

Not Just the Shakes: Non-motor Symptoms

Aaron Haug, M D

Neurologist and Movement Disorder Specialist

Blue Sky Neurology (Denver, CO)

Non-motor Symptoms

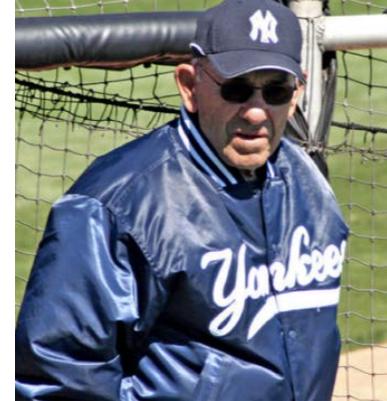
1. Autonomic
2. Sleep
3. Mood and thinking
4. Other important things

Non-motor Symptoms

- Not everyone will have all symptoms!
- Identification and treatment can improve quality of life

“It is tough to make predictions,
especially about the future.”

-Yogi Berra





Managing Non-Motor Symptoms

- Commit to exercise – go for a walk, find a class, join a gym, get a treadmill
- Update your medication list and keep in wallet/purse
- Connect with your Parkinson's community
- Recognize at least one non-motor symptom to discuss with your physician

Managing Non-Motor Symptoms

- Asterisks (*) throughout the presentation indicate ways in which these steps apply



Non-motor Symptoms

1. Autonomic

- Gut
- Bladder
- Blood pressure

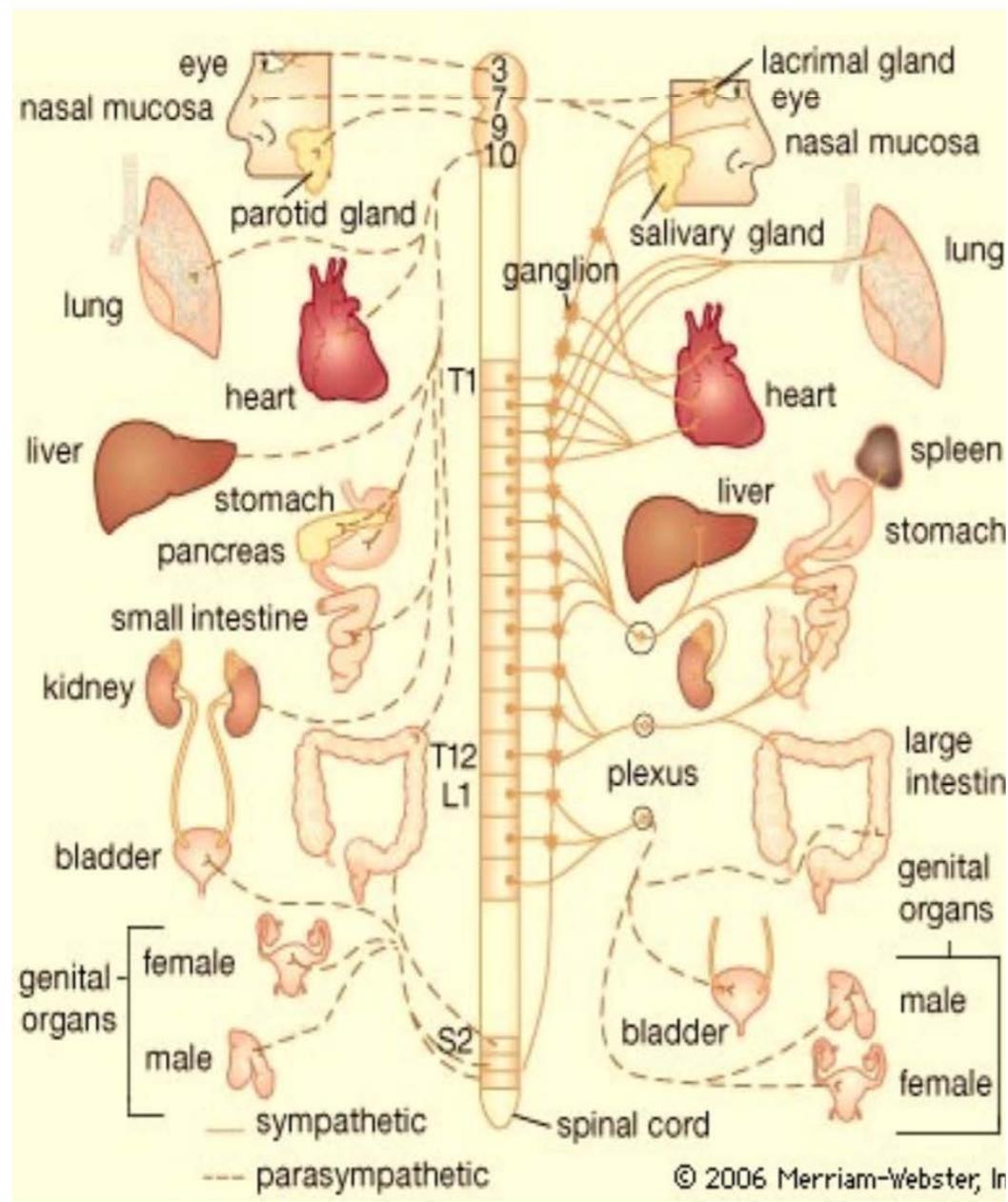
2. Sleep

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Autonomic Symptoms

- Autonomic = think “automatic”
- Autonomic nervous system controls involuntary bodily functions, including:
 - Digestion
 - Bladder control
 - Blood pressure and heart rate



Gut Symptoms - Constipation

- **Extremely** common in Parkinson's
 - ≤ 3 bowel movements per week
 - Painful straining
 - Incomplete bowel movements



Gut Symptoms - Constipation

- Solutions
 - Exercise*
 - Stimulates bowels
- Hydration
 - 6 – 8 glasses of water / day
 - Warm liquid in the morning



Gut Symptoms - Constipation

- Solutions
 - 30+ grams of fiber / day
 - Sugar-free gum
 - Medication
 - Stool softeners, laxatives
 - Prescription medication



Gut Symptoms - Drooling

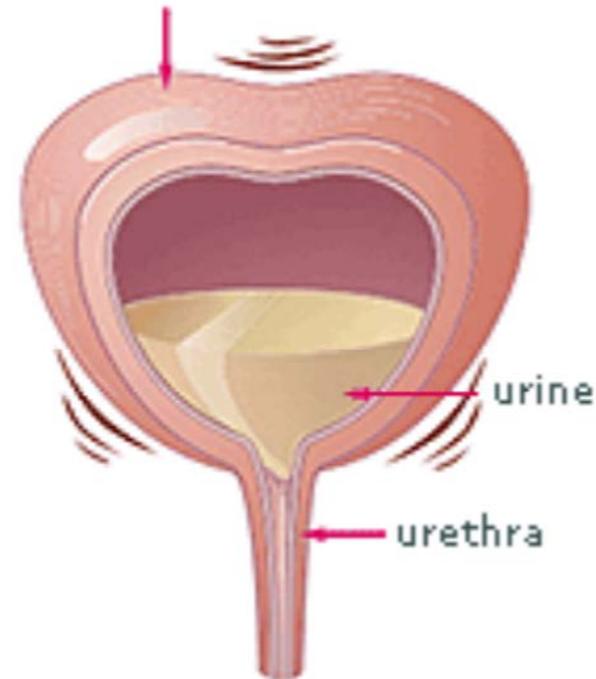
- **Caused by decreased swallowing**
- **To treat, increase swallowing or decrease saliva**
 - **Sugar-free gum or hard candy**
 - **Prescription medications**
 - **Certain prescription eye drops under tongue**
 - **Botox injections**

Bladder Symptoms – Overactive Bladder

- Sensation of needing to urinate frequently/suddenly
- Prescription medications can help calm the bladder muscle

Overactive Bladder

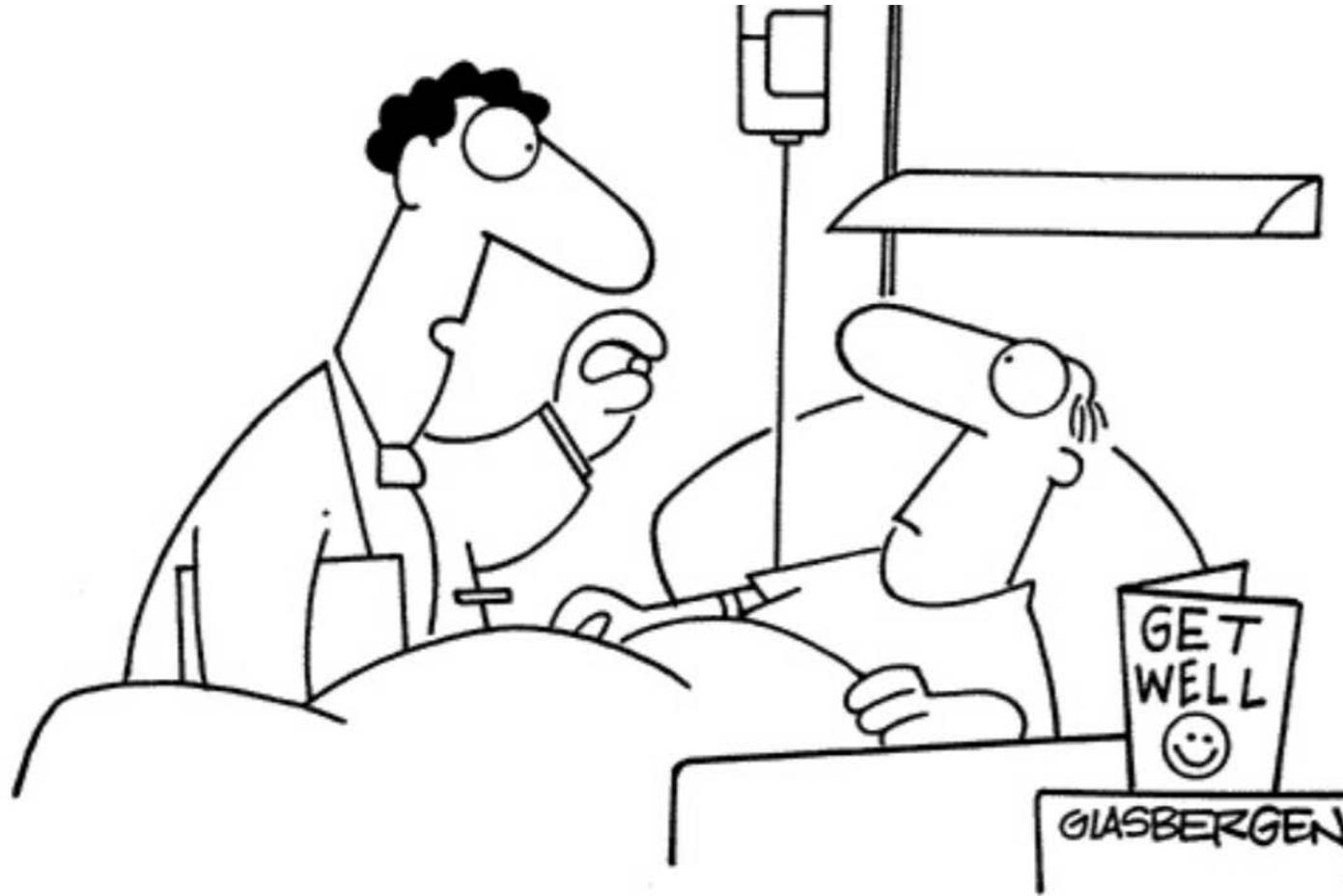
detrusor muscle
contracting before
bladder is full



Blood Pressure Symptoms – Orthostatic Hypotension

- Drop in blood pressure when standing up
- Causes light-headedness, fainting
 - Evaluate anti-hypertensive medication use with doctor*





**“We found a bunch of these clogging
your arteries. They’re cholesterol pills.”**

Blood Pressure Symptoms – Orthostatic Hypotension

- Compression stockings (20-30 mmHg)
- Stand up slowly
- Stay hydrated (6 – 8 glasses/day)
- Sodium-rich foods (pickles, peanuts)
- Prescription medications



Non-motor Symptoms

1. Autonomic

2. Sleep

- Insomnia
- Daytime sleepiness
- Restless legs
- REM Behavior

3. Mood and thinking

4. Other important things

Sleep - Insomnia

- Difficulty falling asleep
- Difficulty staying asleep (common in PD)
- May be due to:
 - Stiffness
 - Difficulty repositioning
 - Tremor



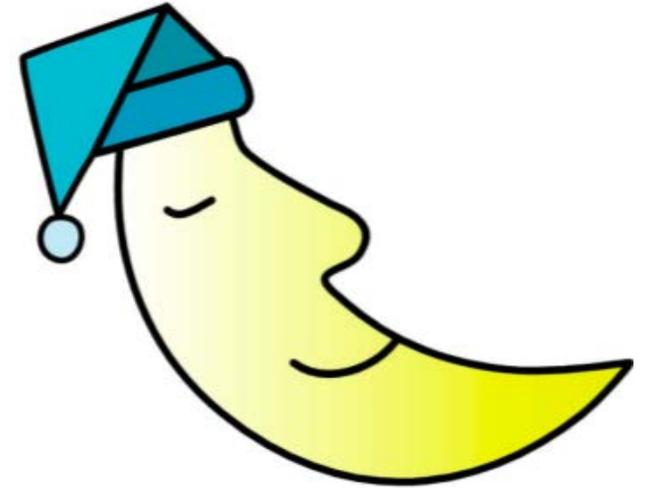
Sleep - Insomnia

- Treatment
 - Good sleep hygiene
 - Complimentary therapies
 - Meditation, light therapy, aroma therapy
 - Supplements
 - Prescription medications



Good Sleep Hygiene

- Consistent wake-up time 7 days per week
- Exercise during the day*
- Increase light during the day
- Relaxing bedtime routine
- No clock watching!
- Get up and try again



Sleep – Daytime Sleepiness

- Increased need for sleep during the day
- Sudden, uncontrollable need for sleep during daytime hours



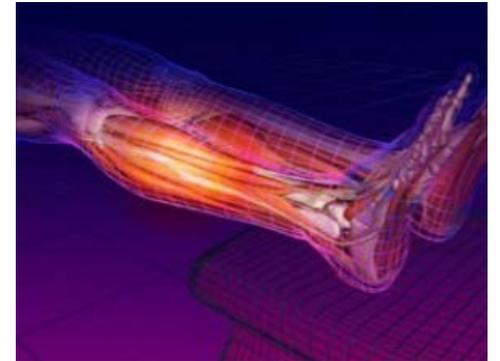
Sleep – Daytime Sleepiness

- Treatment
 - Address insomnia if present
 - Rest and naps are OK
 - Re-evaluate Parkinson's medications*
 - Some are more likely to cause sleepiness
 - Caffeine early in day
 - Stimulant medications are an option



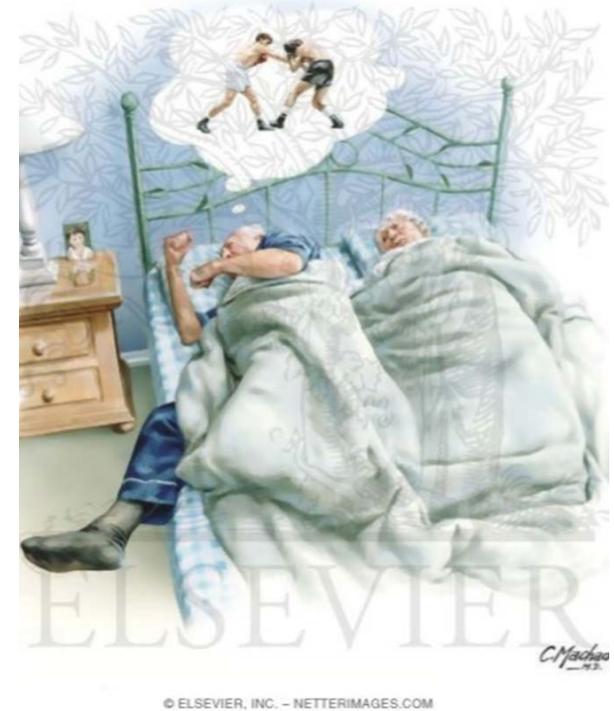
Sleep – “Restless Legs”

- Restless Legs Syndrome
 - Uncomfortable sensation with urge to move
- Periodic Limb Movements
 - Legs jerking during drowsiness or sleep
- Treatment
 - Medication options overlap with other medications used for Parkinson's



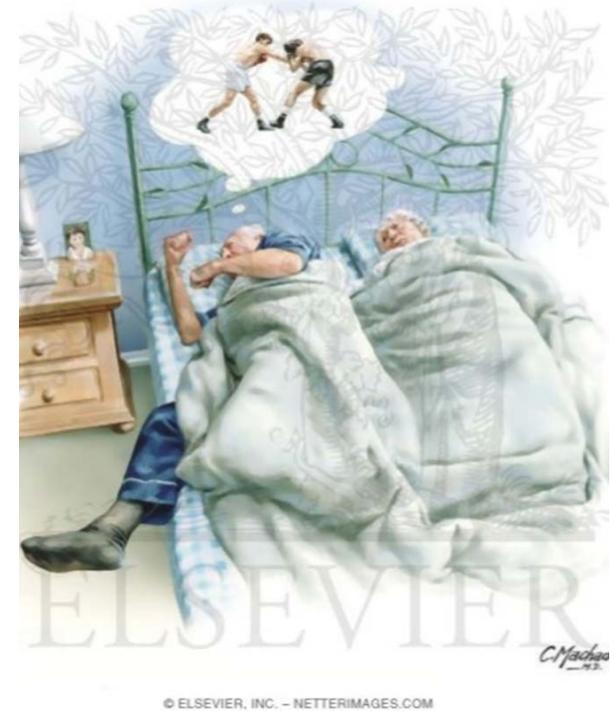
Sleep – Dream Enactment

- REM Sleep Behavior Disorder (RBD)
 - Acting out dream behaviors during REM sleep
 - Sleep talking
 - Punching and kicking
 - Falling out of bed



Sleep – Dream Enactment

- Solutions
 - Move sharp objects away
 - Mattress or pillows next to bed
 - Add railings to bed frame
 - Separate bed for each partner
 - Medications



Non-motor Symptoms

1. Autonomic

2. Sleep

3. Mood and thinking

- Depression
- Anxiety
- Cognition

4. Other important things



"You need more activity. Start with some light dusting of your exercise equipment."

Non-motor Symptoms

1. Autonomic

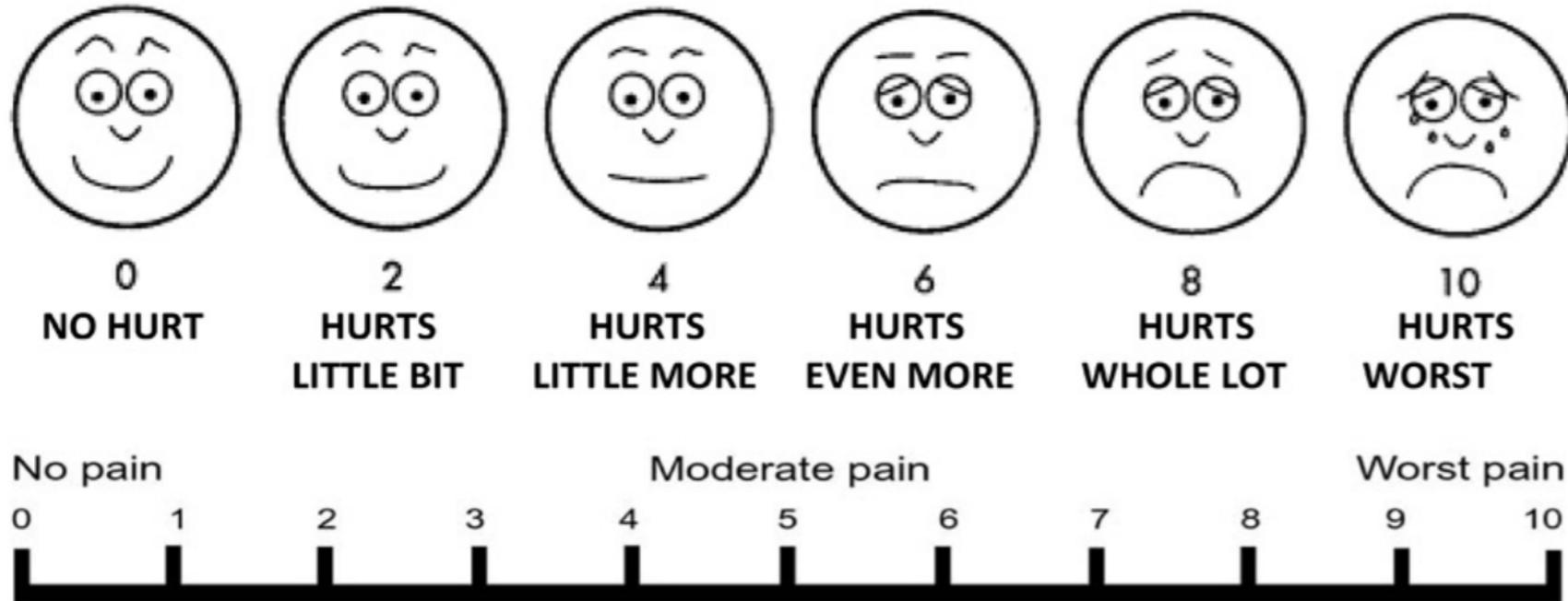
2. Sleep

3. Mood and thinking

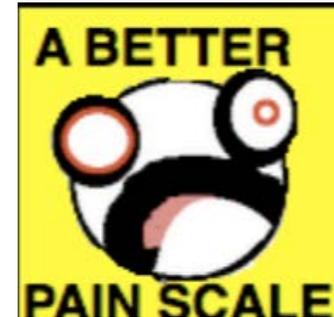
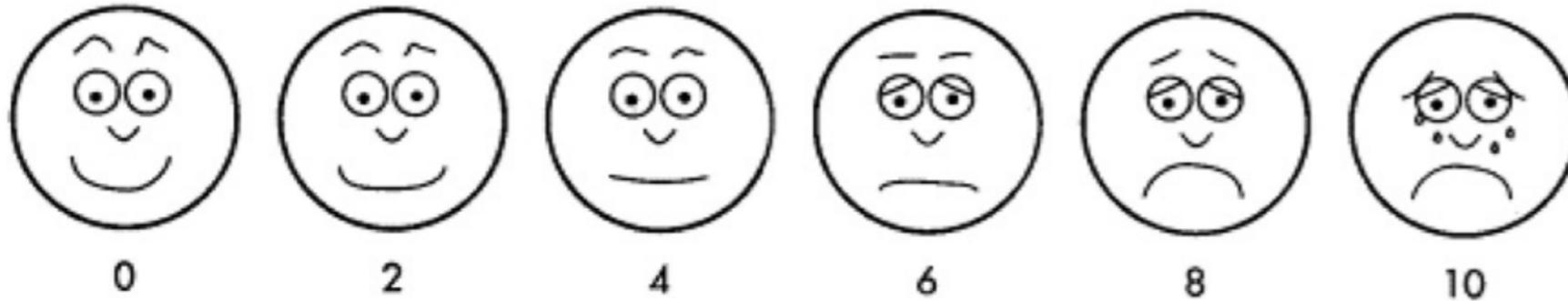
4. Other important things

- Pain
- Melanoma
- Impulse control disorders

Pain Scale



Pain Scale Revisited

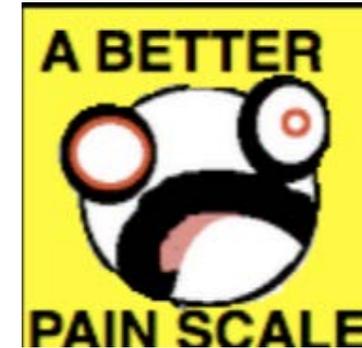


- 2:** Awesome! Someone just offered me a free hot dog.
- 4:** Huh. I never knew that about giraffes....
- 8:** This ice cream barely has any cookie dough in it...

<http://hyperboleandahalf.blogspot.com/2010/02/boynfriend-doesnt-have-ebola-probably.html>

Other Important Things

- Pain
 - Common and often unrecognized
 - Can occur with motor fluctuations
 - Adjust Parkinson's medications*
 - Prescription medications



Other Important Things

- Melanoma
 - Risk is increased among people with Parkinson's
 - See dermatologist at least once a year



Other Important Things

- Impulse Control Disorders
 - Uncontrollable urges
 - Possible side effect of dopamine medications*
 - Motivation centers in the brain
- Talk to your doctor!



Action Steps

- Commit to exercise – go for a walk, find a class, join a gym, get a treadmill
- Update your medication list and keep in wallet/purse
- Connect with your Parkinson's community
- Recognize at least one non-motor symptom to discuss with your physician