

# Your PD Yearly Wellness Check

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# Discussion for today

- Parkinson Disease management
  - Regular check ups
  - Stay ahead of the disease
  - Fight back with exercise!
  - Seek help BEFORE you need it!





**Check yourself!**

**Answer the Following.....**



# Who is your Doctor for PD care?

- A primary care physician?
- A community neurologist?
- **A Movement disorder specialist?**



<https://www.parkinson.org/search>

# Do you take your medication on time?

- Do you set an alarm to take your pills?
- Do you take your pills first thing in the am when you wake up?
- Do you drink a full glass of water with your medication doses?
- Do your doses of medication “connect”?





# Do you drink enough water?

- Do you drink **AT LEAST 6** glasses per day?
- Do you drink coffee or tea?
- Do you drink alcohol?



\*\*Pro Tip: Drink a **FULL** glass of water with each medication dose

\*\*\*Carry around a reusable water bottle with you at **ALL** times



# Do you have regular bowel movements?

< 3 Bowel movements per week; **most prevalent GI symptom in PD\*\***

Contributing factors:

- PD meds
- Low fiber diets
- Slow GI motility/ gastroparesis
- Stress
- Antacid medicine with aluminum or ca
- Strong pain meds: opioids
- Comorbidities: IBS, diabetes





# Does your Medication work?



If NOT- Contributing factors:

- Constipation
- Being undermedicated
  - Managing doctor? Neurology vs MDS
- Poor hydration
- Missed medication timing/schedule
- Atypical Parkinsonisms

How YOU can help:

- Hydration
- Diet changes
  - Fiber
- Medication schedule
  - Phone reminders
  - Watch reminders
- Encourage seeing an MDS

Who to refer to:

- Movement disorder specialist
- Dietician, Nutritionist



# Do you sleep well?



- Sleep disorders impact 75% of people with PD
- Poor sleep can worsen cognition

Contributing factors:

- Medication wearing off
- Urinary system dysfunction
- Mood disorders
- Overstimulation

# Do you have your skin checked?

*“Recent studies have suggested the likelihood of developing malignant melanoma is two to seven times higher in people with PD than the general population”*

*(Parkinson Foundation)*

**\*\*Get your skin checked 2x per year!**



# Do you see your dentist regularly?


*“Poor dental hygiene can affect nutrition and increase risk for stroke, cognitive impairment and weight loss”*

Contributing factors:

- Dexterity
- Cognition
- Dry mouth
- Dyskinesias



## TIPS: Maintaining and Improving Dental Health

- 
- ✓ Use an electric toothbrush.
  - ✓ Try one-handed strategies that allow you to use the stronger side of your body.
  - ✓ Try non-alcohol based mouthwashes using chlorhexidine or baking soda.
  - ✓ Schedule dental appointments in the morning, about 60-90 minutes after a levodopa dose.
  - ✓ Ask to keep the dental chair more upright, to make swallowing easier.
  - ✓ Plan several, shorter dentist visits, rather than fewer, longer ones.
  - ✓ Get check-ups/cleanings every 3–6 months.
  - ✓ If you wear dentures, the dentist should screen for oral cancer and evaluate the fit of the dentures as part of the routine visit.



# Have you had your vision and hearing screened?

Vision issues in PD:

- Dry eyes
- Double vision
- Difficulty reading
- Hallucinations

Hearing: decreased dopamine can result in hearing loss

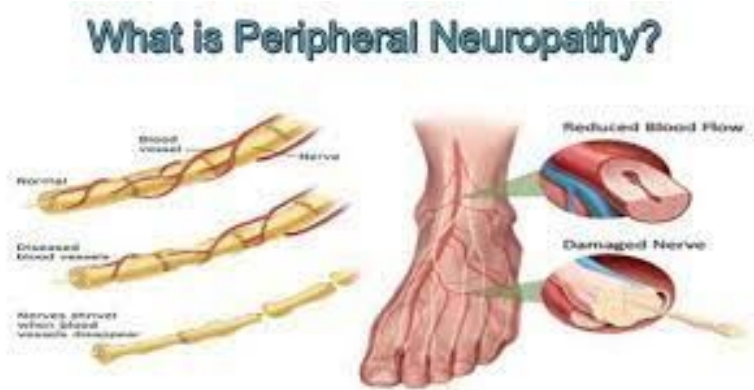


# Have you had a fall? Or a NEAR fall?

- People with PD have TWICE the risk of falling compared to their peers
- Multi factorial causes
  - Medications
  - Blood pressure
  - Environmental factors
  - Motor & Non motor symptoms
- **Check in with your providers REGULARLY!**
  - Neurologist
  - Physical Therapist
  - Occupational therapist



# Can you feel your feet?



- Non-motor symptoms
- People with PD more susceptible b/c:
  - B12 deficiency
  - OH
  - Gastroparesis
  - Medications
- Signs/symptoms
  - Pain: burning, prickling, throbbing
  - Weakness
  - Sensitivity
  - Numbness
- Discuss changes with your MD!
  - Supplements
  - Medications
  - Creams & patches

# Do I Have a Swallowing Problem?

## ***Possibly IF:***

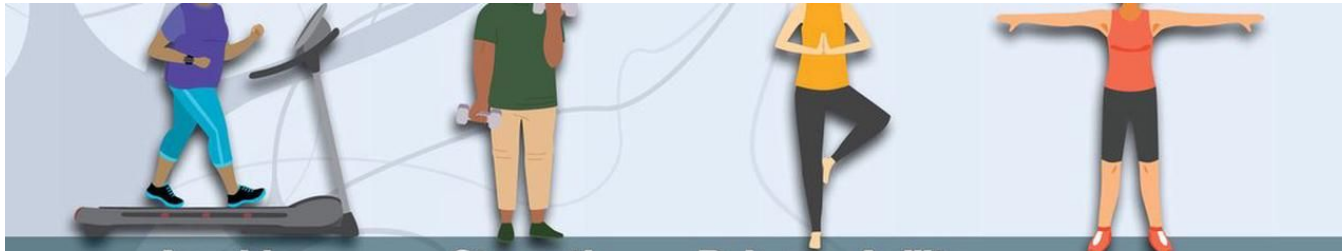
- I have recently lost weight without trying.
- I tend to avoid drinking liquids.
- I get the sensation of food being stuck in my throat.
- I tend to drool.
- I notice food collecting around my gum line.
- I tend to cough or choke before, during or after eating or drinking
- I often have heartburn or a sore throat.
- I have trouble keeping food or liquid in my mouth.

# Have you ever had a swallow study?

- Aspiration: can be **SILENT**, which can lead to pneumonia, which is the **LEADING CAUSE OF DEATH in PD**
- Video x-ray or endoscopic exam by an SLP
- Treatment in speech/swallow therapy:
  - Swallowing exercises
  - EMST
  - Diet changes



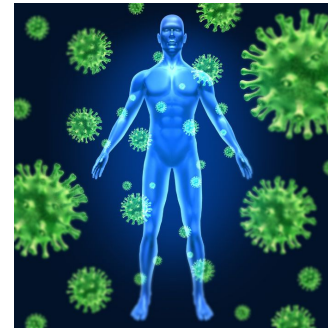
# Do you exercise enough?



Aerobic Activity	Strength Training	Balance, Agility & Multitasking	Stretching
<p>3 days/week for at least 30 mins per session of continuous or intermittent at moderate to vigorous intensity</p> <p><b>TYPE:</b> Continuous, rhythmic activities such as brisk walking, running, cycling, swimming, aerobics class</p> <p><b>CONSIDERATIONS:</b> Safety concerns due to risks of freezing of gait, low blood pressure, blunted heart rate response. Supervision may be required.</p>	<p>2-3 non-consecutive days/week for at least 30 mins per session of 10-15 reps for major muscle groups; resistance, speed or power focus</p> <p><b>TYPE:</b> Major muscle groups of upper/lower extremities such as using weight machines, resistance bands, light/moderate handheld weights or body weight</p> <p><b>CONSIDERATIONS:</b> Muscle stiffness or postural instability may hinder full range of motion.</p>	<p>2-3 days/week with daily integration if possible</p> <p><b>TYPE:</b> Multi-directional stepping, weight shifting, dynamic balance activities, large movements, multitasking such as yoga, tai chi, dance, boxing</p> <p><b>CONSIDERATIONS:</b> Safety concerns with cognitive and balance problems. Hold on to something stable as needed. Supervision may be required.</p>	<p>&gt;2-3 days/week with daily being most effective</p> <p><b>TYPE:</b> Sustained stretching with deep breathing or dynamic stretching before exercise</p> <p><b>CONSIDERATIONS:</b> May require adaptations for flexed posture, osteoporosis and pain.</p>



# Have you had a Sudden Change in Function?



Sudden change in:

- Cognition?
  - Confusion
- Gait?
- Falls?
- Function?
  - Difficulty with transfers
- Hallucinations?

What can you do to help?

- Recommend seeking medical help
  - Get screened for UTI or any \*\*\*infection\*\*\*
- Check vital signs
- Hydrate
- Review medication timing

Who can help?

- Primary care doc
- Neurologist
- ER if fever is present, as needed



# Aware and Care Kits

- [https://secure3.convio.net/prkorg/site/Ecommerce/675302829?VIEW\\_PRODUCT=true&product\\_id=1881&store\\_id=4003](https://secure3.convio.net/prkorg/site/Ecommerce/675302829?VIEW_PRODUCT=true&product_id=1881&store_id=4003)
- Understand the risks associated with hospital stays
- Have tools to play an active role in their care.
- Are prepared for a hospital visit, whether planned or unplanned
- Have a plan to get the best possible care in the hospital





THE  
PARKINSON'S  
PLAN

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A NEW PATH TO  
PREVENTION AND TREATMENT

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*AUTHORS OF ENDING PARKINSON'S DISEASE*







**What Questions do you have??**

# Contact Info

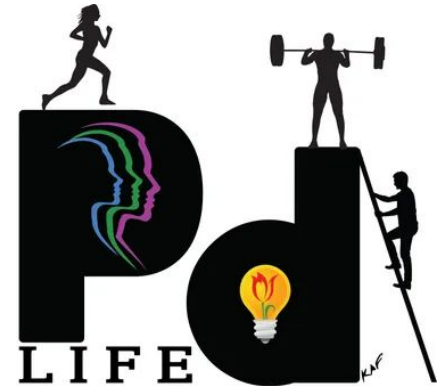


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pdLIFE: **\*\*\*JOIN to receive weekly emails\*\*\***

[www.parkinsonlife.org](http://www.parkinsonlife.org)



Let's get  
**MOVING!!**



# PWR! MOVES: “Parkinson’s Wellness Recovery”

## PWR! Moves® At a Glance

PWR! Up → Posture



PWR! Rock → Weight Shift



PWR! Twist → Trunk Rotation



PWR! Step → Transition

