

A MESSAGE FROM THE PRESIDENT

By David Kohn



for future meetings to be held at this location, or other similarly enjoyable locations, with equally talented speakers.

On April 2nd, 2016 we hosted our 51st annual Founder's Dinner at the beautiful Beverly Wilshire Hotel. This year, we honored the incredible doctors and volunteers at our southern California clinics including UC Irvine, USC and UCLA. I am lucky enough to spend some time with the doctors from these clinics at our annual Medical Advisory Board meeting. Please rest assured that the doctors at these meetings are dedicated to improving the lives of MG patients by, among other things, sharing best practices with each other. These individuals and the professionals that work at each of the clinics make a difference in the lives of hundreds of myasthenia gravis patients every year. As a Foundation, we are proud to support them.

This year, I would also like to thank a special volunteer of the Foundation: Alice DeKoven. Alice is a special person. She has volunteered countless hours almost fifty years at the Foundation. For those who have attended our board meeting, Alice is the voice of fiscal responsibility, caring and the Foundation's "historian." She reminds the Board, and rightfully so, of our founder's (Mathilda Karel Spak) goals and legacy. She is an incredible lady who drives 100 miles round trip just to help manage the office's daily activity. We would not be the efficient organization that we are, without her.

As you hopefully know, I am always looking for ideas on how to improve our foundation. As such, if any of you have any ideas, feel free to contact me or our office anytime. Finally, *please remember the Myasthenia Gravis Foundation of California when making your non-profit charitable contributions.* Our organization appreciates your support, no matter how large your donation.

It's difficult to believe that we are already mid-way through 2016. I extend my best thoughts and personal wishes to MG patients for a happy and healthy year and thank our many dedicated volunteers for their generous contributions of time and talent.

As I write this message today, I am thinking about our unsettled world — the terrorist attack in Paris, the terrible tragedy in San Bernardino. There are many things to learn from such horrific events, but for me it is to *appreciate my life and the lives of the loved ones around me.* I'm reminded me that life can be taken away with a blink of an eye, whether it is a terrorist bomb, a careless driver or a disease. While myasthenia gravis can be debilitating, due to the much improved care from doctors, better drugs and patient education, most patients live long and fruitful lives. Now more than ever it is important to be thankful for our lives, the lives of our loved ones and for those individuals affected by myasthenia gravis, but continue to "fight the good fight" against the disease.

In October of 2015, the Foundation had its semi-annual fall patient meeting at the Westin in Pasadena. Yes — it was in Pasadena and not at the Commerce Casino. While after the meeting I had one patient tell me he missed all the cigarette smoke, the long walk from the parking lot along with the gambling (just a little joke), I am proud to say that it was one of our better attended meetings in recent years and I received a lot of positive feedback from patients afterwards. In particular, at the fall meeting we had an excellent doctor, Ty Cash, whose presentation was extremely well done and drew a lot of questions from patients afterwards. We expect to continue drawing excellent speakers such as Dr. Cash, who have hands-on experience treating myasthenia gravis patients. With that thought in mind, look

AUTOIMMUNE MYASTHENIA GRAVIS: Yesterday, today and beyond

By Luis A. Chui, MD



The first described case of myasthenia gravis (MG) is likely of a Native American Chief Openchanough who died in 1664 (reference by the Virginia Chronicle). The first documented clinical description was in 1862 by a prominent neurologist from Oxford, Dr. Thomas Willis. Since, one hundred and fifty three years has elapsed, numerous notably clinical and scientific contributions is achieved. The first significant one was in 1934 when Dr. Mary Walker reported her observations on the effectiveness of cholinesterase inhibitor (Neostigmine) in improving the symptoms of MG. Currently, a widespread use of similar medication (Pyridostigmine) is been used in practically all patients. The first thymectomy was performed by Dr. Blalock in 1937 in a patient with MG.

The concept of autoimmune mechanism in MG was first postulated by Dr. John Simpson from Glasgow, in 1960. He based his observations that MG shared common association with other autoimmune disorders such as thyroid diseases. However, not until 1973, Drs. Patrick and Lindstrom made a very significant contribution to the understanding of the cause of this disease. They injected purified acetylcholine receptors (AChR), a protein obtained from the electric organ of the eel to rabbits. The result was that they were able to reproduce a clinical picture of generalized muscle weakness very similar to MG. This observation was confirmed clinically by Dr. Marjorie Seybold. We are proud that Drs. Lindstrom and Seybold were active medical and scientific board members of the MG

Foundation of California. As a consequence of this achievement, the development of test to detect antibody to AChR was introduced. Now widely used and become one of the most valuable diagnostic test for MG.

Where do we stand today? Currently, we have made significant progress in broadening the diagnostic tools such as the development of newer antibodies like MuSk (Muscle specific kinase). This antibody is positive in about 40% of patients that are have negative antibody to acetylcholine receptors. An interesting observation is that patients that have Musk positive antibody MG, have a characteristic clinical presentation. They have predominantly early bulbar symptoms (difficulty with speech and swallowing) been more common in female and they do not respond to thymectomy and cholinesterase inhibitors.

About 10-15% of patients with symptoms of MG are considered to be "seronegative", however, about 3% to 5% reacts with a lipoprotein receptor-related protein4.

The main approach in the treatment of autoimmune MG is immunosuppression in which Prednisone is still the preferred initial medication. Other options in cases of refractory conditions includes a number of agents such as azathioprine, cyclosporine, methotrexate, etc. In an event of MG crisis, removal of antibody with plasma exchange or immunomodulation with intravenous immunoglobuline is the accepted treatment.

Recently, the use of monoclonal antibody (Rituximab) targeting to B cells, is reported with very good results, especially in anti MuSk Ab. MG.

What is the future? The amount of research done in the past decades have increased significantly our knowledge and understanding of MG. Newer and novel modalities of treatment such as complement inhibition, induction of tolerance to AChR (T cell vaccination, vaccination with AChR cytoplasmic domains of antigen specific), skeletal muscles activator and stem cell transplantation, especially in late onset severe MG patients among others.

In closing, we believe that the Myasthenia Gravis Foundation of California is committed to support further research, education and patient care.

In Spite of It All – A Good Life

By Jacqueline Wallace



from an energetic teenager into a listless one. Constantly weak and tired, I had increasing difficulty talking, chewing, swallowing, and keeping my eyelids open. It was hard to grip things with my hands, lift my arms to comb my hair, or carry my schoolbooks. My arms felt like lead weights.

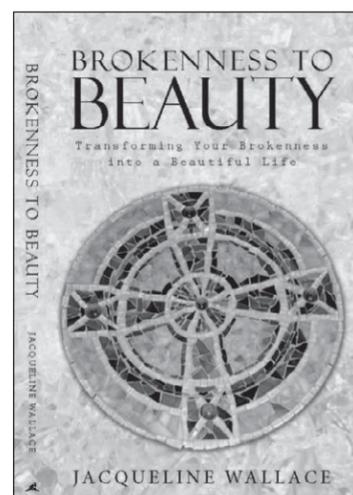
I was fifteen years old.

Over the next six months, my health declined rapidly. My parents made the difficult decision for me to have a thymectomy as a treatment of last resort. They were told I might not improve or even survive surgery.

Though I almost didn't survive, God mercifully brought me through and my strength improved enough for me to return to high school a few months later. I later graduated and attended college in another state.

A few years later, I married and had two healthy sons. It wasn't easy caring for children and keeping a home. I was exhausted and weak all the time. I struggled with double vision and weakness in my arms and hands which made pinning diapers (yes, real cloth diapers!), lifting babies and washing dishes daunting tasks. For a time, I remember I stopped driving our car because of double vision and the weakness of my arms. My husband did double duty by taking on many of my everyday tasks to help me.

Through the years I had several myasthenic crises. In the last one, the worst, I had to be intubated without anesthesia as I lay on a gurney on my way to the ICU. I was on life support for about ten days because of the flu. I am thankful I've not had a crisis since that one thirty years ago.



A few years ago, I went through breast cancer treatment and halfway through chemotherapy, I began to get stronger. To this day, the myasthenia is in remission and I am

much stronger now than I was most of my life, for which I am very grateful. I've lived a full and rewarding life in spite of the difficulties of MG.

My story is told in my recently published book "Brokenness to Beauty: Transforming Your Brokenness into a Beautiful Life." It is available on Amazon and other online outlets.

I can't say the word. I try again, attempting to read my report to my eighth grade classmates. It's not that I have trouble reading, I can't say the word. Every time I get to "television," it comes out sounding strange to my ears. Why can't I say it? What's wrong with me?

This is one of the first incidents of physical weakness that stands out in my memory. It would be two years of increasing weakness before I heard the words, "I know the diagnosis."

The neurologist told my parents I had a rare disease called myasthenia gravis. It sapped my strength and energy: in one year, I deteriorated

A NEW LOOK

The Myasthenia Gravis Foundation of California has launched its new website. It is still a work in progress and you may expect changes and additions to be made on an ongoing basis. Also, please offer any suggestions or comments that may enhance this site, especially as an information resource for newly diagnosed MG patients. You may visit our website at www.myasthenia-ca.org.

ANNUAL MEETING

Fifty MG patients and family members gathered at Crowne Plaza Hotel at Commerce Casino for the summer meeting held on Saturday, June 21, 2015.



Sharon Yegiaian, M.D., Neurologist, Clinical Faculty Professor at Huntington Memorial Hospital Pasadena & U.C.L.A. gave a presentation on Myasthenia Gravis: Our Current Understanding. She began her presentation discussing normal neuromuscular junction function and explained the differences in neuromuscular junction function in patients with autoimmune MG. Dr. Yegiaian briefly went through diagnosing MG, the different types of MG and the common treatments prescribed to MG patients. She further explained the three different tests used to diagnose MG. The first test she talked about was electro diagnostic testing and explained how there is greater sensitivity with the more effected and proximal muscles that are targeted with this test. She also covered repetitive nerve stimulation and single fiber EMG, the latter being the most sensitive test for diagnosing MG. Dr. Yegiaian also mentioned the latest medications for MG, specifically mycophenolate mofetil, citing that it is less toxic than other drugs used to treat MG and azathioprine.

She concluded her presentation with ways to be a proactive patient (detailed below). The meeting was capped off with a raffle drawing and refreshments of coffee, tea and cookies.

How to be a proactive MG patient:

- Educate yourself and ask your neuromuscular specialist any questions you have
- Avoid medications that can worsen symptoms
- Avoid unnecessary surgeries
- Get tested for sleep apnea
- Go to an ER immediately if you are having trouble: swallowing, lifting your arms and/or breathing

THE UPS AND DOWNS OF MG

By Adell Pope



First symptoms occurred May of 2006 when I was camping in beautiful Yosemite. My body was feeling heavy and I was tired even though it wasn't even 1:00 o'clock in the afternoon yet. I didn't know what was going on (looking back I did have stress). Weeks later, on vacation in Las Vegas, I didn't get enough rest and I was extremely tired. At a fair, the smell from the grill burned my eyes. I took a hot bath, got into bed and an unbelievable amount of perspiration just started pouring off of me. The next morning my eyes were stuck together; my brothers complained about my driving. Looking back, I now realize that my eyelids were drooping.

I used Echinacea because I was under stress (which stimulates the immune system, probably not a good thing for me at the time). My doctor thought I had a sinus infection and gave me an antibiotic which exacerbated my MG weakness. I got better. But a few days later, driving eastbound towards the sun, I was able to get to work but, once there, I started walking into walls. Another doctor thought I might have a viral and eye infection. She referred me to an ophthalmologist who wanted me to have an MRI. He thought something could be pressing against my brain stem or perhaps I might have had a stroke. The MRI was okay so he sent me to a neurologist. Initially, this doctor thought I might have Lyme disease because I had been around deer. Blood work revealed that my Acetylcholine

Rec Binding was 1.5 H. I lost muscle tone in my arms and thighs, found it hard to eat, comb my hair and push up from sitting.

I got diagnosed on Halloween in 2006; myasthenia gravis. My aunt had myasthenia gravis. I started crying and asked the doctor to write the words down. I was prescribed pyridostigmine and a high dose of prednisone. Although I got better, I couldn't sleep and needed sleeping pills. In December, I had double vision but my neurologist said I could drive to work but I took the train. I changed neurologists. My second opinion was in 2007 because I didn't want to have this disease. That doctor gave me Imuran and ordered blood work often because of the drug's powerful side effects. I chose to stop taking the Imuran and went back to prednisone.

In June 2009, I went into remission, my neurologist started decreasing my medicine. That December, I experienced involuntary muscle movements and was diagnosed with dystonia in the summer of 2010. My double vision came back in May of 2012. I was taking pills with a form of magnesium in them (not good) but when I stopped taking them, my vision got better.

Between 2006 and 2012, I saw ten neurologists. In May of 2015, I started having blurred vision and double vision so my neurologist upped my pyridostigmine and prednisone. We discussed IVIG and I attended a support meeting, sponsored by the MG Foundation, to learn more about this treatment. At the meeting, I picked up an MG Survival Guide, read and reread it. I learned to avoid chemical cleaning agents and so I stopped using them at home; my vision got better.

My suggestions to other patients - if you have problems, read and reread the MG Survival Guide, attend MG support group meetings to give and get support. Today, I'm doing awesome, thanks to a higher power and my medication. Thank you to the Myasthenia Gravis Foundation of California for what you are doing for us patients. It's an honor to write this article for the MG News now in my ninth year of being diagnosed with MG, once again, at Halloween-time.

2016 ANNUAL MEETING

Sunday, JUNE 26, 2016 • 1:30 p.m.
Westin Pasadena Hotel, 2nd floor
191 N. Los Robles Avenue
Pasadena, CA 91101

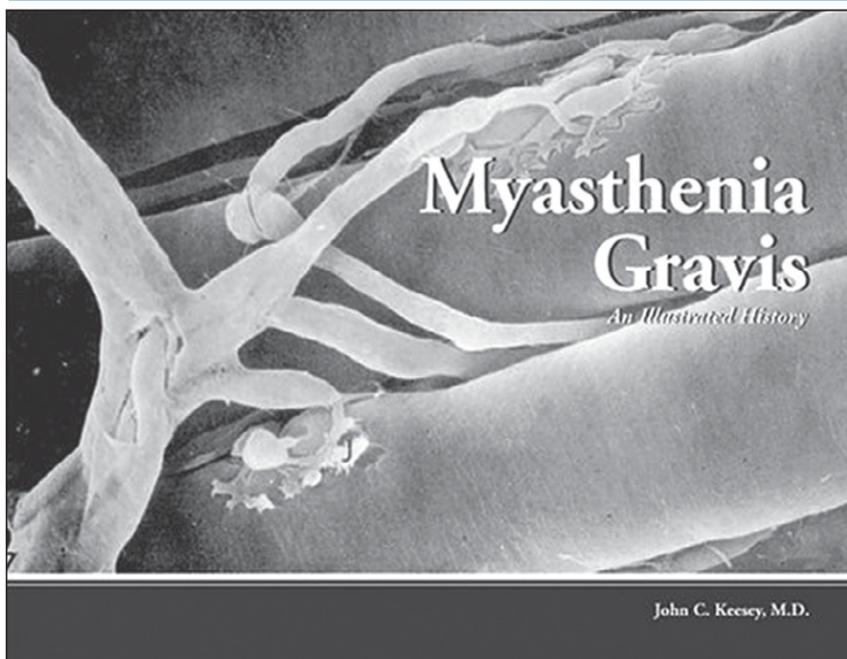
SPEAKER:

Jeffrey Rosenfeld, Ph.D., M.D., FAAN
Professor of Neurology, Director, Neuromuscular ALS/MND Programs
Loma Linda University Medical Center

TOPIC:

**Advances in Myasthenia Gravis and
Current Treatment Modalities**

MG BOOK OFFERED AT 50% OFF



Myasthenia Gravis: An Illustrated History by John C. Keeseey, M.D., is beautifully illustrated and highly readable and tells the unfolding story of a medical condition which, until 1879, went largely unrecognized by the medical profession.

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

The Mathilda Karel Spak MG Clinic

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.



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MYASTHENIA GRAVIS NEWS
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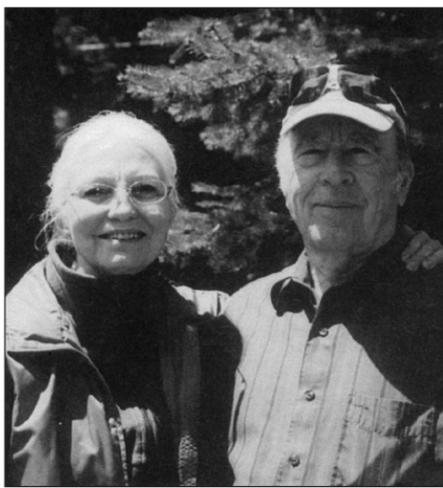
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ALL IN THE FAMILY

By Susan Ericksen Meek

Back in the Fifties, when I was a little girl, my mother was frequently sick. When she started to use a wheelchair, she explained that she had a rare neuromuscular disorder called myasthenia gravis.



Not too long after that, we started attending MG support meetings. My mother was a born leader and organizer. It would not surprise me if she initiated that group. We met lots of interesting people with MG or those related to MG patients. There were guest speakers including neurologists from the San Francisco Bay Area where we lived. We learned a lot about MG.

My mother told us that she had a cousin back East who also had MG. How odd that such a rare disorder occurred twice in one family. Then odd became odder. When I was twenty years old, I started to experience random weakness. I married at twenty-one and six months later, found myself in a full-blown MG crisis. I was put in a hospital in San Francisco where a neurologist made my diagnosis and worked out my medication. I took Mestinon for 17 years.

Dr. Monica Roach

By Nancy Farrand

In 2015, we lost Monica Roach, a dedicated friend of the Myasthenia Gravis Foundation of California for over 30 years. Sadly, this amazing woman supported our organization for personal and tragic reasons. Her beautiful daughter, Patty, succumbed to very severe MG at a young age and the family has been heartsick by her loss.

Monica Roach was the kind woman that saw a problem and always wanted to do her best to solve it. She knew too well the plight of families whose children were battling MG. As a volunteer, she helped by listening to others at our patient meetings and, instinctively, knew the right thing to say when interacting with MG patients or when providing encouragement to their families. After Patty's death, Monica Roach took it a step further and returned to school to earn her doctorate in grief counseling. This decision broadened her scope and ability to help others with similar types of loss. In addition to our foundation, Dr. Roach helped many other organizations, especially those focused on children.

Christmas was an important time for Dr. Roach; she was very concerned for children who needed extra care and attention within her community. She provided toys to fill stockings and kept two-dollar bills handy to give to children who were being especially polite.

What I liked most about Dr. Roach was her joy at being a mother. An avid cookie baker, she made cookies for special events or for no special event in the Roach household; the youngsters always knew that there would be treats.

I will deeply miss Monica Roach and our foundation will always remember her for the loving, giving, caring person that she was. Every year, at our annual gala for medical research, our program book included a special tribute page to Patty. Dr. Roach's strong support of the MG cause will forever be appreciated, sorely missed and never forgotten.

FALL MEETING



Forty-five MG patients and family members gathered at the Westin Hotel in Pasadena for the fall meeting held on Sunday, October 25, 2015. Dr. Tiyonnoh Cash, Neurologist and Assistant Professor at UC-Irvine was the speaker and her topic was "Myasthenia Gravis: What's New?" She began her presentation with an overview of MG: its history, who is most at risk for developing the disorder and symptoms. She went on to discuss the cause of the disease using a detailed diagram comparing the neuromuscular junction of a normal patient to one of an MG patient. Patients were deeply interested seeing what was occurring in their bodies on a cellular level. Dr. Cash then segued into a discussion of how MG could cause other autoimmune or non-immune disorders. She concluded her talk with updates on the disorder and ongoing research projects, highlighting the trials at UC Irvine. Ending her presentation, she opened the floor to questions. The meeting ended in tradition with a raffle drawing and refreshments.

MG TRAVEL TIPS

Here are a few traveling tips for those with MG to help make the trip safe and pleasurable.

- 1. Talk with your doctors:** Discuss your medical condition and any possible risks or challenges.
- 2. Research your destination:** Choose a destination you'll be physically comfortable with; consider the level of planned activity and accessibility of venues; check on any local conditions that might present a risk; ascertain availability of MG knowledgeable medical assistance. Call the MG office before you leave for names of local knowledgeable doctors and hospitals. Browse the internet for travel assistance to/in the planned locale.
- 3. Consider the stress of traveling:** Plan accordingly. Be prepared. Buy your tickets in advance, arrange your ride to the airport or station, figure out what you're going to pack, and arrange help with the luggage. There could be delays, missed connections, baggage to schlep, or long distances to walk. Schedule two hours between connecting flights. Request a bulkhead seat. Avoid waiting in lines – get ticket and boarding pass ahead of time. Pace yourself, plan activities at peak energy times, schedule downtime. Buy attractions tickets ahead of time that allow you to bypass long lines. Plan resting time on the day of arrival and the day of returning home. Travel with a companion who knows about and is understanding of your MG. Know your limitations and don't be shy about communicating what you can and cannot do. Consider getting a handicapped placard for your car.
- 4. Getting around:** Use handicap transport in airports; reserve wheelchairs and electric scooters at destinations; use luggage with wheels; arrange for pre-checking of luggage; use curbside check-in; pack as much as possible in checked luggage and carry only a lightweight carry-on; take extra cash to use for taxis and travel expenses to avoid more challenging transportation.
- 5. Medications:** Always carry them in your carry-on; keep them in the original prescription bottles; carry extra meds in case you can't get unexpected, necessary refills; carry some on daily excursions; keep them in a dark, cool, non-humid place. The Transportation Security Administration (TSA) requires travelers to inform TSA staff at the beginning of the security process if they are carrying liquid or injectable meds.
- 6. Documents to carry:** Doctors' notes/medical history; list of medications; allergy information; emergency wallet card; medical alert jewelry; a description of MG and what to do in a MG emergency to give to first responders and hospital emergency rooms; doctors' phone numbers; 'in case of emergency' phone numbers.
- 7. IVIG:** Have a treatment a few days before leaving; have your neurologist help arrange treatments at your destination if needed.
- 8. Jet Lag:** Drink plenty of water to stay hydrated; cut down on alcohol; eat light; nap. Ask your neurologist about taking any sleep aids. Be well rested before your trip.
- 9. Heat and Health Tips:** Carry a battery-operated fan, take cool showers, use ice and a cool cloth on face, neck and pulse points. Avoid infections by washing hands frequently; using anti-microbial hand sanitizer; avoiding crowds and people coughing; and avoiding unclean places, tap water, and dirty toilet facilities. Consider drinking bottled water. Attend to nausea and diarrhea flu-like symptoms quickly. Carry a first aid kit and insect repellent and use unscented make-up, soaps and deodorants.
- 10. Buy Travel Insurance:** Make sure it covers pre-existing conditions, especially any costs for MG. Does it include trip cancellation and evacuation insurance?
- 11. Important websites:**
TSA (<http://www.tsa.gov/traveler-information/travelers-disabilities-and-medicalconditions>);
Amtrak (<http://www.amtrak.com/making-reservations-for-passengers-with-a-disability>).

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For years now, the Myasthenia Gravis Foundation of California has been supported through the Ralphs rewards Community Contribution Program.

As a Ralphs rewards member, each time you shop and swipe your Ralphs card, the MG Foundation of California automatically receives a rebate.



If you would like to contribute to the fundraising of the MG Foundation, please register or re-register for the new term on www.ralphs.com. And please encourage your family and friends to do the same.

Thank you for your continuing support and happy shopping!

Watch for the 2016 Membership Drive Starting August to December 31, 2016

Your membership provides patient services such as support groups, physician referral, MG clinic, drug bank, MG News & other publications.

You have a chance to win the following Donated prizes:

\$500 Cash

\$250 Gasoline Gift Certificate

iPod

\$100 Target Gift Card

Readers are encouraged to correspond directly with members of the Medical Advisory Board of the Myasthenia Gravis Foundation of California with respect to questions or comments related to MG.

Please send your correspondence to the Myasthenia Gravis Foundation of California.

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 June 1, 2015 to December 31, 2015.)

KEY: *Tribute/Honoree*
Donor

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GIFTS IN HONOR OF...

Sandra Archer "Happy Holiday Season" Nikki & Howard Applebaum	Mair David Vivian E. David Mr. & Mrs. Gary Friar & Family "Happy Holiday Season" Nikki & Howard Applebaum	Mr. & Mrs. Gregory Kotanjian "Happy Holiday Season" Nikki & Howard Applebaum	Mona & Fred Oken on their 35th Wedding Anniversary Billie & Ted Harris	Mr. & Mrs. Harry Sasaki "Happy Holiday Season" Nikki & Howard Applebaum
Virginia Bastone Martie, Brendan & Ayaz	Future Research & our Son The Hanchett Family	Larry Lane on Father's Day Russell & Mindy Lane	Yeda Richman "Happy Holiday Season" Nikki & Howard Applebaum	Mr. & Mrs. Sam Scarlett "Happy Holiday Season" Nikki & Howard Applebaum
Richard Beyer, M.D. Joan C. Weiss	Brendan Johnson Jeanne Legg	Mr. & Mrs. Wayne Lee "Happy Holiday Season" Nikki & Howard Applebaum	Arthur Rosen Howard & Nikki Applebaum	Dr. Zuhair Yahya "Happy Holiday Season" Nikki & Howard Applebaum
Robert & Eleanor Boike Steven & Joan Boike	Dr. Bryna Kane "Happy Holiday Season" Nikki & Howard Applebaum	Jon Melichar "Happy Holiday Season" Nikki & Howard Applebaum	Mr. & Mrs. Arthur Rosen "Happy Holiday Season" Nikki & Howard Applebaum	Donald Trump Randall Ruegge
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GIFTS IN MEMORY OF...

Norman R. Anderson Beatrice Anderson	Michael Hannah Paul Hannah	Louise Powers Merrifield William Merrifield	Dr. Monica Roach and Patty Roach Michaeline Roach Carmie Falabrino	Ibi Schewatz Rita Vanlierop
Toby Brown Elizabeth Brown	Gene King Maxine King	Mitch Howard & Nikki Applebaum	Margaret Mary Sasse Clair Pete	Traci Bob & Sharon McClelland
Stella Christenson Kathryn Lee	Richard E. Lewis Melisa Pangilinan	Dr. Monica Roach Myasthenia Gravis Foundation of California David Kohn, President Board of Directors & Staff	Mathilda Karel Spak Melisa Pangilinan	Marie Verheyen Ruthann Schaeffer
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Grace Ehrlich Irwin Ehrlich	Sandra Love Valerie Morgan			Bruce Yurman Rosie Yurman

YOUR SUPPORT AUXILIARIES

CENTRAL COAST

Chair: Vicky Duniven

EAST BAY/HAYWARD

Chair: Bob Boike
2016 Meetings –
Aug. 7 & Nov. 6
at St. Rose Hospital, Hayward, CA.
You will be notified by flyer.

FRESNO

Chair: Joy Kiser
2016 Meetings – MDA Office, Fresno
Sept. 6

INLAND EMPIRE

Chair: Gail Myatt
Fall Meeting in October or November
2016 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
2016 Meetings – Oct. & Dec.
You will be notified by flyer.
every other month

ORANGE COUNTY

Chair: Lynne Krygier

PALM SPRINGS

No Chair

SACRAMENTO/STOCKTON

Chair: Joy Baird
2016 Meetings –
July 16 & Oct. 15
You will be notified by flyer.

SAN DIEGO

Chair: Katie Boyer
2016 Meetings –
2nd Saturday in Sept. & Nov.
You will be notified by flyer.

SAN FERNANDO VALLEY

Chair: Ed Cholakian
2016 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 _____

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,

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 Drug Bank, 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.