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The last 6 months have been exciting for those on the forefront of the fight against Alzheimer’s disease. International, national and state support for this battle is growing. The London G8 summit in December focused on Alzheimer’s disease. The United Kingdom is leading the way in managing this disease and integrating those with memory impairments into modern society. Four goals emerged from this meeting of politicians, economists and health ministers. First, increase research funding for Alzheimer’s disease to 1% of the medical costs of the disease. In the United States, this would mean $2 billion annually. A second goal is increasing the diagnosis of older adults with memory impairments to 50% of those affected. Britain already achieves this and aims to reach two-thirds by the end of the decade. A third commitment is to expand participation in clinical research studies to 10% of those with memory impairment. This would increase 10-fold the numbers in clinical studies in the United States. Fourth, increase awareness about memory disorders to produce a dementia-friendly society. Britain has instituted education programs for police, firemen, pharmacists and others who interact with the general public on how to identify and interact successfully with memory-impaired individuals. Prime Minister David Cameron sported a ‘Dementia Friendly’ button during the summit, indicating he had passed the course. These are lofty but tangible goals, which the Byrd Institute will make dedicated contributions to help meet.

The United States passed a two-year budget bill that contains roughly $100 million more for research on Alzheimer’s. This increase of 20% over current funding (which has been eroded over 10 years of stagnant or declining funding), while short of the $2 billion goal, is a welcome commitment to getting Alzheimer’s research supported at a level commensurate with its medical and societal impacts. Additionally, the NIH announced an Accelerating Medicines Partnership with 10 major pharmaceutical companies and 8 nonprofits, and $130 million of the $235 million committed to this effort will be devoted to Alzheimer’s disease. The Florida legislature will begin implementing the suggestions of the Purple Ribbon Task Force Report during this legislative session. This sweeping document makes multiple suggestions on how to reduce the impact of Alzheimer’s on Floridians. One of these proposals is to start, for the first time in 5 years, a grants program to support Alzheimer’s research. Please contact your state legislators and share with them your opinions about Florida’s needs regarding Alzheimer’s research funding.

Global support, statewide progress.

A personal mission

Dr. Dan Lee hopes to advance treatment for Alzheimer’s and Parkinson’s diseases in tribute to his beloved grandfather.
Seeking new clues in damaged brain pathways

In his lab, Lee focuses on how substances that cause inflammation in the brain may contribute to Alzheimer’s and Parkinson’s diseases. More importantly, he’s looking for ways to prevent or reverse the damage.

It appears that Alzheimer’s, the most common form of dementia, and Parkinson’s, which affects mainly neuromuscular movement, but also dementia, may share some common traits in brain chemistry. In a study he began last year with laboratory mice, he hopes to shed new light on what role, if any, a particular enzyme (arginase-1) plays in brain pathways in the brain.

“What we find is that as you age, the inflammatory response in the brain significantly changes. We’re trying to understand how that influences Alzheimer’s and Parkinson’s, because both are considered age-related diseases,” he says.

Lee is hopeful that some experimental drugs in clinical trials may offer new ways to treat Alzheimer’s disease in coming years.

“I can see where, maybe in the next five to 10 years, there might be a vaccine for the protein deposits that are a component of Alzheimer’s.”

Praise for his work

It didn’t take long for the personable and stylish researcher with the inquisitive mind to be noticed shortly after joining USF nearly a decade ago. He won the university’s “Outstanding Presentation Award” in 2017.

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While the younger Lee was growing up in Coatesville, Pa., his grandfather, a general practitioner, operated his own medical practice in the same town and was the sports doctor to local high school athletes.

“Everyone knew him because he would patch up their kids,” Lee recalled.

The two enjoyed talking sports. In his younger days, Lee remembers his grandfather giving him a dollar or more every time he paid him a visit. The two grew closer when Lee’s father (Daniel Lee Jr.) built a home next to his father’s on several acres the eldest Lee owned. The three generations interacted regularly.

The professional achievements of Lee’s grandfather, in turn, inspired other family members. Lee’s father became a physician assistant, and his father’s brother served as a physician in the military. Among his siblings, Lee notes with pride that one of his sisters, who also has a doctorate of philosophy in pharmacology, works for the U.S. Food and Drug Administration, his other sister received her doctorate of pharmacology (PharmD) this spring.

Thanks in part to their trailblazing grandfather, their mission to improve health care has become a family affair.

He expects to complete the study, funded by the Alzheimer’s Association, in 2017.

“We’re looking at the pathways of inflammation and how they influence proteins involved in Alzheimer’s and Parkinson’s,” he says. “If some pathways are common in both diseases, then we might be able to design drugs that might alleviate both conditions. There are actually a lot of overlapping proteins and dysfunctional pathways in Alzheimer’s and Parkinson’s diseases.”

He’s also investigating what role aging plays in damaged pathways in the brain.

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“He’s very charismatic and earnest, and when you do experiments together, you see another side of him where he’s very particular and makes sure everything is done right the first time and accurately,” Selenica says.

“He has an eye for details and seeing things that others may not see,” she added.

“These details can make or break your experiment if you miss them.”

No doubt Lee’s grandfather, who was also named Dr. Daniel Lee, would have been proud.

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Thanks in part to their trailblazing grandfather, their mission to improve health care has become a family affair.
First the good news: There is strong evidence that some cognitive training programs can help people’s brains function better.

Now the not-so-good news: Many researchers believe our mental quickness typically begins to gradually decline after the age of 25.

Need a moment to recover from that blow to your sense of wellbeing?

The fact that we decline mentally and physically as we age is nothing new. What is new, however, is that the Byrd Alzheimer’s Institute at the University of South Florida in Tampa is helping people regain some of their mental and physical capabilities so they can maintain their independence longer, including their ability to drive safely.

The Institute has coupled a state-of-the-art driving simulator that measures driving skills with computer-based training programs that can boost the brain’s ability to process and respond to multiple visual stimuli, necessary for safe driving. Dr. Jerri Edwards, an associate professor and researcher with USF’s School of Aging Studies, explains that it’s all about improving drivers’ awareness of their surroundings and their ability to think quickly.

“I teach ‘Psychology of Aging’ to my undergraduate students, and I try to teach them that not everything declines with age and that even if you have experienced decline, we can reverse or prevent decline in our lives,” she says.

Although our minds tend to slow down as we get older, everyone ages differently – so age itself isn’t the best predictor of driving fitness, Edwards says. Processing speed, or mental quickness, is more important for recognizing and reacting to unexpected situations behind the wheel. That’s why she believes a cognitive screening offers a better predictor of driving ability and crash risk than age alone.

Long-term gains from some ‘brain exercises’

Edwards was a co-investigator in a groundbreaking study of nearly 3,000 people over the age of 65 whose driving skills were monitored after they received different forms of cognitive training. The 10-year national study, first published in 2002 in the Journal of the American Medical Association, found that people who received training to improve their memory experienced more widespread and long-term gains than those whose drills focused on improving their mental quickness.

Improving mental quickness

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She explains that the best exercises to improve mental quickness are computer programs that challenge the brain while constantly adapting to the user’s performance.

The Institute has introduced a computer-based program called the “Useful Field of View” to assess older drivers and identify those who need training to hone their mental quickness by observing and reacting to multiple distractions, similar to the challenges of driving.

One study showed that those who received 20 hours of training through the brain fitness program to boost their brainpower continued to be better drivers 18 months later than another group that received 20 hours of a standard driving simulation course.

Dr. Jerri Edwards, associate professor, USF School of Aging Studies

A state-of-the-art driving simulator and innovative training to improve brain function are allowing some older drivers to keep their car keys longer.
“Our brains have the ability to change and improve – it’s called neuroplasticity,” says Byrd occupational therapist Lori Grismore, who provides the training. “Our brains have the ability to strengthen, just like our muscles.”

Following a doctor’s referral, Grismore performs a multidisciplinary driver skill evaluation utilizing state-of-the-art approaches and technologies that range from self-assessment to cognitive evaluation, vision and range of motion, simulated driving scenarios, and when appropriate, a behind-the-wheel experience.

As a therapist, she can also draw upon several other techniques to help people remain independent behind the wheel – and in other aspects of their everyday lives.

Range-of-motion and strengthening exercises can improve flexibility, dexterity and coordination when operating the steering wheel and the gas and brake pedals. Adaptive devices, including special mirrors, can help them monitor their surroundings better. And Grismore isn’t shy about recommending that older adults limit their driving by using only familiar neighborhood roads and avoiding interstate highways and night driving.

She knows that driving is important to people’s quality of life as they age. But she also doesn’t want anyone to jeopardize their own safety or endanger others on the road if their cognition and reaction times aren’t good enough, despite her rehabilitation efforts.

“Not everybody improves enough to be safe enough on the road again, but some of them do,” she says. “The brain is different in everybody. Sometimes it does amazing things, and sometimes it doesn’t – Unfortunately, by the time people come to me for evaluation, some of them are really having trouble with their driving skills. There should be some way of getting them to me earlier.”

Grismore points out that there are many other ways to get around for people who should no longer be driving.

“As an occupational therapist, one of the things I can do is teach them other means of community mobility; including how to use the bus system or taxi services, or senior programs that will take them to doctors’ appointments and things like that. Sometimes people are worried about the cost of taking a taxi or paying for a service, but if you think about it, you don’t have to pay for gas and for car insurance anymore, so that kind of offsets the costs and makes these other methods more affordable.”

Online program can be done at home

Edwards says that even people with mild cognitive impairment can benefit from cognitive training programs, but those with more advanced dementia are unlikely to do so.

Following a doctor’s referral, Grismore uses the driving simulator to perform a comprehensive driver evaluation. The evaluation is not covered by Medicare; but if Grismore determines that the person has sufficient skills and would likely benefit from online cognitive training and/or other therapies at the Byrd Institute, the retraining is often covered substantially or entirely by government or private insurance programs.

A similar computer-based program is available commercially that can help people improve their driving-related mental skills at home, Edwards added.

BrainHQ, marketed by Posit Science, puts users through a series of self-paced exercises to improve their observational skills and reaction time. Edwards notes that she was hired by the company as a consultant to help validate the training program’s effectiveness, but she no longer has any financial ties to the company.

“You need at least 20 hours of the home-based program to benefit from online cognitive training and/or other therapies at the Byrd Institute,” Grismore says.

A spouse or parent should no longer drive if he or she:

• Gets lost in familiar places
• Does not comprehend traffic lights or signs
• Has poor judgment of distance (turns too wide or too tight, or runs over curbs)
• Doesn’t react, or reacts too slowly, to emergencies
• Makes poor decisions in traffic (does not yield right-of-way, changes lanes without looking or signaling, tailgates, slams on brakes)
• Drives too slow or too fast
• Becomes easily confused or agitated while driving
• Takes too long to come back from a familiar shopping trip
• Confuses the brake and gas pedals
• Doesn’t react, or reacts too slowly, to emergencies
• Can no longer drive defensively or anticipate potentially dangerous situations
• Has unexplained scratches or dents on the car, garage or mailbox
• Slows down or stops in traffic for no reason
• Has difficulty processing multiple stimuli (observing traffic signals, pedestrians, construction, road signs, other cars, etc., simultaneously)

For more information about receiving a driving assessment or retraining opportunities at the Byrd Institute, call (813) 396-0728.

The following websites offer more information on this subject:

From the Alzheimer’s Association:
www.alz.org/living_with_alzheimers_driving.asp

“A Practical Guide to Alzheimer’s Dementia and Driving” produced by The Hartford:
www.thehartford.com/alzheimers

Dementia and Driving: When to Stop

When is it time for someone experiencing memory problems to give up driving for their own safety and the safety of others on the road?

Chances are a person with Alzheimer’s disease does not fully comprehend their own situation, making it even more critical for caregivers, health care professionals, family members and friends to intervene.

Sometimes a caregiver will act as a “co-pilot” and give the driver directions, but that’s not good enough.

The driver must be able to independently react to other cars, understand road signs and traffic lights, and obey traffic laws.

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Q & A with Lori Grismore, OTR/L, occupational therapist

As an occupational therapist for nearly two decades, Lori Grismore has helped people regain skills useful for everyday living. Since joining the USF Health Byrd Alzheimer’s Institute in Tampa a year ago, her focus has been on geriatrics, exercise and physical wellness. The Ohio State University graduate with a bachelor’s degree in occupational therapy is a member of the American Occupational Therapy Association, the Association of Driver Rehabilitation Specialists, and the Taoist Tai Chi Society. We wanted to know more about her work in addition to helping rehabilitate people’s driving skills (which is covered elsewhere in this issue).

Q: Why is physical decline often associated with mental decline?
A: When a person has mild-stage Alzheimer’s disease, they begin to perform their daily activities more slowly, they may get lost, and family members begin to recognize memory problems. As the disease progresses to a moderate stage, there is increased memory loss and confusion that interferes even more with the ability to be active in leisure, self care, and home management activities. This decrease in activity can contribute to physical decline, including decreased balance, endurance and strength, and it can lead to falls.

Q: What role do mental and physical exercises play in slowing or reversing these setbacks as people age?
A: We know that exercise, if done regularly, will increase blood flow to the whole body, including the brain. With exercise, our muscles are able to become longer and stronger, and they develop increased endurance. When we exercise our brain, we see benefits such as faster processing speed, improved memory and an increased ability to have divided and selective attention.

Q: Aren’t you also an advocate of tai chi? Can this help people with Alzheimer’s disease, Parkinson’s disease or other neurodegenerative disorders?
A: Tai chi is a Chinese martial art that includes repetitive practice of a series of slow, self-paced movements focusing on form and deep breathing. Studies have shown that tai chi can improve balance and reduce falls in seniors or others with disabling diseases.

Q: Tell us about “LSVT BIG™” (the Lee Silverman Voice Treatment) and how it may help people with Parkinson’s disease.
A: I recently became certified to provide LSVT BIG™, which is an exercise approach that was modeled after the principles of LSVT LOUD™. One of the biggest physical problems people with Parkinson’s disease have is bradykinesia, or extremely slowed movements. LSVT BIG™ is a treatment protocol that has been documented by research to improve walking speed with bigger steps, improve balance, and increase trunk rotation.

Q: You also teach home safety and how to prevent falls, because even a simple fall can have serious consequences for people with declining mental and physical abilities. What two or three things would you like to emphasize about home safety?
A: Removing clutter and widening walking pathways are simple ways to increase home safety and prevent falls. Decreased vision often comes with aging, so lighting becomes very important in the home. Installing lights in typically darker places, installing grab bars near the tub/shower and toilet, and offering a place to sit for bathing and dressing are all simple modifications to help increase home safety.

Q: What do you hope your patients will benefit from the most through their occupational therapy?
A: Every patient who comes to me for therapy will have different needs and goals. Although my approaches will differ as much as the patients themselves, the ultimate goal is that they are able to maintain their independence in the activities they desire for as long as possible.

I want patients and their caregivers to be able to say that they have a better quality of life.
Actor and comedy writer Seth Rogen and his wife, actress/screenwriter Lauren Miller know there’s nothing funny about Alzheimer’s disease. But they’re not above using comedy (and a few other tricks up their sleeves) to help wipe out the memory-robbing disease that afflicts more than 5 million Americans — including Miller’s mother, who cut short her career as a public school teacher five years ago because of worsening dementia at the relatively young age of 57.

Rogen, perhaps best known for his co-starring roles with Barbra Streisand in the 2012 movie “The Guilt Trip” and with Katherine Heigl in 2007’s “Knocked Up,” gets serious when he talks about the disease’s toll on individuals and their loved ones.

“It’s just a bummer,” says the 32-year-old Rogen, who has watched his mother-in-law grow increasingly unaware even before her diagnosis at the age of 55.

The anguish has been even greater for his wife.

“Unfortunately for me, Alzheimer’s didn’t begin with my mom’s diagnosis,” says the television and film actress. “My grandfather [on her mother’s side] passed away from Alzheimer’s when I was 12, and my grandmother [also on her mother’s side] passed away from dementia when I was 18, so it’s been a part of my life for as long as I can remember.”

Despite the challenges of their high-profile careers, the Hollywood couple have established a nationwide fund and organized charity events that raised close to $1 million in the past two years to combat the disease and support the estimated 15 million unpaid caregivers nationwide. And they’ve got even bigger plans this year.

**The Byrd Institute’s supporting role**

Miller’s parents, Scott and Adele Miller, who celebrated their 40th anniversary last fall, became worried when Adele Miller began showing uncharacteristic signs of forgetfulness in her mid-50s while still working as a first-grade teacher in Lakeland, Fla. So they turned to Dr. Amanda Smith at the University of South Florida for answers.

Byrd Medical Director Dr. Smith confirmed the family’s fears, and within two years, Adele could no longer continue her 35-year teaching career that began on Long Island, N.Y. But it didn’t take long for the Millers and Rogen (who began dating Lauren in 2004 and married into the family in 2011) to decide that much more needed to be done to end Alzheimer’s and help those with the disease.

Cue Hollywood.

With the help of a friend, comedy writer Matthew Bass, Rogen and his wife established the *Hilarity For Charity Fund* with the national Alzheimer’s Association to champion awareness and financial support for Alzheimer’s, a leading cause of death in the United States and the only one among the top 10 diseases for which there is no prevention or cure.

Rogen and Miller hope to rally Hollywood couple Seth Rogen and Lauren Miller are using their star power to enlist others in the fight against Alzheimer’s disease.
support for Alzheimer’s, his much like actor Michael J. Fox has achieved with his Parkinson’s disease foundation, cyclist Lance Armstrong accomplished with his ‘Livestrong’ campaign for cancer survivors and their loved ones, and actress Elizabeth Taylor and basketball star Earvin ‘Magic’ Johnson did for AIDS outreach.

“Look around and realize how few advocates Alzheimer’s has,” Rogen says of their decision to get involved. “And, selfishly, it was affecting our lives on a daily basis.” They enlisted fellow entertainers – including friends Paul Rudd, Ty Burrell and Bruno Mars – for a one-night comedy/variety show in Los Angeles that raised nearly $400,000 in 2012. The following year it raised more than half a million dollars, and along

Rogen and Miller also hope their efforts help shatter a stigma often associated with the disease that relegates many families to suffer in silence. They admit they kept their own situation “a family secret” for three years.

“One time you get over the instinct to not talk about it, there are a lot of people who are a lot more supportive than you might imagine,” Rogen told Larry King on a 2011 CNN special, ‘Unthinkable: The Alzheimer’s Epidemic.’

Rogen says he and his wife have been gratified by the personal and professional support they’ve received since going public with their family’s battle. Others have thanked them for taking on the disease and fighting back.

“It’s not easy,” Miller says about their campaign. “But we don’t do it because it’s easy. We do it because it’s important to us.”

The winning school will receive an advance screening of Rogen’s latest movie, ‘Neighbors,’ a comedy co-starring Zac Efron that will be released in May. Rogen and Miller are looking forward to attending the campus event to personally thank the supporters.

Seth and I have a unique opportunity to reach people who may not be aware of how important it is to raise awareness and money for Alzheimer’s,” Miller says. “We want this to become a movement, and the only way Alzheimer’s is going to find a cure is if young people get involved. Why this is so truly important is that if we don’t do something about it now, it’s going to affect us later.”

Rogen agrees that it makes sense to involve young adults to help fight a disease that generally affects people who are much older.

“A lot of young people are starting to think about charity in general and think that’s something they can do to contribute to society and the world at large. We thought we could provide them with a fun way to do that,” he says of the intercollegiate competition that was his wife’s idea, which they’re calling Hilarity for Charity – U. The Byrd Institute applauds them for using their star power to help defeat Alzheimer’s.

“Traditionally, it’s not something that younger people think about,” Smith says, “and they have done an amazing job in increasing awareness among college kids and folks in their 20s and 30s. Having people like them use their time and energy to champion this cause benefits all of us who work in the field.”

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To support the Byrd Alzheimer’s Institute’s medical research and services to patients and their families, visit the Institute’s website at http://alz.health.usf.edu or call (813) 974-0356. Additional information about the program and registration for this year’s conference can be found on the Byrd Alzheimer’s Institute website http://alz.health.usf.edu or by calling (813) 974-4357.

Conference to share strategies in caring for the elderly

Organizers of the 16th Annual Geriatric Institute will present some of the latest information on meeting the various needs of Florida’s aging population at a three-day conference that will be held in June in Tampa. The symposium, which is organized by the Byrd Alzheimer’s Institute, is expected to once again draw health care practitioners, administrators and service providers interested in dementia and other critical issues in aging.

Highlights of some of this year’s topics include: the proper use of non-prescription medications; the roles of hospice and palliative care; updates on diagnosing and treating dementia, differentiating dementia, depression and anxiety; swallowing problems in neurodegenerative diseases; and the evaluation and care for individuals with Parkinson’s and other movement disorders.

Nurses and nurse practitioners, nursing home and assisted living facility administrators, geriatric care managers, social workers, occupational therapists and professional guardians will be able to receive six hours of continuing education credits for each day attended.

“The challenge is designing a conference that can be beneficial for such a diverse audience – diverse in addressing the needs of various disciplines, and diverse in terms of your years of experience,” said organizer Eileen Poiley, MS, director of education at the Byrd Institute.

“Our feedback on the evaluation every year is that we hit the mark, and every one finds it very helpful for what they do in their work environment. They tell us it provides very practical information that they can take back and use in their job to improve care.”

“Excellence in Geriatric Care: Competent” will be held June 17-19 at the Clarion Hotel & Conference Center in Tampa. Attendees who wish to stay one or more nights at the hotel can request the special USF conference rate when making their reservations.

The conference has averaged more than 100 attendees each year from Hillsborough and surrounding counties and 15 or more exhibitors. Poiley said the cost to attend is $85 a day or $225 for all three days. The fee for exhibitors is $175 a day or $475 for the entire conference.

Many of the speakers represent USF’s multidisciplinary approach to preparing the next generation of health care providers. Faculty from the university’s College of Nursing, College of Medicine and College of Public Health will be joined by authorities from the Byrd Alzheimer’s Institute, the Department of Communication Sciences and Disorders, the School of Social Work and the School of Aging Studies.

Kelly Tehan, MPAS, PA-C, a physician assistant at the USF-Health Byrd Parkinson’s Disease and Movement Disorders Center, presenting to health care providers at a previous conference.
Boosting Brainpower
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benefit,” she says. “You can do it 15 minutes a day every day, if you wish, or for longer periods.” Posit Science recommends doing the training three times a week in 30-minute sessions.

The online program (at www.posit-science.com) costs about $100 a year, and like any exercise program, it can be done repeatedly.

With people living longer and the large number of Baby Boomers approaching retirement age, Edwards believes there will be a growing marketplace in helping older drivers remain safe and determining those who should no longer be driving.

She believes health care providers, health insurers and automobile insurers will increasingly turn to cognitive screenings to assess risk.

Although some “brain exercise” programs work, others may be making false claims based on junk science. To protect consumers from scams, Edwards says, “we need to determine what works and what doesn’t work.”

“We also need to determine who is most likely to benefit from these programs,” she says, “and then we need to get people to do it. I’d like for people to age as successfully as possible.”

The Byrd Institute participates in community outreach activities to connect with audiences and caregivers who may be affected by Alzheimer’s disease and related memory disorders. Through these events, the Byrd Institute is able to share information on the warning signs of Alzheimer’s disease as well as on support services offered at the Institute.

According to the National Alliance for Caregiving, more than 65 million people, 29 percent of the U.S. population, provide care for a chronically ill, disabled or aged family member or friend. Education and outreach targeted to family caregivers and/or health professionals is an integral part of the Byrd Institute mission. The staff participates in health fairs, expos, conferences and seminars throughout the greater Tampa Bay area, and delivers off-site presentations (upon request) at local churches, civic organizations and private groups.

Information on upcoming community outreach activities is available online on the Byrd Institute website at http://alz.health.usf.edu.

In 2013, The Byrd Institute hosted its first Alzheimer’s & the Arts fundraiser to benefit research, patient care and education programs. The event featured a special performance from the “Queen of Keys” jazz pianist and singer Lillette Jenkins-Wisner, 89, of Orlando. Lillette was diagnosed with memory loss at the Byrd Institute but continues to perform with her daughter and granddaughter. Other performers were the Shoes At the Door Dance Company, comprised of graduates from USF’s School of Theatre and Dance; vocalist and Byrd Institute CEO Dave Morgan, PhD; and the La Lucha jazz band featuring Alzheimer’s researcher John O’Leary on piano.