

What is Parkinson's Disease?

Parkinson's disease (Parkinson's) is a progressive neurological disorder, and is classified as a Movement Disorder, as it primarily affects movement. It is variable in its progression, i.e. some people progress more slowly than others, and the symptoms can be effectively controlled with medication for many years. Parkinson's disease is caused by a loss of a chemical called dopamine. We all lose some of this chemical as we get older, however, it is only when we have lost about 80% of our dopamine we start to have symptoms. So people with Parkinson's have lost this chemical at a faster rate than others.

Although Parkinson's is a movement disorder, there are both motor and non-motor symptoms associated with it.

Parkinson's can be difficult to diagnose initially, it may take up to 2-3 visits before a conclusive diagnosis is made.

What is Parkinsonism?

Parkinsonism is an umbrella term that describes conditions that feature the main symptoms of Parkinson's (tremor, rigidity and slowness of movement). About 85% of people with Parkinsonism have Parkinson's. The other 15% have other rarer conditions such as Drug Induced Parkinson's, Progressive Supranuclear Palsy (PSP), Multiple System Atrophy (MSA) and Parkinsonism secondary to other medical problems, such as after a stroke.

At What Age Does Parkinson's Disease Occur?

Parkinson's is most commonly diagnosed in a person's 60's. It can however also affect younger people. People presenting with Parkinson's between 40-60 years old are said to have Early Onset Parkinson's, those between 21-40 years old are generally described as having Young Onset Parkinson's, while those with symptoms occurring before the age of 20 are described as having Juvenile Parkinsonism.

How Common is Parkinson's Disease?

Parkinson's is the second most common neurodegenerative condition after Alzheimer's. The incidence is 1-2:1000 of the general

population and 1:100 of the over 80's, therefore estimating that there are approximately 8,000 people living with Parkinson's in Ireland.

What Causes Parkinson's Disease?

It is not yet known exactly why people get Parkinson's, but researchers suspect that in most cases it is a combination of a number of genetic and environmental factors that cause the dopamine-producing nerve cells in the brain to die off. There are also emerging data to suggest that Parkinson's in a large proportion of "young-onset" and "juvenile" cases is of genetic origin, due to a variety of gene mutations, rather than sporadic in nature.

Can Parkinson's Disease be Inherited?

In the vast majority of cases Parkinson's is not inherited. There are a very small number of families in which Parkinson's is inherited due to a clear genetic effect.

Signs and Symptoms

The motor symptoms are tremor, stiffness, slowness, stooped posture and gait disturbance/ impaired balance.

Tremor seen in people with Parkinson's disease is usually present when the hand or leg is relaxed, or not in use, and this is called a rest tremor. This is most commonly seen when the hand is relaxed, for example when the person sitting watching the TV.

Anxiety can cause the tremor to become worse, so people with Parkinson's will often notice that in times of high stress, the tremor can be more noticeable.

Only 70% of people with Parkinson's will develop a tremor.

Slowness of movement is often described as a difficulty in completing daily tasks at the usual speed and ease, for example getting dressed. This slowness in movement can also affect the way in which you walk, as it may cause short, shuffling steps

The stiffness caused by Parkinson's can be a result of the muscles being unable to stretch or relax.

Light exercises or physiotherapy can help loosen up tight muscles and improve mobility.

Other movement related symptoms of Parkinson's may include shuffling of feet, arms no longer swinging when walking, being unable to move the feet (commonly known as "Freezing"), and suffering from painful muscle contractions, commonly in the foot (dystonia).

People with Parkinson's may also experience a wide range of symptoms known as the non-motor symptoms of Parkinson's disease. It is now known that some non-motor symptoms may develop years before motor symptoms and before a diagnosis of Parkinson's is made. The non-motor symptoms of Parkinson's are sometimes not identified and treated because people with Parkinson's don't realise they are related to the condition.

Examples of non- motor symptoms of Parkinson's include, but are not limited to: anxiety, bladder and bowel problems, depression, excessive sweating, fatigue, hallucinations, low blood pressure, loss of sense of smell, memory problems, pain, and sleep difficulties.

Some of these additional symptoms may actually be side-effects of the treatment of Parkinson's rather than the underlying illness.

It is important to note that the symptoms of Parkinson's usually begin slowly, develop gradually

and in no particular order. Sometimes it can take years before symptoms progress to a point where they cause problems. Not everyone with Parkinson's experiences the same combination of symptoms. The type, severity and combination of symptoms vary greatly from person to person.

What Treatments Are Available for Parkinson's Disease?

There is currently no cure for Parkinson's. There have however been significant improvements in the treatment of the symptoms of Parkinson's in the last 20 years. Treatments include drug therapy, surgery, physiotherapy, speech and language therapy and occupational therapy.

There is extensive research currently being carried out into the causes of Parkinson's and into developing new treatments for Parkinson's. The ultimate goal of this research is to slow down progression or even cure Parkinson's altogether. As the research advances there are likely to be better treatments available over time which will improve the quality of life of people with Parkinson's.

Feel free to contact the association for some helpful tips and tricks and request a copy of our exercise wall chart devised by a physiotherapist specifically for Parkinson's disease.

Acknowledgements:

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DISCLAIMER – The information on these pages is not intended to be taken as advice. No changes to your treatment should be made without prior consultation with your doctor or allied health professional.

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