

WHAT IS PARKINSON'S DISEASE?

Parkinson's is a progressive neurological disorder.

THE CAUSE

The cause is unknown, but theories include: environmental triggers, genetic factors, injury and medication.

The symptoms of Parkinson's are caused by the death of nerve cells in the brain that produce the neurotransmitter dopamine. Dopamine is needed for normal, coordinated movement.

THE SYMPTOMS

The symptoms of Parkinson's begin slowly, develop gradually, and in no particular order. They include:

- Rigidity of the muscles
- Slowness of movement (Bradykinesia)
- Tremor
- Postural instability

Other motor symptoms of Parkinson's can include: impaired walking, balance and coordination, falling and freezing.

Non-motor symptoms may include: anxiety, depression, dementia, hypotension, constipation and urinary issues, loss of sense of smell, problems with swallowing and speech, as well as problems related to sleep disturbances.

EXERCISE: Regular, moderate exercise is beneficial in helping to reduce many symptoms of Parkinson's.

Research suggests that exercise may slow the progression of Parkinson's and there are many new exercise programmes being introduced and evaluated.

STRATEGIES FOR MANAGING SYMPTOMS

RIGIDITY: Muscles tend to pull against each other leading to difficulties with fine motor skills, coordination and movement. This is often very painful.

- Seek physiotherapy input
- Encourage exercise to maintain muscle strength
- Avoid buttons, zips and fiddly clasps

SLOWNESS OF MOVEMENT: Movements are slow and often difficult to start which can cause problems with balance. Thinking may also be slower.

- Avoid multi-tasking; for example
- Avoid conversation when doing something else
- Turn off TV or radio when walking and/or eating

POSTURAL INSTABILITY: Potential for falls due to impaired balance and freezing of gait, with falls being common.

- Do only one thing at a time
- Take care with stepping backwards
- Take care when turning on the spot
- Turn in a wide arc

Each person with Parkinson's is different in terms of the nature and severity of symptoms; the rate at which the condition progresses; and their individual response to treatment.

FREEZING OF GAIT: This is the sudden inability to move, and may occur in doorways or when turning. Crowded or small areas are often challenging.

- Say "One, two, three – GO!"
- Tap the leg to be lifted
- Put something on the floor to step over
- Fix eyes on a position ahead
- Try using a metronome or walk to music
- De-clutter the area
- Avoid mats or changes in floor covering

TREMOR: Usually a resting tremor which takes a lot of energy

- Consider kilojoule intake
- Reduce stress and anxiety
- Use weighted wristbands when holding an object
- Seek advice from an occupational therapist

DYSKINESIA: These are involuntary movements which can be exhausting. Walking and balance may be affected.

- Review medication
- Seek input from GP or specialist
- Consider kilojoule intake
- Monitor for weight loss

"ON-OFF" FLUCTUATIONS: This is a shift from relative wellness and mobility to an inability to move. Some people with Parkinson's feel the effects of their medication "wearing-off" suddenly.

- Medications may be adjusted to better control symptoms
- Consider giving medication on an empty stomach
- Plan activities so that those important to the person are during their "on" times.

MEDICATION: GET IT ON TIME, EVERY TIME

MENTAL CHANGES: Various factors can cause hallucinations, confusion and behavioural issues.

- If there are sudden changes, screen for infection or constipation
- Seek GP or medical input

DEPRESSION AND ANXIETY: Many people with Parkinson's will experience these symptoms at some stage. These may be linked to medication levels.

- Medication: Get it on time, every time
- Mindfulness and relaxation may help
- Consider referral to counselling

DEMENTIA: Not everyone with Parkinson's develops dementia, however the risk for dementia increases with age.

Signs of dementia at the time of diagnosis, or shortly afterwards, may suggest Lewy Body Dementia (LBD) which is a different diagnosis. People with long standing Parkinson's may develop Parkinson's dementia (PDD).

- Seek timely and expert assessment
- Use dementia specific strategies

LOW BLOOD PRESSURE: Parkinson's, and the medications used to treat the symptoms, can lead to low blood pressure and falls.

- Monitor blood pressure and/or alert doctor
- Watch for dizziness on standing

CONSTIPATION AND URINARY ISSUES:

People with Parkinson's may experience bowel or bladder problems.

- Monitor bowel function
- Encourage adequate fluid intake
- Encourage regular exercise
- Seek continence nurse input

SLEEP PROBLEMS: These may include restless legs, cramps, frequent visits to the toilet, vivid nightmares and poor bed mobility.

- Use elastic stockings and massage for restless legs
- Avoid late evening tea or coffee
- Encourage full emptying of bladder
- Provide firm mattress and grab rails
- Use satin sheets, pyjamas or boxer shorts
- Seek medical input

SPEECH: The voice can become extremely soft and stuttering may occur. Speech processing can take longer.

- Seek speech therapist input
- Be patient and do not rush the person
- Don't answer for them – wait for their response

SWALLOWING: Changes in the ability to swallow may occur.

- Involve dietitian or speech therapist
- Avoid hurrying the person when eating
- When eating, avoid other distractions such as conversations, TV, radio, etc.

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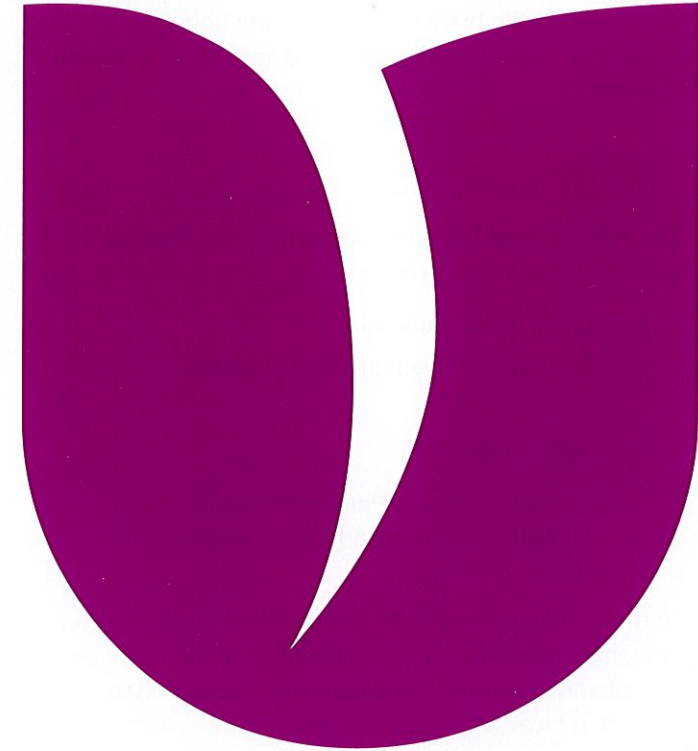
Prepared in collaboration with:

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inbrief

TIPS FOR CARING FOR PEOPLE WITH PARKINSON'S



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