How is Parkinson’s treated

The main treatment is drug therapy, which helps to control the symptoms. Because no two people with Parkinson’s are exactly alike, the drug treatment has to be tailored to the individual and the timing of medication is as important as the dosage. Surgical techniques are also being researched.

Good management of the condition also relies on physiotherapy, speech and language therapy, occupational therapy and self help, which all have very important roles to play. Support and advice for carers is also vital and the Parkinson’s Disease Society provides education opportunities for all levels of staff.

This leaflet was compiled with information from the Parkinson’s Disease Society.

For more information call their Helpline on 0808 800 0303 or visit their website at www.parkinsons.org.uk
What is Parkinson’s?

Parkinson’s is a progressive, neurological disorder affecting learned voluntary movements such as walking, talking, writing and swallowing. There are three main symptoms: tremor, rigidity and slowness of movement. However, not everyone will experience all three. Parkinson’s results from the loss of the chemical messenger, dopamine, within the brain. The cause is as yet unidentified and there is no known cure.

Who gets Parkinson’s?

Parkinson’s is found all over the world. In the UK, one in 500 people - around 120,000 individuals - have Parkinson’s. Although often perceived as an older person’s condition, many are affected during their working lives; of the 10,000 British people diagnosed each year, one in twenty is under 40 years old.

Symptoms

There are three main symptoms of Parkinson’s Disease.

Tremor: The tremor usually affects the hands, arms and sometimes the legs. It is usually a resting tremor that disappears when the person is asleep.

Muscle Rigidity: The muscles of the limbs and the body will be stiff and rigid and this makes movement more difficult. It can also affect the face, tongue, bowels and bladder, classically known as “cogwheel” or “leadpipe” rigidity.

Bradykinesia: Slowness or reduced movement and a lack of co-ordination. There may be difficulty in initiating or sequencing all activities of daily living.

In addition to these cardinal features, people with Parkinson’s may have poor posture, may stoop forward with shoulders hunched and head down. Balance may be poor and falling is common.

Effects of Parkinson’s Disease on daily living

Difficulties in performing movement and slowness can interfere with all aspects of daily living. This is frustrating for the person with Parkinson’s and others. The effects of these symptoms upon facial expression and speech can cause isolation, withdrawal and considerable misunderstanding. Common difficulties include: walking, poor posture, turning over in bed, handwriting problems, personal hygiene, eating and swallowing, communicating and negotiating restricted areas.