



Australian College of Nursing

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Checklist for managing my Parkinson's symptoms



Please keep this checklist in my hospital notes during this admission.

Name:

Parkinson's disease causes difficulties in moving, and other motor and non-motor symptoms, due to low levels of the brain chemical dopamine. Symptoms may include slowness, tremor, depression, anxiety, sleep problems and pain.

Symptoms vary from person to person, fluctuate throughout the day and change over time.

I have ticked the symptoms that apply to me.

Please help me have my medicines on time

Yes

The timing of my medicines is very important for managing my Parkinson's symptoms. An hour late may mean I am extremely slow, sitting rigid and in pain for that hour. This could make my symptoms harder to manage. Please see my *Medicines List* for my individualised dose and timing instructions.

Use my 'on' times for activities

Yes

In my 'on' times, the Parkinson's medicines are working and I am best able to move. In my 'off' times, symptoms such as tremor, slowness, stiffness, speech, balance, fatigue, anxiety and depression are at their worst.

Timing my activities, such as showering and meals, during 'on' times will make things easier and I will need less help.

I can manage my own medicines

Yes

Please let me manage and take my Parkinson's medicines myself. This may make it easier for me to take them on time.

Help with my swallowing difficulties

Yes

I may eat my meals slowly if I have trouble swallowing. Please don't assume I have finished a meal if I have paused, and I may need my meal reheated at times.

Be patient and listen carefully

Yes

I need time to speak and my voice may be soft. My face may not express my emotions: even if I don't smile, I do appreciate your help.

Refer me to a speech pathologist if I show signs of swallowing difficulties, such as coughing or choking on food or drinks. If I can't swallow, I may need my medicines reviewed so I can take them through a nasogastric tube or use patches.

Help me get moving if I freeze

Yes

Humming a marching tune, counting or helping me imagine I'm going up stairs can get me moving again. You can also help me get out of bed by giving simple step-by-step instructions. Please do not rush me — it could make me anxious and actually slow me down.

Prevent falls

Yes

Sometimes I lose my balance, which makes me fall. Referring me to a physiotherapist can help for balance and walking problems. I may be dizzy when I get up too quickly, which can also lead to falls. Checking my blood pressure when lying and standing, and giving fluids (if appropriate) may help.

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Help me to turn in bed

Yes

I have trouble turning in bed, even though I may be mobile during the day. Please look for pressure areas and help me in and out of bed for toileting. A bed pole and referring me to a physiotherapist may also help.

Please manage my pain

Yes

Analgesics may not help if I have pain from muscle rigidity or dystonia. If I get pain in an 'off' time or because my medicines were late, Parkinson's medicines will often relieve it. If I get pain even when I have my Parkinson's medicines on time, I need them reviewed. Referring me to a physiotherapist may also help.

I also have the following:

Tremor

Dyskinesias (movements I can't control)

Constipation

Sleep disturbances

Memory problems

Slowness in thinking

Concentration problems

Impulse control disorders

Anxiety

Depression

Hallucinations or psychosis

Medicines that must be avoided in people with Parkinson's disease

This is only a small selection — many other medicines can worsen Parkinson's symptoms or interact with Parkinson's medicines.

Check the contraindications on the prescribing information carefully before starting any new medicine.

Antinausea medicines to avoid

- ▶ metoclopramide (e.g. Maxolon)
- ▶ prochlorperazine (e.g. Stemetil).

The above medicines are a common cause of serious adverse effects in people with Parkinson's. Domperidone (Motilium) is usually recommended if an oral medicine is appropriate and ondansetron (e.g. Zofran) IV if an oral medicine is not appropriate.

Note: Ondansetron is contraindicated in patients on apomorphine.

Antipsychotic medicines to avoid

- ▶ chlorpromazine (e.g. Largactil)
- ▶ olanzapine (e.g. Zyprexa)
- ▶ haloperidol (e.g. Serenace)
- ▶ risperidone (e.g. Risperdal).

Some antidepressants and some blood pressure lowering medicines

Check the contraindications on the prescribing information carefully before starting any new antidepressant medicine or any new blood pressure medicine.

The *Parkinson's Passport, Medicines List* for people with Parkinson's and *Checklist for managing my Parkinson's symptoms* are available in editable PDF format for download and print from nps.org.au/parkinsons-passport and parkinsons.org.au. Copies can be ordered from Parkinson's Australia by phoning **1800 644 189**.

On time, every time with Parkinson's medicines

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Independent, not-for-profit and evidence based, NPS enables better decisions about medicines and medical tests. We are funded by the Australian Government Department of Health and Ageing.
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Published: September 2013

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