

- Sleeping on a firm mattress
- Medications such as pregabalin and gabapentin may be used under a physician's supervision
- Adjusting dopaminergic medication can help if pain is an off period symptom.

WHAT IS DYSTONIA AND HOW CAN IT BE TREATED?

Dystonia is a condition is characterized by involuntary muscle contractions and may result in pain. It commonly occurs in the foot and usually early in the morning during off periods. A physician may first rule out other causes of pain such as planter fasciitis. Your physician may prescribe a bedtime dose of controlled release levodopa or a dopamine agonist, an additional dose of levodopa early in the morning, anticholinergic medications, amantadine, or baclofen. Botulinum toxin injections into the dystonic muscle may also be useful.

CAN MEDICATION HELP TO REDUCE PAIN IN PARKINSON'S?

As mentioned before, since the treatment can be different for each cause, physicians should try to differentiate pain in Parkinson's from other conditions such as osteoarthritis, degenerative spine disease, neuropathy, and radiculopathy. Once other causes are ruled out, pain in Parkinson's disease may respond to dopaminergic medications such as levodopa, dopamine agonist including pramipexole and rotigotine. Dystonic pain in PD may respond to anticholinergic medications such as trihexiphenidol and Botulin toxin.



DID YOU KNOW?

The number of Parkinson's patients will double by 2040. Millions of Parkinson's patients around the world are suffering from poverty and...

- Cannot afford to buy their medications
- Cannot afford to purchase a cane, walker, or a wheelchair
- Cannot obtain educational literature about Parkinson's in their language
- Are not able to afford to consult a neurologist and remain undiagnosed and untreated

OUR SERVICES

World Parkinson's Program is the only organization that provides the following unique services to Parkinson's patients:

- Parkinson's medications to those patients who can't afford to buy them
- Canes, walkers & wheelchairs to prevent falls
- Parkinson's educational brochures in many languages
- Free electronic educational newsletter
- Chapters of the World Parkinson's Program in various parts of the world

JOIN THE FIGHT AGAINST PARKINSON'S

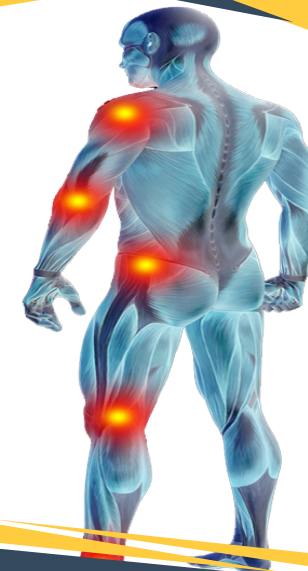
TO DONATE, VISIT PDPROGRAM.ORG

This information is not a substitute for medical advice. Consult your Physician before applying this information.

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Frequently asked questions about PARKINSON'S DISEASE & PAIN



ENGLISH - 15



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"Those who fight Parkinson's with knowledge always find solutions"- Dr. Rana

Parkinson's disease is a progressive neurodegenerative condition characterized by tremors, slowness of movements, stiffness, and balance problems. In addition, Parkinson's has many non-motor symptoms such as memory or cognitive issues, speech and swallowing problems, depression, and sleep difficulties.

HOW COMMON IS PAIN IN PARKINSON'S DISEASE?

Pain is reported by 60-80% of patients with Parkinson's disease. The magnitude of pain experienced may vary among patients. Some feel numbness, tingling, tightness, burning sensations, and aching, while others suffer excruciating pain. These symptoms may become more prominent when the effect of medications wears off. Pain is one of the under studied symptoms of Parkinson's. The exact mechanisms of pain associated with Parkinson's remains unclear. Peripheral mechanical factors such as muscular contractions, dystonia, and abnormal posture may also play a role in causing pain in certain patients. Some Parkinson's patients may have painful muscle spasms in the legs or feet during the early morning, are a result of low levels of dopaminergic medications in their body

WHERE IS PAIN OFTEN EXPERIENCED?

Pain is commonly associated with the lower extremities, the legs, feet, and toes. Some patients also experience proximal limb pain as well as discomfort in their shoulders. These symptoms tend to manifest more on the side that is initially affected by Parkinson's.

Approximately 75% of patients also report back pain, which does not correlate with disease duration or age. Abnormal posture and altered muscular tone may contribute to back pain.

WHEN DOES PAIN NORMALLY START?

Pain usually starts after the onset of Parkinson's. Parkinson's patients who experience pain as a symptom may have more severe motor problems as well as depressive symptoms compared to those who don't have pain.

Younger patients often have more severe cases of chronic pain. Occasionally these symptoms may be more prominent in the mornings or during periods when the effects of Levodopa wear off.

HOW DOES THE PAIN IMPACT LIFE OF PARKINSON'S DISEASE PATIENTS?

Pain can cause patients difficulty doing their routine tasks such as household chores, which makes them dependent on others. Their dependence on others may lead to more financial stress for themselves and their care partners. These disabilities may require patients to be wheelchair or bed bound, which has its complications. Indirectly, patients can get pressure sores, pneumonia, or weekly bone loss. Pain can also cause fatigue, with patients having difficulty in falling asleep, having multiple awakenings, difficulty turning in bed, emotional instability, anxiety, and restlessness.

HOW THE PAIN ASSOCIATED WITH PARKINSON'S IS DIFFERENT FROM THE PAIN CAUSED BY OTHER CONDITIONS?

Pain from conditions such as arthritis can be distinguished from pain as a result of Parkinson's. Pain due to Parkinson's usually differs from pain due to other causes in terms of onset, aggravating factors, and response to medications. Pain as a symptom of Parkinson's is usually more intense but is less often reported to physicians. It may not be exacerbated by physical exertion but gets worse when Levodopa wears off.

HOW CAN WE REDUCE THE PAIN RELATED TO PARKINSON'S?

It is important to first rule out other causes such as nerve damage, degenerative spine disease, arthritis, rheumatism, and musculoskeletal disorders that are not related to Parkinson's. A variety of measures can be used to treat pain:

- Massage therapy
- Applying heat
- Hydrotherapy
- Relaxation techniques (i.e. meditation)
- Gentle range of motion (ROM) exercises (may help retain mobility and flexibility in joints)
- Physiotherapy
- Resting periods during the day
- Short naps
- Swimming
- Maintain normal height and weight ratio
- Back brace
- Medications to relieve pain

DO PARKINSON'S PATIENTS EXPERIENCE BACK PAIN AS WELL?

74 percent of Parkinson's disease patients also report back pain, which may not correlate with the duration of the disease or age of the patient. Pain radiating to legs as well as non-radiating types of pain have been reported by patients. Postural abnormalities and altered muscular tone in Parkinson's disease may contribute in causing back pain. The following strategies can help back pain:

- Regular and gentle exercise
- Physiotherapy consultation
- Consultation with an orthopedic surgeon if intractable problem
- Spinal surgery might be needed