARIES

CENTRAL COAST

Chair: Vicky Duniven

EAST BAY/HAYWARD

Chair: Bob Boike 2017 Meetings – 1:30 pm – Feb. 12, May 7, Aug. 6 & Nov. 5 at St. Rose Hospital, Hayward, CA. You will be notified by flyer.

FRESNO Chair: Id

Chair: Joy Kiser 2017 Meetings – MDA Office, Fresno You will be notified by flyer.

INLAND EMPIRE

Chair: Gail Myatt 2017 Spring & Fall Meetings at Kaiser Hospital, Riverside, CA You will be notified by flyer.

LANCASTER

No Chair

LOS ANGELES

No Chair

We are combining meetings at this time with San Fernando Valley Auxiliary. You will be notified by flyer.

LAS VEGAS

Chair: Joan Silverstein, Co-Chair: Cindy Yurek 2017 Meetings – 1:00 pm – Every other month. You will be notified by flyer.

ORANGE COUNTY

Chair: Lynne Krygier

PALM SPRINGS

No Chair

SACRAMENTO/STOCKTON

Chair: Joy Baird 2017 Meetings – 1:00 pm – Jan. 21, April 15, July 15 & Oct. 21. You will be notified by flyer.

SAN DIEGO

Chair: Katie Boyer 2017 Meetings – 1:00 pm – 2nd Saturday in Jan., March, May (luncheon), Sept. & Nov. You will be notified by flyer.

SAN FERNANDO VALLEY

Chair: Ed Cholakian 2017 Meetings – You will be notified by flyer.

SAN GABRIEL VALLEY

Chair: Marie Magrdchian

SANTA ROSA

Chair: Ron Crawford

SOUTH BAY/SAN JOSE

Chair: Terri Sessions

VENTURA

No Chair.

We are combining meetings at this time with San Fernando Valley Auxiliary. You will be notified by flyer

Plan to attend one of the Share groups located in your area. When you need to talk to someone who has MG, call the chair of your nearest group. Learn more about MG and share your experiences with other MG patients. Feel free to invite your spouse, family or friends to any of these meetings.

HAVE YOU MOVED? - ARE YOU MOVING?

PLEASE SEND YOUR NEW ADDRESS TO:

Myasthenia Gravis Foundation of California

6055 E. Washington Blvd., Suite 350, Los Angeles, CA 90040

Name	
Old Address	
New Address	
Effective Date	New Phone Number
Email	

CONTRIBUTE VIA HONOR FUND AND MEMORIALS

Whenever a birth, birthday, anniversary, graduation, or any special event occurs, mark the event with a donation to the Myasthenia Gravis Foundation of California in the name of the honoree who will receive a beautiful card honoring the occasion.

How about when a loved one has passed on and you want to remember him or her? Send a donation to the Myasthenia Gravis Foundation of California.

The donor will receive a donation acknowledgment receipt from the Foundation. Your name and the recipient's name will appear in the next newsletter.

And Speaking of Giving,

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there's another way: Via your Last Will and Testament and Trusts. Consult your lawyer and your accountant as to the various options you have to "do good" upon your death — lasting good to help pay for research, patient support, our MG clinics, etc.

Be sure to specify the Myasthenia Gravis Foundation of California as the recipient of personal or real property or a share of your estate's residue.