

“Freezing” in Parkinson’s Disease

Many people with PD will experience freezing at some point. “Freezing” is used to describe the experience of briefly stopping suddenly while walking or when initiating walking and being unable to move forward. People feel as though their feet are stuck to the ground. It also commonly occurs when trying to turn in small spaces or when walking through doorways. If you have trouble starting a movement or when you try to step forward just after you’ve stood up, this is sometimes called ‘start hesitation’. Freezing can also happen with thought. Some people find this when they are trying hard to remember something in particular, for example trying to remember names. Freezing can be most common in times of stress or anxiety. Sensory cues, such as auditory, visual, or touch triggers, are employed to overcome these “Freezing” episodes.

Why do people with Parkinson’s freeze?

Freezing often happens when something interrupts or gets in the way of a sequence of movement. But we still don’t know exactly what causes freezing. It can get worse if you’re worried, are in a place you don’t know or if you lose concentration. As Parkinson’s progresses, freezing is likely to happen more often.

For some people with Parkinson’s, changes in stride length and speed are not made automatically like in other people.

Usually the length of the steps we take changes when walking from smooth to uneven ground or from open to narrow spaces. But people with Parkinson’s won’t always react in the same way to these things. You might be able to walk without a problem on uneven surfaces, but will freeze when the floor is smoother or has a patterned surface. Or, the opposite might happen.

Will it happen to me?

It’s impossible to know if you will experience freezing, but it’s more likely to happen if you’ve had Parkinson’s for some time, and if you’ve been

taking levodopa drugs for a number of years “Freezing” can be experienced by people who are not taking levodopa, so it isn’t just a side effect of medication.

Is “Freezing” the same as going ‘off’?

Some people with Parkinson’s have “On” and “Off” periods, when they suddenly switch from being able to move (“On”) to not being able to move (“Off”). People can shift between being “Off” and “On” very quickly. This can be a side effect of levodopa that some people who have been taking the drug for a while may experience. Many people notice that “Freezing” is worse when their medication level is low, when they are “Off”.

However, “Freezing” is not the same as switching between “On” and “Off”. There are different ways of managing “Freezing” and “On-Off” swings, so they must be seen as separate problems. During “Off” periods you’ll hardly be able to move at all, so walking, going up stairs or reaching for a cup will be impossible, but when you “Freeze”, it only affects certain movements. So you may not be able to walk, but you could still be able to reach for a cup.

What can I do to help myself?

It is useful to have ways to overcome “Freezing” when it happens. Every person needs to discover their own way of coping with “Freezing”. Stress and anxiety make you more likely to “Freeze”. If your feet “Freeze” and you then try to reach out for support that is not close enough, you may over-balance and fall. If you experience “Freezing”, make sure those who care for you know about this symptom, as there may be things they can do to help you when it happens. Likewise, it is important that if you are walking with someone and you “Freeze”, that the other person does not try to drag you along to get you going – this will almost certainly result in a fall.

Can freezing be dangerous?

If you take lots of small shuffling steps (called Festination) before "Freezing", this can affect your balance and make you more likely to fall over. There are other risks of "Freezing" too, because it can happen at any time without warning.

How can freezing be treated?

Speak with your Parkinson's specialist or PDNS (if you have one) about the best treatment for your "Freezing". Your doctor might feel that a change to your medication regime may help to deal with "Freezing". There are many options available now, from long acting Dopamine Agonists to Enzyme Inhibitors which can allow the levodopa to work more smoothly and effectively, which would promote continuous delivery of dopamine to the brain.

Speak with a Physiotherapist for tips and tricks to overcome "Freezing" and avoid falling.

Techniques to try

The first thing you should try when you feel yourself about to "Freeze" is to stop moving and relax. This gives you time to refocus your balance, think about your next move, and to prepare your body to start again. Once you find a technique that works well for you, you should be able to get over the "Freezing" episode.

You may find taking a side step can help. Some people would recommend marching on the spot or counting out loud until you feel ready to move on again.

Your physiotherapist can also give you advice on walking aids. Some walking aids, such as Zimmer frames, aren't always recommended for people with Parkinson's, so you should speak to a professional before you use one.

Acknowledgements:

Parkinson's Association of Ireland would like to thank Brian Magennis, RGN, Parkinson's Disease Nurse Specialist at The Dublin Neurological Institute at The Mater Hospital, Dublin, for endorsing this Information Leaflet.

Other Relevant Information Sheets:

- M1.1: Motor Fluctuations in Parkinson's Disease
- M1.2: Dyskinesia in Parkinson's Disease
- M1.3: On/Off Motor Fluctuations in Parkinson's Disease
- M1.4: Wearing Off in Parkinson's Disease
- G4: Medication and Parkinson's Disease

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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M1.5 March 2012