

# information

## DIAGNOSIS OF PARKINSON'S

Parkinson's is a progressive neurological condition, which is characterised by both motor (movement) and non-motor symptoms.

The onset of Parkinson's symptoms is gradual and obtaining a firm medical diagnosis can take some time in spite of the obvious nature of many of the symptoms.

Currently there is no definitive laboratory test or radiological procedure which diagnoses Parkinson's and autopsy - based studies have shown that even among neurologists, diagnostic accuracy results in up to 25% of cases proven incorrect at time of death.

In spite of advances in the management of Parkinson's, the provisional medical diagnosis continues to be based on the clinical picture of four cardinal symptoms and a positive response to levodopa.

The diagnostic check list is composed of:

- Bradykinesia
- Muscle rigidity
- Tremor
- Postural Instability

These are described in detail on Information Sheet *Parkinson's Symptoms*.

### Specialised Medical Diagnosis and Management

Most people will visit their practitioner as they become aware of the development of symptoms and it is recommended that a referral to a neurologist or geriatrician be obtained.

Parkinson's organisations in each state can supply a list of locally based specialists who have an interest in treating Parkinson's. Some states have government funded Parkinson's clinics.

The basis of diagnosis is the assessment of presenting symptoms, past medical history including exposure to substances (both pharmaceutical and environmental) and a review of family history.

A neurological examination will reveal bradykinesia, tremor, rigidity and balance issues.

### Diagnostic Investigations

Magnetic resonance imaging (MRI) will be carried out to rule out other neurological conditions which may resemble Parkinson's.

Computerised tomography (CT) does not reveal any Parkinson's related changes but will rule out structural abnormalities which may result in Parkinson's-like symptoms.

Functional neuroimaging (SPECT and PET) are used overseas in research based projects and are now used more often in clinical practice in Australia to assist with diagnosis.

If there is any doubt about the differential diagnosis (between Parkinson's and Atypical Parkinsonism) a metaiodobenzylguanidine (MIBG) scan may be considered.

### Levodopa Response

An improvement in symptoms following the introduction of levodopa or a dopamine agonist is regarded as a positive indication that a correct diagnosis has been made. However, up to 50% of people with Atypical Parkinsonism may initially show a positive response which will not be maintained in the long term.

### Impact of Diagnosis

Reactions to the diagnosis will vary greatly from anger to disbelief and it is recommended that support and education are sought. The emotional impact of receiving the diagnosis is much greater than the physical limitations of the condition at this stage.

For further information contact  
your state Parkinson's organisation:  
**Freecall 1800 644 189 [www.parkinsons.org.au](http://www.parkinsons.org.au)**

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Having a partner or family member diagnosed with Parkinson's will also impact on loved ones. This will result in their own emotions as they come to terms with the diagnosis and the future.

## Strategies for Coping with a Diagnosis

- **Disclosing the diagnosis**

The timing of disclosing the diagnosis is a personal choice. However, attempting to hide the symptoms and the diagnosis can be stressful which in turn may result in increased symptoms such as tremor. Honesty and disclosure often brings relief as others may have suspected that something was amiss and may have made a wrong assumption.

- **Maintain or start an exercise program**

Research now suggests that exercise plays an important part in slowing down the progression of Parkinson's. It is vital that exercise is commenced or continued. Any form of exercise is recommended, including yoga, boxing, walking and Tai Chi.

- **Adjusting to the changes**

It will become necessary to allow more time for routine activities as bradykinesia can be frustrating. Having a realistic self-expectation will come with time, acceptance and adjustment.

- **Maintaining self-identity**

Try to avoid defining yourself by Parkinson's. It is important not to lose focus of yourself and your life roles rather than allow Parkinson's to dominate everything.

- **Seek support**

The support of family and friends is invaluable and professional support may also be required. Many people will seek the help of a counsellor to help them cope at this time. Just as the symptoms of Parkinson's vary from person to person it is recognized that each person will reach the point of seeking assistance at a different stage.

**Seminars for the newly diagnosed are organized at a state level by Parkinson's associations.**

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