Bradykinesia vs. Dyskinesia

Bradykinesia and dyskinesia are two types of disordered movements that individuals who have Parkinson's Disease can experience.

Bradykinesia - slowness of movement and/or progressive hesitations and halts as movements are continued. In Parkinson's, bradykinesia can occur in many different ways:

- decreased automatic movements such as swinging of the arms during walking, swallowing of saliva, or blinking
- difficulty initiating movements such as getting up out of a chair
- overall slowness in all physical movements
- decreased facial expressions

What does bradykinesia mean for everyday life?

- difficulty performing everyday tasks
- difficulty completing fine motor tasks such as buttoning a shirt or fastening zippers
- daily tasks may take longer to complete
- slow walking pattern
- difficulty expression emotions through facial expressions
- freezing during walking, particularly in small spaces or through door ways

Dyskinesia - uncontrolled, involuntary, and erratic movements

These movements are *not* a *direct symptoms of Parkinson's Disease* but are a result of long-term use of some Parkinson's medications like Levodopa. Dyskinesias tends to happen when other symptoms of Parkinson's are best controlled because of the high levels of medications that are in the body. Every person experiences dyskinesias differently and typically only the most severe dyskinesias affect a person's function in daily life.

Types of Dyskinesias:

- Peak Dose Dyskinesia occurs when the concentration of levodopa in the blood is at its highest.
- Diphasic Dyskinesia occurs when the concentration of levodopa is at its lowest, right as you are beginning your "on" period

Management of Dyskinesia

- Your doctor may change your dose and/or timing of levodopa
- Your doctor may switch you to a different formula of levodopa
- Your doctor may add Amantadine to your medication regimen. Amantadine Is a medication that can help to lessen the amount of dyskinesia someone experiences.